# Thursday, 24 June (all times GMT/UTC +2)

**1. Changing behaviour to solve environmental problems**

Plenary - Thursday, 24 June (8:00 AM - 9:00 AM)

Components: *Conceptual analysis, Literature review*

Categories: Changing pro-environmental behaviour, Educational settings, Changing environmental behaviour

*Target Audience: Beginner*

Linda Steg, University of Groningen

Many environmental problems can be reduced when people would more consistently engage in sustainable behaviour. Many approaches to encourage sustainable behaviour target extrinsic motivation, by offering incentives that change personal costs and benefits of behaviour. Yet, such approaches may not always be as effective as assumed. I will discuss factors and strategies that can foster intrinsic motivation to act pro-environmentally. Intrinsically motivated people behave without being coerced or incentivised, even when pro-environmental behaviour is somewhat costly, as doing so is meaningful and makes them feel good.

Educational Objectives:

1. Effectively communicate why acting pro-environmentally is important to encourage behavior change.

2. Explain why intrinsic motivation is an important predictor of pro-environmental action.

3. Explain how to foster intrinsic motivation.

**2. Personalising digital health interventions applying N-of-1 methods.**

Invited - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Didactic presentation*

Categories: Behavioral medicine, Clinical Interventions and Interests, Research methods, Digital health, Health psychology, N-of-1

*Target Audience: Beginner*

Dominika Kwasnicka, M.A., M.Sc., Ph.D., University of Melbourne

Theories of behaviour change and health behaviour change interventions are usually tested in conventional between-participant designs. However, most of these theories and interventions ultimately focus on within-participant change. This mismatch is fundamentally problematic. Appreciation of this is fuelling the growing interest in N-of-1/within-participant methods in behavioural medicine, yet there is currently a shortage of opportunities to learn about within-participant approaches.

The talk will include: (I) presentation of N-of-1 method (design overview, theory and basic principles); (II) introduction to observational N-of-1 studies and their practical application; (III) introduction to N-of-1 RCTs and their practical application; and (IV) general elaboration of key priorities (e.g., application, personalising behavioural interventions, data analysis, limitations of the design) and advantages and disadvantages of using this method.

WHY SHALL I ATTEND? Knowledge of how to employ N-of-1 methods enables researchers to capitalise on the recent technology development to design behavioural studies and interventions which are tailored to each individual. Using unobtrusive data capture such as wearables and smartphone sensors, combined with Ecological Momentary Assessment, allows to develop truly personalised treatments. We are therefore at an opportune time to expand our use of within-person designs to better understand health behaviour and to deliver precision behaviour change interventions.

Educational Objectives:

1. Define how N-of-1 methods (also known as single-patient N-of-1 studies) can be applied to identify predictors of behavioural outcomes.

2. Provide examples of practical personalised behaviour change interventions.

3. Prioritise types of behavioural issues most amenable to N-of-1 approaches.

**3. Advances/innovations in telehealth: Technology-based ACT interventions for transdiagnostic behavioral health concerns: Hawai'i Chapter Sponsored**

Symposium - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Original data*

Categories: Behavioral medicine, Clinical Interventions and Interests, Telehealth, ACT

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Samuel Spencer, M.A., University of Hawai'i at Mānoa

Discussant: Louise McHugh, Ph.D., University College Dublin

Orla Moran, Ph.D., DkIT

Joseph Lavelle, M.Sc., University College Dublin

Greta Somaini, M.Sc., Royal Holloway University of London

Past research has demonstrated the potential for flexible adaptation of acceptance and commitment therapy (ACT) in terms of format and method of delivery. Technology-based ACT interventions are also growing exponentially, especially in the context of the Covid-19 pandemic (Pierce et al., 2020). While technological advances allow us to reach more individuals, further research is needed to understand the specific adaptations and considerations needed to implement technology-based ACT. This symposium seeks to further this goal by exploring the processes of change and outcomes within technology-related ACT interventions and highlights specific considerations for adapting ACT for telehealth-related purposes. The first paper investigates the suitability of a digital ACT intervention for the improvement of self-management behaviors and psychological flexibility in a sample of cardiac patients. The second paper examines a brief telehealth ACT intervention for psychological issues related to irritable bowel disease (IBD). The third paper describes a series of case studies investigating process-based telehealth ACT for mental health concerns centered around experiential avoidance. The final paper examines a web-based ACT intervention for individuals with type 1 diabetes.

* A Single Case Experimental Design to Evaluate a Digital ACT Intervention for Improving Self-Management Behaviors in Cardiac Patients

Orla Moran, Dundalk Institute of Technology

Oonagh Giggins, Dundalk Institute of Technology

Suzanne Smith, Dundalk Institute of Technology

Louise McHugh, University College Dublin

Evelyn Gould, Harvard Medical School

Julie Doyle, Dundalk Institute of Technology

While limited research has been conducted with cardiac patients, Acceptance and Commitment Therapy (ACT) has consistently demonstrated positive outcomes in those with chronic health conditions. However, most empirical investigations conducted to date also involve in-person therapy, which can be difficult to access for those dealing with the demands of chronic disease. This research aims to develop and evaluate a digital ACT intervention to improve self-management behaviors and psychological flexibility in cardiac patients. The intervention is delivered via a digital health self-management platform over 6 weeks with once weekly live video sessions and involves a randomized-multiple baseline Single Case Experimental Design (SCED) with approximately 15 adults with cardiac disease. The Independent Variable for each participant will be pre- post intervention phase. Dependent variables will be daily self report measures of psychological flexibility, as well as objective measures of self-management and engagement with the app. Findings will be discussed in terms of how a digital ACT intervention can best meet the needs of cardiac patients.

* A Single Case Experimental Design (SCED) evaluating a two-session telehealth Acceptance and Commitment Therapy (ACT) intervention for stress in Inflammatory Bowel Disease (IBD)

Joseph Lavelle, University College Dublin

Darragh Storran, Saint Vincent’s University Hospital

Noemi De Dominicis, Saint Vincent’s University Hospital

Ian Hussey, Ghent University

Hugh E. Mulcahy, Saint Vincent’s University Hospital

Louise McHugh, University College Dublin

Despite evidence of a link between elevated stress and disease activity in Inflammatory Bowel Disease (IBD), few patients receive psychological interventions to reduce stress. However, brief telehealth interventions may be one avenue to address this treatment need. The current study employs a randomized multiple baseline design to analyze the effect of a two-session telehealth acceptance and commitment therapy (ACT) protocol in the treatment of stress in patients with an IBD diagnosis. Fifteen adults diagnosed with an IBD and experiencing moderate to extreme Depression Anxiety and Stress Scale-21 (DASS-21)-measured stress participated in the study. Participants reported daily stress and psychological flexibility via four single-item scales and completed 2- to 6-week baselines without showing improvement trends in stress. Following baseline stress measurement, participants received two sessions of ACT (lasting 90 minutes each and separated by seven to ten days) via a video conferencing platform. Results are presented for daily and standardized measures of stress and psychological flexibility. Results will be considered in the context of optimizing intervention delivery via telehealth and the Covid-19 pandemic.

* Telehealth process-based ACT in the context of the COVID-19 pandemic: A series of case studies examining engaged living and experiential avoidance as processes of change

Samuel D. Spencer, M.A., University of Hawaiʻi at Mānoa

Joanne Qina'au, M.A., University of Hawaiʻi at Mānoa

Duckhyun Jo, M.A., University of Hawaiʻi at Mānoa

Monet Meyer, M.A., University of Hawaiʻi at Mānoa

Akihiko Masuda, Ph.D., University of Hawaiʻi at Mānoa

Acceptance and commitment therapy (ACT) has been conceptualized as a process-based, transdiagnostic approach to treatment that seeks to increase values-based, adaptive functioning (i.e., engaged living [EL]) and attenuate the impact of psychopathological repertoires of experiential avoidance (EA). The present study examined EL and EA as processes of change within a 10-week course of individually delivered process-based ACT. Participants included a university-based sample of three women (ages 20-54) with transdiagnostic mental health concerns associated with elevated EA. Variables of interest included daily self-monitored clinically relevant behavioral excesses and deficits, daily and weekly measures of EL and EA, and pre-, mid-, post-treatment, and 3-month follow-up measures of psychopathology, quality of life, and ACT-related outcome variables. Exploratory process of change analyses also examined whether changes in EL and EA preceded changes in clinically relevant target behaviors. Data collection is currently ongoing, but preliminary results indicate tentative support for the efficacy of the ACT intervention on measured variables. Results will be discussed in the context of COVID-19-related adaptations (including telehealth), and within the framework of process-based ACT.

* A Single Case Experimental Design to Examine Feasibility, Acceptability and Preliminary Effectiveness of a Web-based ACT Intervention for Adults with Type 1 Diabetes

Greta Somaini, Royal Holloway University of London

Jessica Kingston, Royal Holloway University of London

Michelle Taylor, Royal Holloway University of London

Acceptance and Commitment Therapy (ACT) is accruing evidence for its effectiveness in improving psychosocial and health outcomes in individuals with diabetes. Digital delivery of ACT has shown favourable outcomes for people with long-term health conditions, however research examining its digital delivery in the diabetes population is limited. This study aimed to develop a web-based ACT intervention for adults with type 1 diabetes (T1D) and examined its impact on diabetes self-management, well-being, quality of life and ACT processes. Feasibility and acceptability were also explored. A randomized multiple-baseline Single Case Experimental Design (SCED) was adopted, with 6 adults with T1D recruited through UK-based diabetes support groups and social media. Participants were randomised to baseline length (1-3 weeks) before accessing a 6-week ACT intervention delivered via an online platform, followed by one-month follow-up. Visual analogue scales measuring self-management, well-being and self-reported blood glucose levels were recorded daily throughout the study duration. Results will be discussed in the context of the impact of digital ACT on psychological, behavioural and physical health outcomes in diabetes.

Educational Objectives:

1. Apply telehealth- and technology-based adaptations to ACT interventions discussed in the symposium to their own clinical and research activities.

2. Describe recent advances in the application of ACT to transdiagnostic mental and physical health concerns.

3. Demonstrate knowledge of the benefits and feasibility of single-case experimental designs (SCEDs) in telehealth ACT-based intervention research.

**4. Psychological Flexibility as a malleable health target - from methodical considerations to real-world applications**

Symposium - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Behavioral medicine, Psychological Flexibility, ACT, Chronic Headaches, Fibromyalgia, Transdiagnostic Patients, Health Behavior, Basic Research

*Target Audience: Beginner, Intermediate*

Chair: Elisa Haller, Ph.D., University of Basel

Discussant: Lance McCracken, Ph.D., University of Uppsala

Andria Christodoulou, M.A., University of Cyprus

Vasilis Vasiliou, Ph.D., University College Cork, Ireland

Victoria Block, M.Sc., University of Basel

Mónica Hernández-López, Ph.D., University of Jaén

Gains in Psychological Flexibility (PF), a measurable outcome in Acceptance and Commitment Therapy (ACT), have been linked to increases in wellbeing and reduced suffering. Researchers agree that it is an important construct and at the same time continue to debate how to measure it accurately. This symposium presents studies that include PF ranging from basic research to applied clinical science: First, a latent model analysis evaluated the differences between multidimensional assessments of PF to assessments that only measure part of the construct. Second, PF was investigated as a mediator of changes in health-related behaviors in a study where chronic headache sufferers received an ACT intervention. Third, associations between psychological flexibility, personal values, and changes in health-related behaviors (sleep, sport, healthy nutrition) in psychiatric patients undergoing ACT were investigated. Last, in a study for chronic sufferers of fibromyalgia, PF was investigated as a mediator of positive change in mental health outcomes. Overall, this symposium presents a new way of evaluating PF measures and presents three different applied approaches in the field.

* Examination of the components of the Psychological Flexibility model with alternative psychometric scales

Andria Christodoulou, M.A., University of Cyprus

Michalis Michaelides, Ph.D., University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Psychological Flexibility (PF) has been widely studied as a process-based construct consisting of a set of skills. Existing measures for the assessment of the PF skills face several issues with their factorial structure, validity, and reliability. The new MPFI scale appears very promising for the comprehensive study of all PF components in one testing session. By administering the MPFI scale and a battery of six different scales (AAQ, CFQ, CAMS-R, SACS, VQ, CAQ) to two samples of 501 and 428 online participants respectively, we aimed to compare which set of scales better evaluates the PF components. Data from the MPFI scale were consistent with the Hexaflex version of the PF model with a few measurement issues identified. In contrast, data from the battery of six separate scales did not confirm any of the a priori theoretical PF models and resulted in a post-hoc nine-factor model. The MPFI might be an empirically validate tool for examining the PF model comprehensively, whereas the different measures are in need of revisions.

* Psychological Flexibility as a Process of Change in Reducing Disability and Increasing Functioning in Primary Headache Sufferers

Vasilis S. Vasiliou, Ph.D., University College, Ireland

Maria Karekla, Ph.D., University of Cyprus

Headaches substantially impair individuals’ functioning and are often associated with other disruptions in healthy behaviours. Yet, it is unknown which key processes can best promote and maintain healthy behaviours. Acceptance and commitment therapy (ACT) proposes psychological flexibility (PF) with its processes as the mechanism via which intervention changes occur. We examined the PF processes as mediators by which ACT exerts its effects on disability and quality of life. 94 individuals with primary headaches (M=43 yrs; 84% females), randomized in ACT vs Wait List control groups (N&#3f47 each), and completed health behaviors and PF process questionnaires at pre- (T1), post-treatment (T2), and 3-month follow-up (T3). Results (bootstrapped) demonstrated mediating effects of pain acceptance, values progress, psychological inflexibility in pain, and avoidance of pain in the ACT group, compared to control, on disability and quality of life at T1-T2 and T1-T3. Changes in PF processes (i.e., headache acceptance, values-based actions, and lowering avoidance of head pain) lower the disability headache sufferers experience and improve their quality of life. Targeting PF processes can facilitate changes in healthy behaviours.

* My health is important to me! – The contribution of ACT to increases in healthy behaviors in psychiatric patients

Victoria J. Block, M.Sc., University of Basel,

Andrew T. Gloster, Ph.D., University of Basel

Mental illness is often accompanied by difficulties in day-to-day health behaviors. Acceptance and Commitment Therapy (ACT) helps patients choose their values and make value-oriented behavioral choices. Health behaviors (enough sleep, sport/movement, healthy eating/drinking) of psychiatric patients were recorded with Experience Sampling Method (ESM) across one week at beginning and end of therapy. The individual emphasis on health as a value was measured with the Valued Living Questionnaire. Patients reported similar importance of health as a value from BL (M=7.4, SD=2.14) to Post (M=7.64, SD=2.20). Patients reported improved sleep quality, increased movement (all types), a slight increase in caffein consumption, and no changes in vegetables/fruits, alcohol, and cigarettes consumed when comparing BL to Post. However, less people reported to be smoking at Post.

Further analysis will introduce health values as a moderator. We expect participants who report health as an important personal value to show a bigger change in health behaviors than participants who do not. Findings suggest that ACT could support psychiatric patients in living their personal health values and to increase healthy behavioral choices.

* Promoting Psychological Flexibility in Fibromyalgia Patients through an Online Group ACT Intervention

Pablo de la Coba, University of Jaén

Mónica Hernández-López, University of Jaén

Miguel Rodríguez-Valverde, University of Jaén

There is growing evidence on the role of psychological flexibility as a key process that can be targeted in health-promotion interventions. Specifically, with chronic pain patients' psychological flexibility appears to mediate improvements in quality of life and engagement in valued activities. This exploratory study examines the role of psychological flexibility on treatment outcomes for eight fibromyalgia patients receiving an online ACT group intervention (five weekly 90-minute sessions). Pre and post-intervention participants were assessed with standard measures of chronic pain acceptance, psychological inflexibility regarding pain, fibromyalgia impact on quality of life, the evaluative dimension of pain, anxiety and depression. In addition, participants underwent ecological momentary assessment (through online 4-minute surveys administered on random days and times every week for six weeks pre-treatment, five weeks during treatment, and six-weeks post-treatment, the latter still ongoing) of cognitive fusion and pain acceptance. Preliminary results show significant increases in activity engagement, pain acceptance and quality of life, as well as decreases in psychological inflexibility and anxiety. Non-significant changes were observed in depression and evaluative pain.

Educational Objectives:

1. Explain the various ways that Psychological Flexibility can be measured and can differentiate between methods and their quality.

2. Describe two areas of chronic physical ailment and know the impact of ACT interventions on those ailments.

3. Define health and health behaviors and which behaviors can be isolated and looked at when researching the impact of ACT on health behaviors.

**5. Sexual and romantic connection and victimization: Uncovering predictor and moderator variables.**

Symposium - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Interpersonal relationships, Romantic relationships, Victimisation

*Target Audience: Beginner, Intermediate*

Chair: Daniel Maitland, Ph.D., Morehead State University

Discussant: Matthew Skinta, Ph.D., ABPP, Roosevelt University

Vasiliki Christodoulou, Counselling Psychology Psych\_D, University of Central Lancashire Cyprus

Emma Gundler, Morehead State University

Kayla Marie Daulton, BSc Student, Morehead State University

Chrystala Elia, University of Central Lancashire Cyprus

Ronald Rogge, Ph.D., University of Rochester

Establishing safe and close interpersonal relationships can enhance one’s quality of life (McCann et al., 2019) and act as a psychological protective factor. The cost of lacking relational closeness has been emphasized further during the physical and social distancing of the Covid-19 pandemic (Luetke et al., 2020). The symposium will present five studies investigating variables that predict or moderate the development of satisfying forms of romantic, sexual, family and social closeness (e.g., in-person or video) as well as variables that predict the engagement with less satisfying (e.g., problematic pornography consumption) or even pathological forms of relational responding (e.g., relational aggression, sexual compulsion). Specifically, the studies consider the role of variables such as fear of intimacy, experiential avoidance, loneliness, self-compassion, personal values, and dark personality traits in pursuing, experiencing, and perceiving what is satisfying and acceptable in interpersonal relationships. The research questions are approached through experimental, quasi-experimental, longitudinal and survey studies including participants from at least three countries (i.e., US, UK, and Cyprus) and from different age ranges (e.g., young adults, general population).

* The role of depression and fear of intimacy on differences in building social connection in person compared to a video chat setting.

Emma Gundler, Morehead State University

Daniel Maitland, Morehead State University

Given the impact of Functional Analytic Psychotherapy (FAP) on interpersonal connection (Maitland et al., 2017), researchers interested in FAP have increasingly shifted their focus to understanding the processes and moderates that influence feelings of connection and intimacy (e.g., Kanter et al., 2020). Given the theorized role of intimacy (Maitland, 2020) in the development of loneliness, and the prevalence of loneliness and social isolation in the era of COVID-19 (Kilgore et al., 2020), understanding how digital communication impacts feelings of closeness has become increasingly important. The current study utilizes an established protocol for generating feelings of closeness (Aaron et al., 1997) and compares individuals who engaged in the experiment in-person to those that completed the experiment through video conferencing software. Primary findings explore the vulnerability, responsiveness, and feelings of connection reported by each participant. Secondary findings exploring the influence of moderators on the process or outcomes of the experiment will also be presented. Findings will be discussed in the context of social connection in the age of COVID-19 and informing telehealth.

* How fear of intimacy impacts our sex life: A quasi experimental design.

Kayla Daulton, Morehead State University

Daniel Maitland, Morehead State University

The relationship between sexual satisfaction and interpersonal intimacy is relatively well established (Freihart et al., 2020). However, little is known about how deficits in intimacy may impact maladaptive such as problematic pornography consumption or sexual compulsivity. Previous research has indicated that experiential avoidance, a conceptual precursor to a fear of intimacy (Maitland, 2020), predicts some of these problematic behaviors (Levin et al., 2019). Similarly, loneliness, thought to partially result from loneliness, is predictive of pornography use (Butler et al., 2018) and sexual compulsivity (Chaney & Burns-Wortham, 2015). The current study sought to investigate the role of fear of intimacy in sexual satisfaction, problematic pornography consumption, and sexual compulsivity. It’s hypothesized that those who experience higher fear of loneliness are more likely to engage in problematic viewing, have lower sexual satisfaction, and are more likely to engage in sexually compulsive behaviors. A quasi-experimental design was utilized allowing for the comparison between rural vs urban-dwelling individuals and Latinx compared to non-Latinx individuals. These comparisons will be used to lead a discussion around the primary findings.

* Psychological flexibility, self-compassion and relational aggression in college students.

Vasiliki Christodoulou, University of Central Lancashire Cyprus

Chrystala Elia, University of Central Lancashire Cyprus

Savas Hatdjigeorgiou, University of Central Lancashire Cyprus

The study sought to investigate the predictive strength of psychological flexibility, self-compassion, and mindfulness on young adults’ self-reported engagement in relational aggression, victimization and prosocial behaviour. Four-hundred students (pending data collection) in tertiary education completed self-report measures on self-compassion, mindfulness, psychological flexibility, psychological wellbeing, romantic and peer aggression and victimization and peer prosociality. Preliminary results indicated that psychological flexibility, mindfulness, and self-compassion significantly predicted of lower levels of self-reported romantic and peer aggression and victimization and higher levels of prosocial behaviour. The study further considers the effect of individual facets of mindfulness and self-compassion and their individual contribution to the predictive models. The findings indicate the preventive importance of introducing programs to enhance psychological flexibility and self-compassion in young adults.

* The impact of gendered perceptions, personal values, psychological rigidity in perceived intimate partner violence normality.

Chrystala Elia, University of Central Lancashire Cyprus

Vasiliki Christodoulou, University of Central Lancashire Cyprus

The perceived normality of intimate partner violence (IPV) can influence individuals’ help-seeking behaviour as well as one’s motivation to report witnessed violence. This study sought to investigate the perception of the normality of intimate partner violence (IPV) using vignette stories portraying both female and male victims and perpetrators, presenting a gradation of IPV severity. Participants were members of the public (pending completion of data collection) who were randomly presented with one out of 10 IPV vignette scenarios and asked to rate the severity of the perceived normality of violence. Participants also completed a series of measures including a measure psychological inflexibility (EPIC), personal values (Schwartz Value Survey), attitudes towards interpersonal violence and a measure of Dark personality traits (SD3). It is hypothesized that psychological inflexibility and dark personality traits will positively predict IPV normalization while the endorsement of different value domains (e.g., conformity, tradition, benevolence, universalism, power, stimulation) is expected to moderate this relationship. The findings could have important implications in modifying the way in which preventative messages are being delivered taking into consideration the receptivity of the audience.

* Psychological flexibility as a source of longitudinal resiliency during the COVID-19 pandemic.

Ronald D. Rogge, Dept of Psychology, University of Rochester

Jennifer S. Daks, Dept of Psychology, University of Rochester

Jack S. Peltz, Dept of Psychology, Daemen College

Background: The current study used a contextual behavioral science lens on 9 waves of weekly data collected near the start of the pandemic to examine the spillover hypothesis of Family Systems Theory as a framework for understanding how parents’ psychological flexibility could shape the impact of COVID-19 on families.

Methods: A total of 742 coparents (71% female; 84% Caucasian, 85% married, M = 41yo) of children (ages 5–18, M = 9.4yo, 50% male) completed baseline survey in April 2020 and then completed up to 8 weekly follow-up surveys.

Results: Multilevel path analyses highlighted that parent flexibility helped promote adaptive family dynamics whereas parent inflexibility was predictive of a negative cascade of greater COVID-stress predicting greater family discord, predicting more caustic parenting, predicting poorer child and parent outcomes. These effects emerged in varying degrees both at the level of stable between-family differences and at the level of within-family change within specific weeks.

Conclusions: The current results highlight parental flexibility and inflexibility as critical factors shaping how families respond and adapt to the pandemic.

Educational Objectives:

1. Describe the relationship between fear of intimacy and problematic relational behaviours such as pornography consumption or sexual compulsivity.

2. Describe the comparative effectiveness of a protocol for generating closeness in-person and through video conferencing software.

3. Discuss the role of psychological flexibility on perceived interpersonal violence normalisation and in adaptive family practices.

**6. ACT with Parents of Children with Health Conditions**

Symposium - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Avoidance, Distress, Cancer, Children, Parents, Qualitative study, Delphi study, Autism Spectrum Disorder, Psychological Flexibility

*Target Audience: Beginner, Intermediate, Advanced*

Koa Whittingham, Ph.D., The University of Queensland

Xiaohuan Jin, The Chinese University of Hong Kong

Yuen yu Chong, Ph.D., The Chinese University of Hong Kong, Faculty of Medicine

Anna Pyszkowska, M.A., University of Silesia in Katowice, Poland

Jessica Cook, M.Ed., The University of Memphis

Mary Keenan, M.S., University of Memphis

Parents of children with health conditions, such as cerebral palsy, cancer and autism spectrum disorders face significant and stress and challenges in management. The current symposium presents four papers on parenting and parenting interventions. The first paper reports on an RCT of an online intervention for parents of children with cerebral palsy. This is followed by a thematic analysis of distress and avoidance in parents of children with cancer. The final two papers report on the acceptability and effectiveness of online, offline and blended interventions for parents of children with autism spectrum disorders.

* Parenting Acceptance and Commitment Therapy: an RCT of an online course with families of children with CP

Koa Whittingham, Queensland Cerebral Palsy and Rehabilitation Research Centre, Child Health Research Centre, Faculty of Medicine, The University of Queensland, Brisbane

Jeanie Sheffield, School of Psychology, The University of Queensland, Brisbane, Australia

Catherine Mak, Queensland Cerebral Palsy and Rehabilitation Research Centre, Child Health Research Centre, Faculty of Medicine, The University of Queensland, Brisbane

Ashleigh Wright, Queensland Cerebral Palsy and Rehabilitation Research Centre, Child Health Research Centre, Faculty of Medicine, The University of Queensland, Brisbane

Roslyn Boyd, Queensland Cerebral Palsy and Rehabilitation Research Centre, Child Health Research Centre, Faculty of Medicine, The University of Queensland, Brisbane

Objective: Trial an online parenting intervention grounded in ACT for parents of children with cerebral palsy (CP).

Design: Randomised controlled trial (RCT)

Method: 67 families of children (mean age 5.62 SD 2.44, sex male n = 48) with cerebral palsy (CP) participated. PACT was delivered via edX and videoconferencing. Assessments focussed on emotional availability, adjustment and quality of life (parent and child) at baseline, post-intervention and 6 month follow-p. Analysis via linear regression.

Results: An intervention effect was demonstrated for two aspects of observed emotional availability: parental non-intrusiveness p =.050 and child involvement, p =.011. Further intervention effects were found in parent-reported emotional availability for child involvement, p = .012, parent-report measures of child quality of life [social wellbeing and acceptance, p = .025; participation and physical health, p = .024] and parental mindfulness p = .041. No effects on parent or child adjustment.

Conclusion: PACT demonstrated an intervention effect across emotional availability—parental non-intrusiveness and child involvement—parental mindfulness and child quality of life.

* The experience of cancer-related distress and avoidance in parents of children with cancer: A qualitative study

Xiaohuan JIN, Ph.D. Candidate, The Chinese University of Hong Kong

Wenying YAO, RN, Children’s Hospital of Soochow University

Cho Lee WONG, Ph.D., The Chinese University of Hong Kong

Huiyuan LI, Ph.D. Candidate, The Chinese University of Hong Kong

The purpose of this study is to explore the experience of cancer-related distress and avoidance in parents of children with cancer in the early stage of treatment (i.e., first six months after diagnosis). Data was collected from 21 parents through semi-structured interviews. Nvivo software (version 12) was used for coding. Six themes emerged from the analysis: (1) shocked and unacceptable when cancer was diagnosed; (2) avoidance of experiencing too many emotions by distraction, hiding of emotions and evading cancer-related questions; (3) emotional fluctuations reinforced by high vigilance and desire for control; (4) negative thought patterns; (5) loss of the normal way of life (6) redefinition of the value order. This is the first study to explore the psychological distress and avoidance among Chinese parents of children with cancer in the early stage of treatment. The research acted as a key element of intervention development for these parents, contributing to the scope of practice in the clinical.

* The development of blended Acceptance and Commitment Therapy for parents of preschool children with autism spectrum disorders: A delphi study

Yuen Yu Chong, Ph.D., The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong

Stanley Kam Ki Lam, Ph.D., School of Nursing, LKS Faculty of Medicine, The University of Hong Kong

Wai Tong Chien, Ph.D., The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong

Highly stressed parents of preschool children with autism spectrum disorders rarely receive psychotherapies due to limited options, long waiting time and social stigma of seeking mental health services. A blended (online and face-to-face) Acceptance and Commitment Therapy (ACT) is increasingly popular in mental health care for its synthesized optimizing benefits. A Delphi study was conducted in Sept 2020 to find consensus on suitable blended protocols (content, sequence and ratio) in a sample of 16 parents and health care professionals in Hong Kong. Blended ACT delivered via a mobile application was positively perceived by both groups of participants, while health care professionals were expecting more face-to-face sessions (>70&#37; of therapy) than parents (

* Effectiveness of on-line and off-line Acceptance and Commitment Therapy (ACT) in parents of children with autism spectrum disorder

Anna Pyszkowska, University of Silesia in Katowice, Poland

The aim of the study was to measure the effectiveness of ACT in parents of children with autism spectrum disorder in a Polish sample. Participants were able to participate in the study in three groups: 1) off-line ACT-based group (20 persons), 2) on-line ACT-based group (20 persons), and control group (20 persons) that did not receive any treatment. The intervention was delivered in a group format consisting of four two-hours long meetings in a span of one moth. Bonferroni-corrected contrasts revealed similar results in both off-line and on-line ACT-based groups. Psychological flexibility, self-compassion, ego-resiliency and quality of life rates significantly improved from pre to post-intervention (1 week) and pre to follow-up (1 month); depression, anxiety and stress rates significantly decreased from pre to post-intervention and pre to follow-up. In all cases, no significant changes were identified from post to follow-up which implies that the changes achieved in post-intervention were maintained in a follow-up. The unique value of this study was a comparison of off-line and on-line ACT interventions using the same protocol.

* Measuring Diabetes-Specific Psychological Flexibility Efficiently in Youth and Caregivers: The Diabetes Acceptance and Action Scale Short Forms

Mary Keenan, M.S., The University of Memphis

Jessica Cook, M.Ed., The University of Memphis

Kristoffer Berlin, Ph.D., The University of Memphis; University of Tennessee Health Science Center

Katherine Semenkovich, M.S., The University of Memphis

Kimberly Klages, Ph.D., Cincinnati Children’s Hospital

Tiffany Rybak, Ph.D., Cincinnati Children’s Hospital

Gabrielle Banks, Ph.D., University of Mississippi Medical Center

Adora Choquette, B.A., The University of Memphis

Ramin Alemzadeh, M.D., University of Tennessee Health Science Center

Angelica Eddington, Ph.D., University of Tennessee Health Science Center

Psychological flexibility significantly impacts caregiver and youth well-being in diverse samples. Research related to diabetes-specific psychological flexibility on individual and family adjustment to Type 1 Diabetes (T1D) is scarce, particularly in income and racially diverse samples. Additionally, research measures quickly become burdensome during time-limited medical visits. While two measures of T1D-specific psychological flexibility in youth with T1D and their caregivers, the Diabetes Acceptance and Action Scale (DAAS-22) and the Diabetes Acceptance and Action Scale-Caregiver Report (DAAS-CR), respectively, were recently confirmed to be psychometrically sound, their length may prove burdensome to complete during routine endocrinology visits. Additionally, the ability of the DAAS-22 and DAAS-CR to measure psychological flexibility similarly across diverse groups of individuals has not yet been confirmed. With the purpose of furthering research on diabetes-specific psychological flexibility, the present study created 3 and 9-item short forms of the DAAS-22 and DAAS-CR, and evaluated their psychometric properties in a diverse sample in the Mid-South, USA. Measurement invariance was explored across demographically distinct groups (e.g., race, gender, income, HbA1c).

Educational Objectives:

1. Describe outcomes for ACT interventions for parents of children with health conditions.

2. Identify themes of psychological distress and avoidance among parents of children with health conditions.

3. Discuss the acceptability of online, mobile and blended parenting interventions.

**7. Surfing the Urge and Riding the Wave Towards What Matters Most: ACT and Integrative Harm Reduction Psychotherapy**

Workshop - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Theoretical and philosophical foundations, Substance Misuse, Addiction

*Target Audience: Beginner, Intermediate*

Adam Frankel, CGP, Ph.D., The Center for Optimal Living

Rachel Harrus, B.A., Center for Optimal Living

This workshop will focus on training participants in treatment techniques located at the intersection between Acceptance and Commitment Therapy and Integrative Harm Reduction Psychotherapy (IHRP). IHRP is a treatment model developed for working with clients who have substance misuse challenges. The workshop’s discussion of using the two models in unison will identify how the seven therapeutic tasks of IHRP intersect with ACT's Hexaflex model. It will advance understanding of how ACT can be used with IHRP to help support comprehensive treatment approaches in working with individuals negotiating substance use. The experience will involve live demonstrations of clinical role plays and discussion of case-vignettes, which will help attendees develop core proficiencies of the intervention techniques and will ultimately go towards facilitating clinical implementation of the two ACT and IHRP models in practice.

Educational Objectives:

1. Identify and describe how the ACT Hexaflex model supports and informs the 7 therapeutic tasks of IHRP.

2. Identify clinical reads for opportunities where the ACT Hexaflex model can be integrated with the IHRP 7 therapeutic tasks for effective treatment intervention.

3. Identify 3 intervention techniques derived from the simultaneous use of IHRP and ACT in the treatment of individuals negotiating substance use challenges.

**8. Together we can build a digital platform to help the world! - Let’s co-create and give it to all, for free!**

Workshop - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Prevention and Community-Based Interventions, Functional contextual approaches in related disciplines, Digital Self-help, Co-creation, Open-source, Research-platform, Behavior change at population level, Transformational Growth

*Target Audience: Beginner, Intermediate, Advanced*

Fredrik Livheim, Ph.D., Karolinska Institutet

Jenny Rickardsson, Ph.D., Karolinska institutet and 29k (non-profit org)

We believe the human-caused climate change, the mental health crisis, rising inequalities and political turmoil are symptoms. The root cause of these crises may be how we individually and collectively detach from ourselves, each other and nature. Our belief is that psychological tools can help people connect with themselves, each other, the world and become wiser decision makers.

Therefore, we are creating a digital, app-based platform grounded in Contextual Behavioral Science with the goal to measurably transform 5 million lives within three years.

This platform is non-profit, open source, free for end-users, and funded by philanthropists and partnerships. The release of the app less than a year ago already resulted in 60 000 downloads from +150 countries and a rating of 4.8 out of 5 in Appstore.

This workshop is an invitation to test the platform and to join us in co-creating content and research. The workshop will include an introduction to the platform, exercises and ideas on how to engage in co-creating this global initiative.

One-minute inspirational-video: https://youtu.be/29YL\_4aPxuM

Educational Objectives:

1. Explain how to use the digital 29k platform for oneself.

2. Describe how to use the digital 29k platform with clients.

3. Describe how you can engage in co-creating this global initiative.

**9. Feel the guilt and do it anyway**

Workshop - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, Guilt, Shame

*Target Audience: Beginner, Intermediate*

Aisling Leonard-Curtin, M.Sc. Couns. Psych., C.Psychol., Ps.S.I., Act Now Purposeful Living

Many clients say "I'd love to do X and not feel guilty about it". Struggling against feelings of guilt and fusion with thoughts about self-indulgence can prevent many clients from engaging in essential self-care and behavioural activation aspects of their functional contextual interventions. This workshop will address aspects of clients, and indeed clinicians, learning histories that contribute to guilt trips that lead to clients staying stuck in unhelpful and unworkable patterns of responding. You will also learn skills in terms of how to respond to client's guilt in a way that in ACT-consistent and effective. The trainer will demonstrate how to respond to entrenched guilt as it arises within session through a role play demonstration.

Participants will gain access to a series of worksheets that they can bring back to their clinical practice.

Educational Objectives:

1. Describe the functions of guilt and shame from a functional contextual perspective.

2. Explain how to use functional contextual skills in sessions with clients who experience entrenched guilt and shame.

3. Apply functional contextual skills to increase clients' psychological flexibility in the presence of guilt and shame.

**10. Encarnando metáforas en ACT: Como la experiencia corporal puede ser un vehículo en la implementación de ACT**

***Embodying metaphors in ACT: How bodily experience can be a vehicle in ACT implementation***

Workshop - Thursday, 24 June (10:00 AM - 11:30 AM)

Components: *Experiential exercises*

Categories: Clinical Interventions and Interests, Professional Development, Mindfulness

*Target Audience: Beginner, Intermediate, Advanced*

Manuela O'Connell, Lic., Private Practice, Universidad Favaloro

Los repertorios conductuales flexibles ocurren cuando aprendemos a movernos del mundo conceptual al mundo de la experiencia más directa. Las sensaciones son la base, el lugar en el que verdaderamente experimentamos la vida. En este workshop exploraremos cómo la experiencia corporal puede ser utilizada para promover conductas flexibles. Presentaremos el desarrollo de metáforas corporales y aprenderemos como al intervenir con ellas podemos apuntar a distintos procesos de ACT de una forma experiencial más encarnada y habitada. En este tipo de metáforas se utiliza la vivencia corporal como un vehículo para promover un mayor repertorio conductual y así contribuir a la flexibilidad psicológica. Los asistentes experimentarán diferentes metáforas corporales consistentes con ACT. También discutiremos acerca del uso de claves verbales al guiar éstas metáforas y qué tener en cuenta para desarrollar nuevas. Vamos a enfatizar principalmente cómo integrar la experiencia corporal con ACT de una manera contextual y funcional. El formato de este workshop incluye presentaciones didácticas y varios ejercicios experienciales.

*Flexible behavioral repertoires occur when we learn to move from the conceptual world to the world of more direct experience. Sensations are the foundation, the place where we truly experience life. In this workshop we will explore how bodily experience can be used to promote flexible behaviors. We will present the development of body metaphors and we will learn how by intervening with them we can point to different ACT processes in a more embodied and inhabited experiential way. In this type of metaphors, the bodily experience is used as a vehicle to promote a greater behavioral repertoire and thus contribute to psychological flexibility. Attendees will experience different body metaphors consistent with ACT. We will also discuss the use of verbal cues in guiding these metaphors and what to keep in mind to develop new ones. We are going to mainly emphasize how to integrate the bodily experience with ACT in a contextual and functional way. The format of this workshop includes didactic presentations and various experiential exercises.*

Educational Objectives:

1. Explique cómo se puede utilizar la experiencia corporal para promover la flexibilidad psicológica.

2. Describir cuándo y para qué usar metáforas corporales con los clientes.

3. Construir las propias metáforas corporales.

**11. Ego is the enemy of excellence: How to promote the letting go of ego (nonattachment)**

Workshop - Thursday, 24 June (10:00 AM - 1:15 PM)

Components: *Experiential exercises, Literature review*

Categories: Performance-enhancing interventions, Clinical Interventions and Interests, Peak Performance, Social connection

*Target Audience: Beginner, Intermediate, Advanced*

Joseph Ciarrochi, Ph.D., Australian Catholic University

Ego is the enemy of excellence. Ego is defending pride instead of learning from mistakes. Ego involves dominating others and appearing better rather than getting better. Based on past research, I argue nonattachment should not only promote people’s ability to reach their full potential in a performance domain; it should improve their ability to connect to family, friends and the wider community. In this workshop, you will learn to recognize when ego is impeding your client from developing into their full potential. You will also learn how positive thinking, reassurance, and self-affirmations can unintentionally feed attachment to ego, and make problems worse, not better. The workshop presents several concrete interventions, based on the RFT model of self, for promoting nonattachment to ego.

Educational Objectives:

1. Identify how attachment to ego/self-as-content can interfere with performance and relationships.

2. Utilize acceptance, self-as-process and self-as-context derived processes to promote a "letting go" of unhelpful self-concepts.

3. Describe the research supporting the benefits of nonattachment to performance and relationships.

**12. Current developments in ACT for individuals with Acquired Brain Injury and their carers**

Symposium - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Acquired Brain Injury

*Target Audience: Beginner, Intermediate*

Chair: Jess Kingston, B.Sc., M.Sc., Ph.D., DClinPsy, Royal Holloway, University Of London

Discussant: David Gillanders, DClinPsy, University of Edinburgh

Rebecca Andrews, B.Sc., Royal Holloway, University of London

Johanne Rauwenhoff, M.Sc., Maastricht University

Nick Sathananthan, MPsych, La Trobe University

Nils Rickardsson, M.Sc., NHS Lothian Neuropsychology Department and the University of Edinburgh

This international symposium brings together four independent research projects examining the clinical utility of ACT for individuals with Acquired Brain Injury (papers 1-3) and examining the role of psychological flexibility in carers of individuals with ABI (paper 4). Paper 1 reports on a series of Single Case Experimental Designs (SCED) examining the effects of ACT on depression, anxiety and quality of life for individuals with ABI in the Netherlands. Paper 2 presents SCED data from Australia, examining the effects of a group intervention combining ACT and Cognitive Remediation for outpatients with ABI, focusing on wellbeing, mood, self-efficacy, subjective cognitive complaints, and intervention acceptability. Study 3 presents SCED data from the UK, examining the effects of a 6-week values-intervention for in-patients with severe ABI on depression, adjustment and quality of life. Finally, study 4 examines the role of psychological flexibility and cognitive appraisals in understanding psychological distress and wellbeing in carers of individuals with ABI. The symposium will bring together learning and observations from across these projects, discussing implications and future directions for ACT and ABI.

* Acceptance and Commitment Therapy for anxiety and depressive symptoms following acquired brain injury: four single-case experimental design studies

Johanne Rauwenhoff, Maastricht University, Limburg Brain Injury Centre

Yvonne Bol, Zuyderland Medical Centre

Frenk Peeters, Maastricht University

Anja J.H.C. van den Hout, Zuyderland Medical Centre

Chantal A.V. Geusgens, Zuyderland Medical Centre, Sittard-Geleen/Heerlen

Caroline M. van Heugten, Maastricht University, Limburg Brain Injury Centre, Maastricht, and Department of Neuropsychology and Psychopharmacology, Faculty of Ps

Acquired brain injury (ABI) frequently leads to high levels of anxiety and depressive symptoms, which are difficult to treat. The aim of this study was to investigate the effectiveness of Acceptance and Commitment Therapy (ACT) for individuals experiencing anxiety and depressive complaints following ABI. Four single-case experimental design studies were performed with a randomized baseline, treatment, and follow-up phase (up to one year following start of the intervention), during which anxiety and depressive symptoms were measured repeatedly. There were six moments when participants filled in questionnaires measuring mood, participation, quality of life, and ACT related processes. For each participant, randomization tests and TAU-U scores were used to calculate statistical significant changes in levels across phases. Reliable Change Index was calculated to define clinically significant changes. Results of the randomization tests and Tau-U scores showed a significant decrease in stress, anxiety, and depressive symptoms for three out of four participants, with large effect sizes (≥.66). Furthermore, participants showed a significant improvement in quality of life and cognitive defusion. However, there was no clinical significant improvement regarding value-driven behaviour or psychological flexibility. This study shows that ACT is possibly an effective treatment option for people experiencing anxiety and depressive complaints following ABI.

* A Single-Case Experimental Evaluation of a New Group-Based Intervention to Enhance Adjustment to Life with Acquired Brain Injury: VaLiANT (Valued Living After Neurological Trauma)

Nick Sathananthan, La Trobe University, Melbourne, Australia

Bleydy Dimech-Betancourt, La Trobe University, Melbourne, Australia

Eric Morris, La Trobe University, Melbourne, Australia

Don Vicendese, La Trobe University, Melbourne, Australia and University of Melbourne, Australia

Lucy Knox, La Trobe University, Melbourne, Australia

David Gillanders, University of Edinburgh, Edinburgh, UK

Roshan Das Nair, University of Nottingham, Nottingham, UK

Dana Wong, La Trobe University, Melbourne, Australia

Adjustment to life with acquired brain injury (ABI) is complex and not consistently facilitated in rehabilitation. We evaluated the feasibility, acceptability, and preliminary efficacy of VaLiANT, a new group intervention that uniquely combines cognitive rehabilitation with Acceptance and Commitment Therapy to enhance valued living following ABI. We used an AB-with-follow-up single case experimental design with randomisation to multiple baselines, across eight participants (50% women, aged 26-65; 4 Stroke, 3 TBI, 1 Epilepsy). Participants attended eight group sessions with assessments before, during and after the group. Target behaviour was valued living, assessed weekly by the Valued Living Questionnaire. Secondary outcomes included measures of wellbeing, mood, self-efficacy, subjective cognitive complaints, and intervention acceptability. Target behaviour underwent visual and statistical analysis while secondary outcomes were analysed via reliable change indices. Target behaviour appeared variable. However, reliable improvements were found for the majority of participants on secondary outcomes, particularly wellbeing and anxiety symptoms. Delivery of the intervention was feasible with high acceptability ratings. This study provides preliminary support for VaLiANT as a feasible intervention which could improve adjustment post-ABI.

* Values and committed action for inpatients with acquired brain injury: A Single Case Experimental Design

Jessica Kingston, Royal Holloway, University of London

Rebecca Andrews, Royal Holloway, University of London

Serena Sharma, Royal Holloway, University of London and Royal Hospital for Neurodisability

Richard Irwin, Royal Holloway, University of London and Royal Hospital for Neurodisability

Ndidi Boakye, St Georges’ University Hospitals NHS Trust and Croydon University Hospital NHS Trust

Acquired Brain Injury (ABI) has a devastating effect on the lives of many people. Psychological distress is common and can be more disabling than primary cognitive and physical impairment. A major impact of an ABI is that it severely compromises an individual’s ability to participate in activities that give their life meaning, purpose and vitality, especially in the context of mood difficulties. This presentation reports on two Single Case Experimental Designs (SCEDs). Study 1 (n=6) examines the effects of a 6-week values-based intervention on depressed mood, adjustment and quality of life in inpatients undergoing rehabilitation for ABI and study 2 reports on the same intervention for individuals with ABI and concurrent depression. In study 1, all participants reported progress towards values. Four reported reliable and clinically significant reductions in depression, four reported reliable improvements in adjustment (three were clinically significant), and three reported reliable improvements on self-perception QOL (two were clinically significant). Improvements in daily measures of meaningful behavior and mood showed more modest effects. Study 2 is underway with data available for the symposium.

* Caring for someone with an Acquired Brain Injury: the Role of Psychological Flexibility

Nils Rickardsson, M.Sc., NHS Lothian Neuropsychology Department and the University of Edinburgh

David Gillanders, University of Edinburgh

Jen Scotland, NHS Lothian

Blanca Poveda, NHS Lothian

Many caregivers of adults with Acquired Brain Injuries (ABI) are vulnerable to psychological distress and reduced wellbeing. Acceptance and Commitment Therapy (ACT) has shown promising results for caregivers of people with dementia, and qualitative evidence suggests that acceptance facilitates adjustment to the caregiver role. Little is known with regards to the role of psychological flexibility amongst ABI caregivers, and the potential for an ACT-based intervention for this population. This project investigated the role of psychological flexibility for depression, anxiety and satisfaction of life amongst informal caregivers of adults with ABI. In a quantitative cross-sectional design, the predictive strength of psychological flexibility was explored together with established constructs known to predict outcomes, namely cognitive appraisals, coping, social support and perceived functional disability of the person with the ABI. Results from hierarchical regression and moderated mediation models are presented. The findings suggest an important role of psychological flexibility and cognitive appraisals amongst ABI caregivers, which adds to previous conceptualisations of caregiver outcomes. Clinical implications and future directions will be discussed.

Educational Objectives:

1. List some of the key reasons for why ACT is well-suited to meeting the needs of individuals with an Acquired Brain Injury.

2. Describe the application of ACT to individuals with an Acquired Brain Injury.

3. Describe the use of SCED as a a method for examining treatment effects.

**13. RFT-Based Analysis of Complex Human Behavior involving temporal, causality, and hierarchical responding**

Symposium - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Original data*

Categories: Relational Frame Theory, Clinical Interventions and Interests, Relational Frame Theory

*Target Audience: Intermediate*

Chair: Carmen Luciano, Ph.D., University Almeria, Spain

Discussant: Steven Hayes, Ph.D., University of Nevada, Reno

Luis Jorge Ruiz-Sánchez, Ph.D., University of Almería

Jorge Villarroel-Carrasco, Ph.D. Student, Universidad de almería

Beatriz Harana-Lahera, Ph.D. Student, University of Almería

Matheus Bebber, Ph.D. Student, University of Almería

This symposium aims to present four studies that show how complex human behavior can be modeled in the laboratory by following the functional contextual approach to human language and cognition outlined by Relational Frame Theory (RFT). The first paper established temporal and causal relational cues and examined the transformation of functions according to such relations with new stimuli. Similarly, the second paper analyzed complex patterns of hierarchical relational responding and transformation of functions in a hierarchical network when several functions were given to some stimuli of the hierarchy. The third paper analyzed the impact of hierarchical appetitive functions (such as personal values) to transform time perception. Finally, the last paper aims to isolate the impact of different contextual variables for altering humor behavior. Overall, the results of these studies are relevant to understand complex behaviors from an analytic functional-contextual approach.

* Transformation of functions through temporal and causal relations: a preliminary study

L. Jorge Ruiz-Sánchez, Ph.D., University of Almería

Jorge Villarroel-Carrasco, Ph.D. Student, University of Almería

Ángel Alonso, Ph.D. Student, Madrid Institute of Contextual Psychology

Carmen Luciano, Ph.D., University of Almería

Minimal research in the field of Relational Frame Theory (RFT) has focused on temporal and causal framing despite its relevance for understanding how human being makes predictions or explains his own behavior. The current study aims to establish arbitrarily applicable causal and temporal responses in adult humans. For that, 20 participants were assigned to two training conditions (10 participants each). Participants in the first condition (temporal framing/causal framing) received a nonarbitrary relational training designed to establish temporal contextual cues (before/after), while participants in the second condition (causal framing/temporal framing) received a similar training but including trials to establish a causal function to the contextual cue. Following training in a subset of arbitrary relations, subsequent testing examined the respective transformation of functions. Then, each condition was into the other conditions, causal or temporal framing. The results show that most of the participants exhibited a relational responding pattern consistent with their relational training. This study represents a functional analysis of temporal and causal responding, adding evidence to understanding complex human behavior.

* Experimental analysis of hierarchical responding

Jorge Villarroel-Carrasco, Ph.D. Student, University of Almería

Carmen Luciano, Ph.D., University of Almería

L. Jorge Ruiz-Sánchez, Ph.D., University of Almería

Hierarchical responding is a categorization in which a class of stimuli is treated as a member of a wide class of stimuli (e.g., the human is classified as a member of the category “animal”, while “animal” is classified as a type of “living being”). According to RFT, hierarchical categorization is a type of arbitrarily applicable relational responding, and this response is involved in complex behaviors such as abstract experiences as the self (Gil, Luciano, Ruiz, & Valdivia, 2012; Luciano, 2017). The main purpose of this study is to produce the hierarchical transformation of functions. In Phase 1 of the experiment, 10 participants were trained to establish two stimuli as relational cues: Same-Hierarchy and Different-Hierarchy. In Phase 2, two 3-level hierarchical networks were trained with new stimuli, one with each cue. In phase 3, the different functions of stimuli were instructed in the two hierarchical networks. In phase 4, all stimuli of the two hierarchies were tested for derived relations and most of the participants responded correctly at the first attempt.

* The role of motivational functions in time perception: an experimental analysis

Beatriz Harana-Lahera, Ph.D. Student., University of Almería

Carmen Luciano, Ph.D., University of Almería

L. Jorge Ruiz-Sánchez, Ph.D.,

Time perception has been mostly investigated from a cognitive standpoint that has not been rendered in the behavioral process responsible for such perceptions. Furthermore, knowing the process involved might be of help in evaluating suffering and the impact of therapies. This study aims to isolate the impact of aversive, appetitive, as well as higher-order or overarching functions that might be involved in time perception. For that, time perception was measured in 18 intervals with different and same intervals of time in two conditions (seven participants each). Condition 1, participants went through the time interval task with manipulation of motivation: neutral, or immediate appetitive or aversive functions. Condition 2 was the same except that higher-order motivational functions (e.g., something significant for the participant) were connected hierarchically to the immediate function indicated in condition 1. The results show differential impact in time estimation in accordance with the type of functions, especially regarding that “time flies” when behavior is under the control of appetitive functions and higher-order motivational functions.

* Altering the Emergence of Humor Functions: A Relational Frame Analysis

Matheus Bebber, Ph.D. Student, University of Almería

Carmen Luciano, Ph.D., University of Almería

L. Jorge Ruiz-Sánchez, Ph.D.

According to Relational frame theory (RFT), jokes are a kind of storytelling in which the functions of a complete, coherent relational network become suddenly and unexpectedly transformed. Despite numerous studies showing that humor responses have substantial benefits for mood and health, little is known about the key processes that might be involved in the emergence of humor behavior. This study aims to isolate part of the processes that might hinder the emergence of humor. Three contexts have been manipulated: (1) promoting the reality of the event, (2) promoting the identification of the participants with the joke characters, and (3) promoting aversive functions to the content of the joke. Undergraduate students were randomly assigned to 2 experimental: (a) control condition, (b) and manipulated jokes condition, based on the above-mentioned elements. Results suggest that two contexts manipulated, reality and aversive functions, as designed in the present study, seem to alter the emergence of humor functions and are discussed in terms of each element's impact in the emergence of humor and the relational framings that might be involved.

Educational Objectives:

1. Explain the transformation of functions across temporal/causal relations.

2. Describe the transformation of functions across hierarchical relations.

3. Describe the impact of values on time perception and the relational responses involved in humor responses.

**14. ACT in action: Examining cutting edge modalities of delivering ACT to meet higher demand for services**

Symposium - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Conceptual analysis, Literature review, Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Children, Childcare workers, Virtual reality, Anxiety

*Target Audience: Intermediate*

Chair: Sarah Cassidy, Ph.D., Smithsfield Clinic/Maynooth University

Roberta Hines, D.Psych.BAT, Tiddlywinks and Scallywags Early Learning Centre

Jack Crehan, Smithsfield Clinic

Keith Cregan, M.A., Smithsfield Clinic

Hannah O'Daly, M.A., Smithsfield Clinic

Shannon Eidman, M.Ed., BCBA, Reach Children's Services

The six core processes of Acceptance and Commitment Therapy (ACT) are (a) contact with the present moment, (b) defusion, (c) acceptance, (d) self-as-context, (e) values and (f) committed action. The goal of mastering these processes is to achieve greater psychological flexibility.

Across a range of settings (online ACT trainings, virtual reality in clinic, community setting) for a range of different populations (anxious children, anxious child care workers, children with EBD, children with low self esteem, emotional dysregulation, children with poor social skills), the processes within the hexaflex are taught with the aims of exploring different modalities for developing increasingly more effective tools to expand the use of ACT for more people given the higher levels of demand for services in most areas. Using different methods of delivery is also explored with the use of bibliotherapy, art, teleconferencing and virtual reality.Data will be discussed as to which of these formats yields higher engagement with treatment and which yields high levels of psychological flexibility following the interventions.

* The Art of ACT

Sarah Cassidy, Ph.D., Smithsfield Clinic, Maynooth University

Roberta Hines, BCBA-D, Smithsfield Clinic

JJ Luz Macabacyao, Smithsfield Clinic, Maynooth University

Katie McDonald, Smithsfield Clinic, Maynooth University

The goal of mastering the ACT processes is to achieve psychological flexibility. Selected child participants (N&#3f13) experiencing clinical anxiety were invited to take part in an Art Club which consisted of 10 90- minute sessions, once weekly, for consecutive weeks. Participants were divided into a child group and a teen group. Weekly sessions began with warm up exercises using art techniques as a medium, followed by guided discussions of book chapters from a kids’ ACT self-help for anxiety book under contract. Each group would then take part in further artwork going through the exercises in each chapter which were based around the ACT Hexaflex. Participants and their parents completed various measures to compare pre and post intervention levels of anxiety, well being and levels of psychological flexibility (DASS- 21, CPFQ, WHO-5, DUKE-8). Data will be discussed.

* ACT and Virtual Reality; An ACT-based mindfulness intervention delivered through VR.

Jack Crehan, Smithsfield Clinic, Maynooth University

Sarah Cassidy, Smithsfield Clinic and Maynooth University

Keith Cregan, Smithsfield Clinic and Maynooth University

The goal of mastering the ACT processes is to achieve psychological flexibility. The role of mindfulness within ACT is paramount, as the aim of ACT is mindful, values-based living. Participants (N&#3f15) were children and adolescents with a variety of clinical needs, either currently attending for individual ACT therapy or waitlisted for same. In a quiet setting, the experimenter read a script to the participant explaining the role of mindfulness in ACT. The participant then engaged in a 30 minute guided mindfulness piece using the PSIOUS VR therapy equipment in the clinic, for 3 sessions. The purpose of this pilot work was to determine the suitability of this tool as an adjunct to therapy or as a waiting list support. Likert scales of the subjective experience of both the clinician and the participant were especially devised to determine the feasibility of using this medium of support when clients are on extended waiting lists. Data to be discussed.

* MAGPIES – A pilot school-based ACT intervention for children with emotional and behavioural difficulties, parts 1&2

Keith Cregan, Smithsfield Clinic and Maynooth University

Hannah O'Daly, Smithsfield Clinic

Sarah Cassidy, Smithsfield Clinic and Maynooth University

Laura Smyth Tyndall, NHS UK

Ian Tyndall, University of Chichester

There are now over 400 randomised control trials demonstrating the efficacy of ACT. However, ACT for youth with specific emotional behavioural difficulties is still in the early days. The MAGPIES programme is a focused and systemic ACT based transdiagnostic therapeutic intervention for children with a wide range of emotional behavioural difficulties or neurodevelopmental differences in mainsteam school settings. The data presented were collected over the first and second 8 week block of the programme’s implementation. Various measures were completed at pre and post(CAMM, AFQ-Y) While the model is firmly rooted in the key ACT process of facilitating psychological flexibility, this presentation will highlight the need to work closely with statutory services and focus on what education and health service systems deem important to address (e.g., low self-esteem, emotional dysregulation, poor social skills and high anxiety levels). Data is currently being processed to determine clinically significant changes participants experienced as a result of taking part in the first 2 blocks of this programme which focused on teaching self-esteem building and emotional regulation skills.

* MAGPIES – A pilot school-based ACT intervention for children with emotional and behavioural difficulties, parts 3&4

Shannon Eidman, Smithsfield Clinic

Jack Crehan, Smithsfield Clinic and Maynooth University

Sarah Cassidy, Smithsfield Clinic and Maynooth University

Laura Smyth Tyndall, NHS UK

Ian Tyndall, University of Chichester

The Magpies programme is a focused and systemic ACT based therapeutic intervention for children with a wide range of social, emotional and behavioural difficulties or neurodevelopmental differences in mainstream education in Ireland. Specific discussions around clarifying the functional definitions of social skills and coping with anxiety skills were first elucidated. Before the first block children were invited to complete various measures related to specific areas of need as identified by parents, teachers and caregivers (e.g., poor social skills and high levels of anxiety). Children were also asked to complete these measures at the completion of the Magpies programme. Data presented were collected at pre and post points over the third and fourth 8 week blocks of the programme’s implementation.

* ACT for childcare professionals; evaluating the impact of an online ACT training programme for childcare professionals in the wake of Covid-19.

Sarah Cassidy, Ph.D., Smithsfield Clinic and Maynooth University

Roberta Hines, Smithsfield Clinic

Keith Cregan, Smithsfield Clinic

This five-week on-line programme consisted of 5 weekly 2 hour workshop training the core component ACT processes and applying them to the experience of anxiety, which was reported to be higher in the wake of the end of the first lock-down in Ireland. Participants (N&#3f22) were childcare professionals who enrolled to learn how to cope with their own heightened anxiety and the heightened levels of anxiety being reported in the young children and families who attended their services. Participants paid to take part in this course but were were asked to voluntarily take part in a survey on the efficacy of the programme. Those who elected to take part in the study, were invited to fill out a brief demographic questionnaire, followed by the Depression, Anxiety and Stress Scale (DASS-21) and the The 7-item Acceptance and Action Questionnaire - II (AAQ-II). The aim of the study was to establish the efficacy of the programme, with a population of childcare workers over the medium of online video-conferencing. Data are currently being collected for analysis.

Educational Objectives:

1. Discuss how different modalities of the delivery of ACT therapy are useful for reaching harder to reach populations.

2. Describe how to create your own purpose built ACT intervention for specific populations.

3. Compare traditional methods of treatment delivery with cutting edge ACT applications to determine if some of these newer ways of engaging clients should be retained.

**15. Acceptance and Commitment Therapy & Birth Trauma: ACT in Perinatal SIG Sponsored**

Panel - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Original data*

Categories: Clinical Interventions and Interests, Behavioral medicine, Perinatal

*Target Audience: Beginner, Intermediate*

Jan Smith, Doctorate, Healthy You Ltd

Jessica Punzo, Psy.D., Middle Path Psychotherapy, LLC

Alexa Bonacquisti, Ph.D., Holy Family University

Natalie Savage, BCBA, M.Sc., MA, BA (Hons), Rainbow Behavioural Therapies

Up to one-third of women report some aspect of their childbirth experience as traumatising, with 3-6% developing a diagnosis of PTSD (Ayers et al., 2018). A traumatic birth can have negative consequences on mother-infant attachment; child development; and relationships (Fenech & Thomson, 2014; Parfitt, Pike & Ayers, 2013). The increasing complex medical needs of pregnant women, means that women experiencing their childbirths as traumatic will increase, necessitating more awareness and innovations in psychological treatments (Brace, Kernaghan, Penney, 2009; Knight, 2008). ACT interventions may hold promise to treat birth-related trauma, pre and postnatal difficulties e.g. infertility and prenatal mental health.

The aims are to discuss birth trauma, the role of ACT in its treatment, and future recommendations.

• An overview of birth trauma and its impact; Dr Jessica Punzo, Psy.D.

• An empirical research study of ACT processes in postpartum women; Alexa Bonacquisti, Ph.D., Assistant Professor, Holy Family University

• Using ACT to support the transition in to parenthood; Natalie Savage, Clinical Behaviour Analyst.

• Case example of ACT and birth trauma: Dr Jan Smith (CPsychol).

Educational Objectives:

1. Explain what birth trauma is, its impact and how ACT might be used as a treating intervention.

2. Describe how ACT can be applied to treating those with birth-related trauma symptoms.

3. Explain how ACT can be applied to the transition to parenthood and the ACT processes involved with supporting postpartum women.

**16. Reorienting CBS: Promoting accessibility, collaboration, diversity, inclusion, & longevity**

Panel - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *None of these*

Categories: Shaping (A)CBS, The future of (A)CBS

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Jacob Martinez, Licensed Professional Counselor, Private Practice

Valerie Kiel, M.Sc., Mondriaan & Private practice

Matthieu Villatte, Ph.D., ℅ Matthieu Villatte

Alison Stapleton, B.A., University College Dublin

Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

The field of Contextual Behavioral Science (CBS) is flourishing. Not a week goes by without an achievement our community can be proud of. While celebrating successes is important, taking an in-depth look at problematic/underdeveloped areas within CBS must be on our agenda, too. This panel invites the community to engage in a risk and vulnerabilities assessment of CBS. To kick off this iterative process, panelists will highlight key issues and and their negative impact on CBS if we fail to address them in time. For example, applications of CBS, such as Acceptance and Commitment Therapy, risk becoming divorced from our philosop hical roots unless we strive to convey our stance and assumptions more widely and effectively. Whether CBS will thrive, survive, or die within the next three decades depends on our efforts to shape its development more consciously and strategically today. If you love (A)CBS, join us for this exciting panel and get inspired how you - regardless of profession, expertise, background, or resources - can make an important contribution to the future of CBS, too.

Educational Objectives:

1. Describe current risks to the future of Contextual Behavioral Science (CBS).

2. Create a plan of small actions that individuals can take to strengthen and ensure the future and efficacy of CBS.

3. List steps that the CBS community as a whole must take to strengthen and ensure the future and efficacy of CBS.

**17. Prosocial Schools: Nurturing Teacher and Student Wellbeing and Cooperation: ACT in Education SIG Sponsored**

Panel - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Conceptual analysis*

Categories: Educational settings, Performance-enhancing interventions, Children

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Paul Atkins, Ph.D., Prosocial.World

Discussant: Holly Blais, M.Ed. BCBA LABA, Projectlife Services and Exeter High School

Duncan Gillard, D.Ed.Psych, Creative Director at Connect PSHE (connect-pshe.org)

Mary Stanley-Duke, Bristol University

Susan Hanisch, Doctorate, University of Leipzig

Freddy Jackson-Brown, B.Sc. (Hons) DClinPsy, NHS

Almost all educational staff enter the teaching profession to enhance children's wellbeing, learning and future life prospects. However, the often complex organisation of schools, with the many internal group structures, can result in a school system that is not greater than the sum of its parts. Prosocial (Atkins, Wilson & Hayes, 2019) provides guidelines for enhancing prosociality which can lead to a school system that thrives and becomes greater than the sum of its parts.

The Panel will be asked to draw on their expertise and experiences in using Prosocial with students, teachers, administrators, behavioral analysts and educational psychologists. Topics will include the challenges of enhancing psychological flexibility in a school context and how to use Prosocial to support schools, and the young people in them, as catalysts for social, economic and environmental wellbeing on a planetary scale.

Educational Objectives:

1. Describe the impact increasing the level of cooperation may have on the future of schools.

2. Articulate ways that the Prosocial Core Design Principles might be implemented in their social context.

3. Outline some of the difficulties (and solutions) that may occur when teaching psych flex in schools.

**18. Psychological Flexibility for LGBTQIA+-identified clinicians: Gender and Sexual Diversity SIG Sponsored**

Workshop - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Sexual & Gender Minorities (SGM), ACT, LGBTQIA+

*Target Audience: Beginner, Intermediate*

Michael May, MA, LPCC, Compassionate Psychological Care, LLP

Melissa Farrell, Psy.D., Authenticity Psychological Services

LGBTQIA+-identifying clinicians who treat other LGBTQIA+-identified individuals are situated in a clinical context that can be difficult to navigate. Minority stress and trauma can evoke discomfort and/or distress in clinicians just as it can with clients. These variables can create a context in which clinician self-disclosure, coming-out, addressing trauma, etc. continue to have aversive functions for the LGBTQ-identified clinician. Within this workshop, the Psychological Flexibility model is offered as an evidence-based framework for self-exploration around these matters, as well as others, with increased flexibility and sensitivity. This will be accomplished with case examples, didactic training, and experiential exercises.

Educational Objectives:

1. Describe the ways in which the lived experiences of clinicians identifying as a sexual and gender minority identities can impact treatment with clients of similar identification.

2. Distinguish the various Psychological Flexibility processes and how they be utilized to address sexual and gender minority concerns within therapy.

3. Describe the foundational skills necessary to improve their treatment of sexual and gender minorities clientele through self-examination.

**19. Creating hope: Working with adolescents during times of change**

Workshop - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: *Experiential exercises*

Categories: Clinical Interventions and Interests, Evolution, Adolescents

*Target Audience: Intermediate*

Louise Hayes, Ph.D., Institute for Mindful Action

Everything changes. The developmental period alone brings significant change to the sense of self, physical self, friendships, and community. Today, they also have to manage social changes, technology, pandemic, climate change, economic and political change, etc. It can be difficult for any of us to cope but think how this might all sit on young shoulders. When change occurs, their self-talk can go into overdrive, predicting gloom and doom, they can have strong emotional reactions, and they can end up feeling isolated and alone.

Despite all this, young people can find ways to grow stronger. This workshop will use DNA-v to demonstrate exercises that help young people build hopeful action. DNA-v is the distillation of cutting-edge CBS for growth. This model uses evolutionary science, behavioral science, ACT, compassion research, and positive psychology to create a new paradigm for promoting vital living. We will use DNA-V for exercises that build hopeful action, help young people become proactive, and practice flexible responding. These exercises can be used in both educational and clinical settings.

Educational Objectives:

1. Describe how to deliver exercises that build hopeful action to young people using DNA-V

2. Apply change actions for difficult self-talk.

3. Design your own exercises by applying the basic process within DNA-v.

**20. ACT for Eating Disorders: 3 Key Interventions to Disrupt Maladaptive Weight Control and Choose Mattering**

Workshop - Thursday, 24 June (11:45 AM - 1:15 PM)

Components: Conceptual analysis, Didactic presentation, Experiential exercises

Categories: Clinical Interventions and Interests, Eating disorders

*Target Audience: Beginner, Intermediate*

Rhonda Merwin, Ph.D., Duke University Medical Center

Ashley Moskovich, Ph.D., Duke University Medical Center

Maladaptive weight control behaviors that characterize anorexia and bulimia nervosa are dangerous and have devastating effects on people’s lives (Klump, Bulik, Kaye, Treasure & Tyson, 2009). Topographically focused on the body, functionally, eating disorders emerge in a broader context of emotional pain. While initially effective in reducing discomfort, maladaptive weight control locks individuals in a battle with their body, such that they become increasingly disconnected from themselves and other things that matter to them. This workshop will provide 3 key interventions to disrupt dangerous weight control and help individuals build lives of personal meaning. Workshop participants will learn concrete strategies to 1) identify the idiographic function of maladaptive weight control, 2) help individuals separate from the eating disorder and become more self-aware, and 3) evoke willingness for individuals to meet their physical and emotional needs.

Educational Objectives:

1. Identify the idiographic function of maladaptive weight control.

2. Conduct interventions that separate the individual from the eating disorder and enhance self-awareness.

3. Implement a clinical exercise to evoke willingness to respond to one's physical and emotional needs.

**21. How symbols control behavior: Implications for a contextual conception of culture**

Invited - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis*

Categories: Relational Frame Theory, Culture

*Target Audience: Intermediate*

Julio de Rose, Ph.D., Universidade Federal de São Carlos

The influential anthropologist Clifford Geertz may come close to being a Contextual Behavioral Anthropologist. Geertz even points out that culture is a context within which behaviors, social events, institutions, can be described. Resorting to Gilbert Ryle, Geertz argues that this description should be "thick", which we might translate as a description that is functional, rather than topographic. In this "contextual" view, culture is conceived as a system of symbolic devices for controlling behavior. A problem for this highly influential view of culture was the lack of knowledge about the behavioral processes involved in the control by symbols. This led anthropologists influenced by Geertz to resort to Psychoanalysis for an explanation of how symbols might control behavior. With the recent advances of Behavior Analysis and Contextual Behavioral Science we are now in a much better position to explain how symbols do control behavior. This presentation will briefly review Geertz's conception of culture and the RFT approach to symbolic behavior. I will present recent research showing how transformation of functions enable symbols to control behavior. The presentation will end with tentative examples of how networks of symbolic relations control behavior at the social and cultural levels.

Educational Objectives:

1. Identify affinities between Clifford Geertz's conception of culture and Contextual Behavioral Science.

2. Explain how transformation of functions enables symbols to control behavior.

3. Exemplify instances of symbolic control at the individual and social levels.

**22. Applications of ACT to Adolescents and University Students**

Symposium - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Didactic presentation, Experiential exercises, Literature review, Original data*

Categories: Prevention and Community-Based Interventions, Clinical Interventions and Interests, Adolescents, functional analytic psychotherapy, Inpatient Psychiatry, Narrative Therapy, Performance contexts, Group-therapy

*Target Audience: Beginner, Intermediate, Advanced*

Deanna Sams, Ph.D., University of Rochester Medical Center

David Garrison, M.D., URMC

Mindy Chadwell, Ph.D., BCBA, University of Nebraska Medical Center, Munroe Meyer Institute

Kaitlyn Young, M.S., University of Nebraska Medical Center

Andrew Thayer, Ph.D., University of Nebraska Medical Center

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Jenny Liu, Ph.D., Toronto Western Hospital

Karoly Schlosser, Goldsmiths, University of London

Melissa Miller, M.S., Wichita State University

Adolescents and young adults have unique stressors, generally and in the context of the pandemic. The current symposium describes four ACT interventions specific to this population, across clinical and nonclinical settings. The first paper presents outcomes of a rapid stabilization program for adolescent in an inpatient setting. The second paper presents the framework and outcomes of a school-based program to help adolescents thrive during the pandemic and increased uncertainty and social isolation. The third paper reports on a program integrating ACT and Group Empowerment Education to help university (postsecondary) students in China cope with stressors unique to this developmental period and rapid urbanization. A fourth paper describes the use of focused ACT to improve adolescent mental health before their final exam period. A final paper describes current state of the evidence for ACT process measurement in youth.

* The Rapid Stabilization Pathway: An ACT-based treatment for adolescents hospitalized on an acute inpatient psychiatry unit

Deanna P. Sams, Ph.D., University of Rochester Medical Center

David Garrison, M.D., University of Rochester Medical Center

The development of a written safety plan to identify warning signs and coping skills is a generally accepted standard of care in inpatient psychiatry; however, the effectiveness of such plans in reducing length of stay, post-discharge suicidal behavior and readmissions is largely unknown.

The Rapid Stabilization Pathway (RSP) pilot project integrates Acceptance and Commitment Therapy with a narrative family therapy approach on an acute adolescent psychiatric unit. RSP is hoped to facilitate stabilization as soon as possible (target 3-4 days) via intensive therapeutic engagement with the patient and family. To date, we have used the RSP pathway for n =24 adolescents. During the same timeframe adolescents who also met criteria were not offered RSP due to therapist availability. Preliminary results of this feasibility pilot show that the intervention is well accepted among acute inpatient and their families, and patients who received RSP were discharged, on average, 2 days sooner that those who were not.

* Facilitating Adolescents’ Ability to THRIVE: Promoting Resiliency Through Times of Uncertainty

Mindy R. Chadwell, Ph.D., BCBA, UNMC Munroe Meyer Institute

Kaitlyn Young, M.S., PLMHP, UNMC Munroe Meyer Institute

Jordan Thayer, Ph.D., UNMC Munroe Meyer Institute

Adolescence is a time of much transition for youth, requiring flexibility and strategies to cope with change. This is particularly true in the wake of the COVID-19 pandemic in which adolescents faced a sudden surge of uncertainty in their lives, leading to increases in depression, anxiety, social isolation, and general mood-related behaviors (Loades et al., 2020). In response to the COVID-19 pandemic, authors developed a novel framework, grounded in Acceptance and Commitment Therapy, which aims to increase coping with stress and engagement in values-based activities for adolescents. The THRIVE framework has been adapted for and implemented in school-based mental health clinics as a four-session, small group therapy option for adolescents. The purpose of this presentation is to describe components of THRIVE and share promising data from pilot implementation in three school-based mental health clinics. Participants will gain an understanding of (1) adolescents who may benefit from the novel framework; (2) strategies for assessing symptoms and monitoring progress; (3) and materials necessary for implementation.

* Building Capacity to Promote Mental Health of University Students in Jinan, China using Acceptance and Commitment Therapy (ACT) and Group Empowerment and Psychoeducation (GEP)

Kenneth Fung, MD, University of Toronto

Alan Tai-Wai Li, MD, Regent Park Community Health Centre

Shengli Cheng, Ph.D., Shandong University

Miao Yu, Ph.D., Shandong University

Xuan Ning, Ph.D., Ryerson University

Isabella Huang, Ryerson University

Cunxian Jia, Ph.D., Shandong University

Rapid urbanization, academic pressures, and developmental life transitions all contribute to mental health stress for postsecondary students in China. Mental health promotion responses are challenged by stigma, misconceptions and inadequate interdisciplinary collaboration. Acceptance and Commitment to Empowerment – Linking Youth and ‘Xin (hearts)’ (ACE-LYNX) is an evidence-informed intervention designed to promote mental health literacy and resilience of university students in Jinan, China. ACE-LYNX integrates processes of Acceptance and Commitment Therapy (ACT) and Group Empowerment Psychoeducation (GEP) to build individual psychological flexibility and collective committed action to reduce stigma. To date, 90 service providers in 6 universities and a mental health centre have completed ACE-LYNX and are expected to train 630 service providers and university students over the next two years to become mental health ambassadors. We anticipate that the train-the-trainer approach will reach over 10,000 students. Our program adds to a growing body of literature in implementation science that identifies strategies, challenges, and solutions in enhancing the uptake of evidence-based interventions to improve community mental wellbeing and drive systems change from the ground up.

* Focused acceptance and commitment training to improve adolescent mental health before their final exam period

Karoly Schlosser, Goldsmiths, University of London

Juanjo Macias, University of Malaga

Frank Bond, Goldsmiths, University of London

While the utility of ACT in the educational context is still largely unexplored, students could benefit of support during the pandemic more than ever. In this study, a total of 120 final year secondary school students from Hungary volunteered to be randomly selected into a focused ACT training or study control group, only two weeks before they took their final exams. The experimental group participated in a 3x2 hours ACT training , where the trainers taugth students alternative ways of relating to their private experiences using strategies based on mindfulness, functional-analytic psychotherapy and acceptance and commitment therapy. The experimental group had significantly improved mental health, quality of life and the ability to observe private events (FFMQ observe subscale) compared to the control group. Findings show that applying ACT as a rapid and brief intervention for groups in the educational sector has promising mental illness prevention and mental health promotion possibilities, even in particularly stressful contexts. To our knowledge, this may be the first RCT using a focused ACT training in the education sector.

* Measuring Processes of Change in ACT: Current State of the Literature with Youth

Rachel Petts, Ph.D., Wichita State University

Melissa Miller, M.S., Wichita State University

Jonathan Larson, M.S., Wichita State University

Sarah McGill, M.S., Wichita State University

While there is growing evidence for the effectiveness of Acceptance and Commitment Therapy (ACT) in children and adolescents, there is less clarity as to how theoretically proposed process variables (e.g., psychological flexibility) are measured and may be associated with changes in therapy. In this review paper, we narratively summarize the current state of the literature of process variable measurement and change in ACT youth treatment studies. Of the 29 articles that met inclusion criteria, there were 16 different process measures used, with measures of psychological flexibility being the most common (in 82.1% of studies). The majority of studies (73.3%) used some sort of inferential statistic to examine change in process variables, and a few completed a formal mediational analysis (6.7%). Taken together, there is strong evidence to suggest that ACT is associated with improvement in psychological flexibility in youth. However, there is a dearth of evidence for the interrelated processes that relate to psychological flexibility (e.g., self-as-context), and for evidence that these processes contribute to improved outcomes. Implications for future research will be discussed.

Educational Objectives:

1. Discuss how ACT may be applied to the unique stressors of adolescents and young adults.

2. Describe the implementation of ACT interventions with adolescents and young adults in inpatient, school and community settings.

3. Report outcomes of unique applications of ACT with adolescents and young adults.

**23. Measuring Psychological Flexibility: Challenges and Opportunities**

Panel - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Literature review*

Categories: Research methods, Theoretical and philosophical foundations, Psychological flexibility

*Target Audience: Intermediate, Advanced*

Co-Chair: Rhonda Merwin, Ph.D., Duke University Medical Center

Co-Chair: Maria Karekla, Ph.D., University of Cyprus

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Ronald Rogge, Ph.D., University of Rochester

Andrew Gloster, Ph.D., University of Basel

Michael Levin, Ph.D., Utah State University

David Gillanders, DClinPsy, University of Edinburgh

John Forsyth, Ph.D., University at Albany, SUNY

Measuring psychological flexibility is essential for process-based research and for advancing practical CBS applications. This panel will focus on current challenges and opportunities in the measurement of psychological flexibility. We will discuss strategies to develop or refine existing measures, challenges in the experimental isolation of component processes, and the potential utility of specifying component processes in basic behavioral rather than mid-level terms. We will also discuss strategies to overcome overreliance on infrequently administered self-report measures, e.g., with ecological momentary assessment (high-density longitudinal measurement that captures behavior in near real time) and capturing behavioral indicators of psychological flexibility in and outside of session, among other topics. The aim is for this discussion to spawn new, cutting-edge process of change research.

Educational Objectives:

1. Discuss strengths and weaknesses of various psychological flexibility measurement approaches.

2. Discuss strategies to improve measurement of psychological flexibility.

3. Identify experimental and behavioral measures of psychological flexibility.

**24. Past, present, and future of CBT: Reflecting on the historical developments of radical behaviorism, RFT, ACT and CBS: Hawai'i Chapter Sponsored**

Panel - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, CBS, CBT

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Samuel Spencer, M.A., University of Hawai'i at Mānoa

Anu Asnaani, Ph.D., University of Utah

Steven Hayes, Ph.D., University of Nevada, Reno

Louise McHugh, Ph.D., University College Dublin

Akihiko Masuda, Ph.D., University of Hawaii at Manoa

Robert Zettle, Ph.D., Wichita State University

In this panel discussion, leading figures within the field of contextual behavioral science (CBS) will reflect on key developments throughout the generations of cognitive behavior therapy (CBT) and discuss how future generations of researchers, clinicians, and students may best carry CBT and CBS forward as progressive life sciences. Five questions that panelists will consider include: (a) what are the defining features of a progressive life science? (b) what is CBT and how is the field of CBT viewed and evaluated from the standpoint of scientific progress? (c) what roles can radical behaviorism, functional contextualism, RFT, and ACT have in our efforts to move the field of CBT forward? (d) what can CBS contribute to the advancement of process-based CBT, a relatively new direction within the field of CBT? (e) what concerns or issues may arise as we move into the era of process-based CBT? Through this discussion, greater clarity may be achieved concerning key principles that can facilitate the growth of CBS, and CBT in general, as progressive life sciences.

Educational Objectives:

1. Describe key developments within radical behaviorism, relational frame theory, acceptance and commitment therapy, and contextual behavior science.

2. Describe how researchers, clinicians, and students can carry CBT and CBS forward as progressive life sciences.

3. Apply key historical developments across the generations of CBT discussed in the panel to the advancement and application of the new era of process-based CBT.

**25. Lessons we’re learning from COVID: How CBS and Prosocial principles help us support healthcare workers post pandemic**

Panel - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Literature review*

Categories: Application of CBS principles to supporting healthcare workers, Burnout reduction/prevention in healthcare workers

*Target Audience: Beginner*

Chair: Kristy Dalrymple, Ph.D., Lifespan Physician's Group and Alpert Medical School of Brown University

Dayna Lee-Baggley, Ph.D., Dalhousie University

Giovambattista Presti, M.D. Ph.D., Kore University of Enna

Lauren Borges, Ph.D., Rocky Mountain MIRECC

Beate Ebert, Dipl.-Psych., Private Practice

James Lemon, DClinPsy, NHS

The COVID-19 pandemic has caused adverse psychological reactions in frontline healthcare workers in the short-term such as depression, anxiety, and moral distress, and there is concern that long-term effects are on the horizon with respect to burnout and mental health issues (the “second pandemic”). Early studies have indicated that contextual behavioral factors, such as psychological flexibility, may serve as resilience factors against psychological problems experienced in the context of COVID-19. The aim of this panel is to reflect on what has worked/not worked thus far in providing support to frontline healthcare workers, discuss lessons learned and changes to make while we are still in the midst of the pandemic, and identify ways that CBS and Prosocial principles can continue to support healthcare workers in the aftermath of the pandemic. Panelists are individuals who have implemented support for frontline healthcare workers during the pandemic in various types of hospital systems across different countries – the US, Canada, and Italy - as well as panelists with expertise in applying Prosocial principles within the context of COVID-19.

Educational Objectives:

1. Describe different strategies that have been implemented thus far in various hospital systems to support frontline healthcare workers during the COVID-19 pandemic.

2. Explain ways that principles of contextual behavioral science could help to improve continued implementation of support services to frontline healthcare workers.

3. Discuss ways that Prosocial principles could be utilized to support the implementation of these services at an organizational level.

**26. El entrenamiento en ACT para público hispanohablante: desafíos y guías**

Panel - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Didactic presentation*

Categories: Supervision, Training and Dissemination, Professional Development, Entrenamiento en habilidades clínicas

*Target Audience: Beginner, Intermediate*

Chair: Germán Teti, M.D., Argentine Center for Contextual Therapies Foundation

Barbara Gil Luciano, DRA., Universidad Complutense de Madrid

Paula José Quintero, Fundación Foro

Juan Pablo Coletti, Fundación Centro Argentino de Terapias Contextuales (CATC)

Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Existen distintas formas y estilos de entrenamiento en ACT. Algunas de ellas están más basadas en la transmisión teórica y práctica, mientras que otras centran el proceso en una propuesta meramente experiencial. Estas dos modalidades podrían pensarse como polos de un continuo. En el primero, el asistente queda entusiasmado con la articulación filosófica, teórica y práctica que propone el modelo. Sin embargo, a la hora de aplicar los conceptos aprendidos a las contingencias de la práctica clínica se encuentra con las dificultades propias que conlleva el seguimiento de reglas. En el segundo caso, la propuesta puramente experiencial, sin referencias al mapa del modelo, lleva frecuentemente a una pérdida de direccionalidad. Esto puede ser experimentado como una vivencia movilizante aunque carente de conciencia funcional para su aplicación en la práctica clínica. El objetivo del panel es dialogar sobre estas características con especial énfasis en el proceso de entrenamiento de terapeutas hispanohablantes.

Educational Objectives:

1. Reconocer los distintos estilos y formas de entrenamiento en ACT.

2. Discutir los desafíos de la formación en ACT en hispanohablantes.

3. Generar estrategias para sorteas obstáculos en el entrenamiento de terapeutas hispanohablantes.

**27. A Call for Compassion: CFT with Adolescents in a Pandemic Era: Ohio Chapter Sponsored**

Workshop - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, Adolescents

*Target Audience: Beginner, Intermediate, Advanced*

Chris Fraser, MSW, Positive Path Counseling, LLC

While self-isolation during the COVID-19 pandemic has been hard on everyone, it has been especially difficult for adolescents who lack the coping mechanisms for handling this distress. Adolescence is the developmental period for self-discovery and personal exploration. However, the COVID-19 pandemic has severely impacted this development. During the pandemic, adolescent anxiety, depression, and suicide rates have skyrocketed. The call for compassion for adolescents is loud. We can respond by teaching teens compassionate mind skills and self-compassion.

The high levels of social isolation that adolescents are experiencing at this time leaves them stuck in their heads with punishing self critical thoughts. The need to foster self-compassion at this time is paramount! Compassionate mind training helps teens build the resilience to manage great distress in this pandemic era.

We will work experientially in this workshop to learn practical CFT interventions and how to apply them virtually and in person. We will emphasize CFT chair work as a powerful tool for cultivating self-compassion, defusion, perspective taking, and dealing with the challenging parts of ourselves.

Educational Objectives:

1. Explain how the brain has evolved and how it can be "tricky".

2. Describe why new brain and old brain loops can be problematic for adolescents.

3. Utilize CFT chair work with adolescents.

**28. Games and Frames: Improving your ACT with RFT: Mid-Atlantic Region Chapter Sponsored**

Workshop - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Relational Frame Theory, Functional analysis

*Target Audience: Beginner, Intermediate*

Miranda Morris, Ph.D., True North Therapy and Training

Evan Marks, LCSW-C, True North Therapy and Training

This workshop is about having fun with RFT. Yes, you read that right - FUN with RFT! Learning RFT can be daunting and many ACT practitioners give up before they get to the good part: using it clinically. The purpose of the workshop is twofold: 1) to demonstrate the relevance of RFT to clinical work, 2) to help clinicians increase the flexibility and efficacy of their interventions with clients. The workshop is ideal for practitioners who are already practicing ACT who want to broaden their repertoire and deepen their understanding of the model.

In this workshop, we will use didactic methods to help give participants a basic understanding of concepts that can be challenging for clinicians (e.g., derived relational responding, transformation of stimulus function). We will use case examples and group exercises to “play” with different frames and help participants put concepts into practice. In addition, we will use experiential exercises to help participants identity and work with different relational frames and increase context sensitivity and response flexibility.

Educational Objectives:

1. Explain what is meant by "functional analysis of verbal behavior".

2. Describe at least 3 relational frames.

3. Describe at least 1 strategy to use intentional relational framing to enhance context sensitivity.

**29. Acceptance and Commitment Therapy for Social Anxiety: An Evidence-Based In-Person and Virtual Group Approach: Ontario Chapter Sponsored**

Workshop - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Didactic presentation, Experiential exercises, Original data, Role play*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Group treatment of social anxiety

*Target Audience: Beginner, Intermediate, Advanced*

Nancy Kocovski, Ph.D., C.Psych., Wilfrid Laurier University

Jan Fleming, M.D., F.R.C.P.C., The Mindfulness Clinic

This workshop will focus on training an ACT-based group approach for social anxiety that was originally developed for in-person delivery and has recently been adapted for the Zoom platform. Empirical evidence for in-person and virtual delivery of the approach will be briefly summarized followed by presentation of the 10-week group protocol which includes mindfulness and compassion practices, metaphors and experiential exercises (including improv-based) that get at acceptance, defusion, values and goals, as well as acceptance-based situational exposures referred to as VITAL Action exercises. Workshop attendees will learn by demonstration, experiential exercises, and role play how to use the strategies in person and how to adapt them for the Zoom platform, including effective use of break-out rooms. There will be particular emphasis on practising acceptance-based exposure. The protocol is available for free online and is currently in use in several settings worldwide. Through this workshop our intent is to increase availability of this evidence-based approach for individuals who struggle with social anxiety.

Educational Objectives:

1. Describe and utilize an evidence-based group protocol for social anxiety delivered in person and virtually.

2. Implement acceptance-based exposure in virtual and in-person groups.

3. Implement improv-based experiential exercises with a self-compassion focus in virtual and in-person groups.

**30. Saying the wrong thing! Approaching difficult conversations with psychological flexibility**

Workshop - Thursday, 24 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises*

Categories: Professional Development, Clinical Interventions and Interests, ACT, Psychological flexibility, Difficult conversations, Diversity, Equity, and Inclusion

*Target Audience: Beginner, Intermediate, Advanced*

Monica Gerber, Ph.D., Asian Pacific Development Center

Molly Tucker, Ph.D., Private Practitioner

Nancy Lee, M.A., LPC, Nancy Lee Counseling PLLC

Danielle Moyer, Ph.D., Oregon Health & Science University

Have you ever unintentionally said the wrong thing to a client, student, research participant, family member, or even a friend? Have you ever avoided important conversations around difficult topics out of fear of saying the wrong thing? Given current political events and the global pandemic, this may feel more salient than ever. As a caring and compassionate human, saying the wrong thing can feel horrible. Unfortunately, efforts to avoid sensitive topics can have problematic consequences (Scherr, Herbert, & Forman, 2014). Training in ACT improves professional psychological flexibility and skills (Luoma & Vilardaga, 2013). This workshop will provide an overview of psychological flexibility and apply key processes to the way we approach difficult conversations. The workshop will be interactive and experiential. The audience will be invited and encouraged to explore areas of relevance to their own personal and professional lives. There will also be an interpersonal component requiring (virtual) participation. If you are ready (or at least willing) to step out of your comfort zone and practice saying the wrong thing, this workshop is for you!

Educational Objectives:

1. Describe how the core processes of psychological flexibility apply to difficult conversations.

2. Identify areas of personal discomfort and apply specific techniques to manage discomfort.

3. List specific value-based actions that can be taken toward engaging in difficult conversations.

**31. ACT in the Context of Anxiety and Serious Disease**

Invited - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Original data*

Categories: Behavioral medicine, Clinical Interventions and Interests, Anxiety, Cancer, ACT

*Target Audience: Beginner, Intermediate, Advanced*

Joanna Arch, Ph.D., University of Colorado Boulder

ACT involves a stance of opening up to human experience as it is—“the good, bad, and ugly”—and working skillfully, using behavioral science, to move toward meaning and connection no matter what shows up. An acceptance stance provides a strong foundation for dealing with perceived threats such as those experienced within anxiety disorders as well as the bodily and existential threats posed by diseases such as cancer. This invited talk will focus on the ways we have studied ACT in the context of people facing diverse forms of anxiety and threat, beginning with trials of ACT for anxiety disorders and shifting toward our trials of ACT with adults facing early- and late-stage cancer. Two intersections with this clinical research will be highlighted: First, the successes and challenges of embedding much of this work in community clinics, with interventions developed with and led by community clinicians; and second, the synergy of connecting clinical trials with laboratory-based investigations of relevant processes. I will reflect on what we continue to learn as scientists, as clinicians, and as human beings.

Educational Objectives:

1. Describe the diverse forms of threat and anxiety that ACT has been used to address.

2. Describe the advantages and disadvantages of conducting clinical intervention research in community settings.

3. Demonstrate knowledge of how laboratory research and clinical interventions can mutually inform one another.

**32. Advancements in Digital Acceptance and Commitment Therapy to Improve Population Health**

Symposium - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Digital interventions

*Target Audience: Beginner, Intermediate*

Chair: Julie Petersen, B.S., Utah State University

Discussant: Amanda Muñoz-Martinez, Ph.D., Universidad de los Andes

Carter Davis, B.F.A., Utah State University

Maria Karekla, Ph.D., University of Cyprus

Etana Berger, Ph.D., M.A, BCBA/LBA, Integrative Behavioral Wellness

Korena Klimczak, B.S., Utah State University

Clara Sophie Otto-Scheiber, M.S., Hospital Universitario Fundación Santa Fe de Bogotá, Colombia

Since its early years, researchers of Acceptance and Commitment Therapy (ACT) have called for a strong emphasis on dissemination research so that this impactful and transdiagnostic approach to mental health can be shared with broader audiences (e.g. Hayes, 2002). However, challenges exist in not only scaling up ACT-based interventions and making them available to larger swaths of the population, but also in promoting the sustainability of interventions, i.e. ensuring that patients and providers will continue to engage with them outside initial implementation efforts or research studies (Shelton et al., 2018). This symposium will bring together experts in the area of digital ACT who are developing and testing new interventions for physical activity, Covid-19 first responders, student mental health, and other targets. An emphasis will be placed on innovative means for helping populations engage with care over time, such as through peer-coaching and gamification.

* Adapting “FACE COVID”, an ACT-based strategy to Improve Wellbeing of Health Care Providers: Scalability and Acceptability

Clara Sophie Otto-Scheiber, M.S., Hospital Universitario Fundación Santa Fe de Bogotá

Amanda M. Muñoz-Martínez, Ph.D., Universidad de Los Andes

Health care providers have experienced high levels of stress given the epidemiological crisis of COVID-19 (SARS-CoV-2). Although mental health problems in healthcare providers have increased, several barriers such as time constraints and stigma have thwarted accessibility to behavioral health resources (Johnson et al., 2018; Sastre-Rus, 2019; Chen et al., 2020). Acceptance and Commitment Therapy (ACT) strategies have shown preliminary positive effects on health providers. To extend its effects, we have adapted the FACE COVID strategy developed by Harris (2020) through videos, audios, and infographics as well as assessed its scalability and acceptability. This presentation will show the analysis of six focus groups conducted with 20 health care providers from a private hospital in Colombia. Additionally, data from one focus group conducted with two experts are presented. A qualitative analysis based on an interpretative phenomenological analysis was performed to identify useful features of the strategy on communicating ACT components to health care providers. Descriptive quantitative analyses of each strategy was also conducted. Adjustments to the FACE COVID strategy will be presented, as well as a proposal for piloting and evaluating the implementation of this strategy.

* The Effect of Acceptance and Commitment Training on Improving Physical Activity During the COVID-19 Pandemic

Etana Berger, Ph.D., M.A., BCBA/LBA, The Chicago School of Professional Psychology

Yors Garcia, Ph.D., BCBA-D, The Chicago School of Professional Psychology

Robyn Catagnus, Ed.D, BCBA-D, The Chicago School of Professional Psychology

Jennifer Temple, Ph.D., University at Buffalo

This study aimed to assess whether applied behavior analysis (ABA) procedures such as feedback, goal setting and stimulus control procedures combined with acceptance and commitment training (ACTr) interventions implemented digitally improve levels of physical activity, consistency with self-care values, and psychological flexibility during the COVID-19 pandemic. A nonconcurrent multiple baseline design across five participants was used in this study. Participants included five women with BMI’s in the overweight or obese range. All participants were exposed to two intervention phases. In the first phase, feedback, goal setting and stimulus control procedures were implemented to improve physical activity. In the next phase, these procedures were combined with mindful walking exercises and values clarification exercises. In addition, psychological flexibility related to physical activity and values consistency were measured throughout the study. Results indicated that step count improved with the implementation of ABA+ACTr across all participants. Furthermore, psychological flexibility and self-care value scores improved after the intervention and maintained at 1-week follow-up. Lastly, the impact of physical activity during COVID-19 and the effectiveness and efficiency of ABA+ACT interventions are discussed.

* Gamified ACT interventions: Findings from three randomized clinical trials

Maria Karekla, Ph.D., University of Cyprus

Stella Savvides, Ph.D., University of Cyprus

Patrisia Nicolaou, Ph.D., University of Cyprus

Orestis Kasinopoulos, Ph.D., University of Cyprus

The use of digital technology to improve individual and population health is becoming more popular and can benefit healthcare. One theoretical and therapeutic approach that has lent itself well to digitalization is Acceptance and Commitment Therapy (ACT). Gamification, the application of game design elements (e.g., levels, score or rewards and prizes) can be used to augment ACT content presentation to users. Our team has recently developed programs providing ACT-guided interventions utilizing digital theory driven approaches and particularly persuasive technology and gamification principles in delivering the treatment content in a more playful and vivid way. This paper will present information from two mediation studies, examining the impact of gamified avatar-led interventions on treatment outcomes. The first is an evaluation of an ACT based smoking cessation intervention for young smokers compared to wait-list control group on cessation, self-efficacy and intention to quit. The second is an RCT evaluating a gamified ACT intervention for young females at risk for developing an eating disorder compared to wait-list control on body-shape and weight concerns. Finally, the third is an RCT for digitalized avatar-led ACT for chronic pain vs. an active control group on pain disability, functionality and quality of life. Findings will be discussed in light of the effectiveness of gamified avatar-led ACT interventions for a variety of populations and difficulties.

* Scaling up an Online Acceptance and Commitment Therapy Program for General Mental Health: Rollout and Community Impressions

Carter H. Davis, B.F.A., Utah State University

Korena Klimczak, B.S., Utah State University

Michael E. Levin, Ph.D., Utah State University

While Acceptance and Commitment Therapy (ACT) has been adapted to treat a variety of specific psychological concerns, ACT is at its core a transdiagnostic, process-based intervention that can promote general mental health by increasing psychological flexibility (Dindo et al., 2017). Online interventions for general mental health, including ACT, have been implemented in the context of research studies (Bendtsen et al., 2020). However, strategies for implementing online interventions in real-world settings, and at larger scales, are underexamined (Mohr et al., 2017). This presentation will describe the development and rollout of a self-guided, online ACT program called ACT Guide, which has so far been used by over 2,000 individuals. We will additionally describe the process of coordinating a launch of ACT Guide within a specific naturalistic setting: a large university student body. This will include analysis of a feedback survey administered to 181 students which captured knowledge and opinions of ACT Guide in the context of alternative mental health treatment options available to students. As a whole, this talk will offer insights into the real-world challenges and solutions for expanding access to ACT for the promotion of general mental health in diverse and large-scale settings.

* Effects of Peer-support Coaching on Adherence to the Online ACT Guide Program

Korena S. Klimczak, Utah State University

Michael E. Levin, Utah State University

Michael P. Twohig, Utah State University

Gretchen G. Peacock, Utah State University

Online self-help programs like ACT Guide address significant barriers to receiving therapy, but suffer from low adherence rates (Baumel et al., 2019). Peer-delivered coaching, using undergraduate students as coaches, is an innovative alternative to traditional coaching methods which may improve adherence. To test the efficacy, feasibility, and acceptability of peer-support coaching for college students using ACT Guide, we conducted a randomized controlled trial with three conditions (phone coaching, text message coaching, and a no support control group; N = 95). This was accomplished using a novel ACT-based coaching protocol. Participants who received either phone (M = 8.32, SD = 4.73) or text (M = 6.72, SD = 5.39) coaching completing significantly more modules than participants in the control condition (M = 1.88, SD = 3.06, p < .05). Program satisfaction was significantly greater for participants receiving phone coach than those in the control group (p < .05). These results support peer-support coaching as an efficacious method for improving adherence to online mental health programs, with phone coaching being particularly well-received.

Educational Objectives:

1. Compare various methods for disseminating ACT-based interventions to large and diverse samples.

2. Plan strategies for enhancing the reach and engagement of their own interventions through adjunctive technology.

3. Assess the feasibility of developing ACT self-help treatments to address immediate public health needs (e.g. Covid-19).

**33. The Role of Adherence to Values in Promoting Desirable Behavior**

Symposium - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Literature review, Original data*

Categories: Clinical Interventions and Interests, Valuing

*Target Audience: Beginner*

Chair: Brooke Short, Murray State University

Discussant: Karen Kellum, Ph.D. BCBA-D, University of Mississippi

Jacob Simon, University of Louisiana at Lafayette

Houston Howard, B.S., Murray State University

Danae Papageorgiou, BSc, M.Sc., University of Cyprus

Values, verbal behavior about the things we hold to be of utmost importance in our lives, serve as a key component of the psychological flexibility model and have been extensively researched. Since goal-directed behavior is guided by the values of the individual, understanding the role of valuing is key to behavior change. Valuing has been examined alongside both desirable and undesirable behavior, since it may play a role in guiding individuals towards committed action rather than problematic experiential avoidance. The first presentation will examine both values and goal-directed behavior and their connection to risk-taking, going further to discuss the use of valuing and goal-setting exercises in promoting more functional behavior. The second presentation will posit a model of valued living as a mediator of the relationship between intolerance of uncertainty and psychological well-being, moderated by effortful control. Finally, the third presentation will evaluate two values-based exercises in enhancing approach to phobic stimuli, discussing relevance to exposure therapy that experiences a high dropout rate. Implications for future research into values and clinical implications will be discussed.

* The effect of values and goal-directed behavior on risk-taking

Jacob Simon, University of Louisiana at Lafayette

Jessica Criddle, Murray State University

Michael J. McDermott, Ph.D., University of Louisiana at Lafayette

Risk-taking is associated with substance use, gambling, self-harm, and unsafe sexual practices (Sadeh & Baskin-Sommers, 2016). Risk-taking behaviors may serve to modulate or avoid aversive emotions, making emotion regulation and psychological flexibility promising factors in risk-taking (Weiss, et al., 2012). This two-part study explored processes and skills related to dysfunctional risk-taking. In study one, undergraduate participants completed assessments of psychological flexibility, emotion regulation, and varied risk-taking behaviors. Results indicated goal setting (r =-.136, p <.05), valuing (r =-.170, p <.01), and committed action (r =-.155, p <.05) correlate with lack of risk assessment. Participants in study two will complete assessments of psychological flexibility processes (e.g. valuing, selfing, committed action), emotion regulation, goal-oriented skills, and an array of risk-taking behaviors, including problematic alcohol use. We predict that those with high goal-oriented skills and value-motivated behaviors will engage in less maladaptive risk-taking. Data collection is in progress. Discussion will include use of valuing and goal-setting exercises as tools to guide those high in risk-taking in choosing contextually appropriate, functional behaviors.

* Where Commitment Lies: Do effortful control and valued living change the effects of intolerance of uncertainty?

Houston Howard, Murray State University

Jessica Criddle, Murray State University

Michael Bordieri, Ph.D., Murray State University

Intolerance of uncertainty (IU) is considered to be a transdiagnostic maintenance factor which underlies a range of psychological disorders. Individuals with greater IU may be prone to concentrate on potential threats and engage in behaviors under aversive control (cf. experiential avoidance; Hayes et al., 2012). Within cognitive models, those with lower IU may be more likely to accept uncertainty and act adaptively through self-regulatory processes, enabling them to reorganize goals by transference of effort (Einstein, 2014). From a CBS perspective, constructing values and engaging in committed action helps people translate the process of valuing into patterns of behavior. This study attempts to explore the relationship between IU and psychological well-being mediated by valued living in a sample of undergraduate students. Since self-regulatory processes may be a mechanism by which individuals may inhibit compulsive, safety, or reassurance-seeking behaviors, we hypothesized that effortful control would moderate the mediation of IU and psychological well-being by valued living. Implications for the consideration of effortful control within CBS interventions enhancing valued living and overall wellbeing will be discussed.

* Can Values-based Strategies Lead to Exposure Therapy Engagement in Flying Phobics?

Danae Papageorgiou, University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Exposure is considered the therapy of choice for specific phobias; nonetheless, most individuals never seek treatment, and many drop out of therapy (Wardenaar et al., 2017). Values-based exercises aim to clarify what is important in one’s life and promote behaviour in that direction, irrespective of any negative internal experiences (Harris, 2009). Thus, they could potentially improve motivation to undertake and complete exposure. This study evaluates the use of two values-based strategies: a general, and a prosocial one in increasing approach behaviour towards phobic stimuli, compared to a control. Participants with flying phobia were randomly assigned to one of the conditions, receiving a brief strategy training before completing a virtual reality airplanes exposure task and an in vivo exposure task. Data collection is almost completed. We expect that both values-based strategies and especially the prosocial one will lead to increased approach behaviour towards airplanes. Discussion will focus on how values exercises can be a fast and relatively simple way to augment the use of exposure therapy in specific phobias and anxiety disorders overall.

Educational Objectives:

1. Discuss how goals and values may be valuable in practice to manage dysfunctional risk-taking behavioral patterns.

2. Describe potential processes through which intolerance of uncertainty relates to psychological well-being.

3. Explore how values exercises may increase engagement with exposure therapy in individuals with specific phobias.

**34. Hopeful Creativity: Flexible High-Performance Interventions Within Dynamic Spaces and Places: Sport, Health, and Human Performance SIG Sponsored**

Panel - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Conceptual analysis, Literature review, Original data, Role play*

Categories: Performance-enhancing interventions, Professional Development, Sport, Athletics

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Emily Leeming, Ph.D., Exos

Kelly Dekker, M.Sc. Sport psychology, M.Sc. Social psychology, High Performance Academy, Amsterdam

Jonathan Haynes, M.A., CMPC, Ginger.io

Sanna Turakka, M.Sc., M. Ed., Terapia- ja ohjauspalvelut Elonkuohu

David Udelf, Psy.D., Becker, Udelf & Associates

Athletic landscapes within the last year experienced unprecedented shifts as training environments were identified as primary vector points for COVID-19. Games played in empty arenas served as a stark reminder that 2020 was a year unlike any other. Historically psychological training has been seen as beneficial but only as it complements physical preparedness. As athletes of all levels faced altered plans ranging from dashed Olympic hopes to strategizing how to maintain fitness inside city apartments, training psychological preparedness has come to be seen as important in its own right. To this end sport psychology professionals have seen an increase in requests for services and have had to use creative approaches to adjust typical service delivery. This panel aims to discuss lessons learned and ways ahead as we navigate together the uncharted waters of working with high performers who now find themselves on shaky ground. Additionally, we will also highlight the flexibility virtual platforms have presented in allowing us to meet and work with athletes who travel for both training and competition.

Educational Objectives:

1. List examples of best practices in remote athletic consultation.

2. List examples of using virtual platforms to work with teams and individuals.

3. Identify common challenges and opportunities to working within changing athletic and competition settings.

**35. Self-Conceptualization: Self-Relevant Responding in the Development, Maintenance, and Treatment of Depression**

Panel - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, Depression, Self-Concept, Self-Discrimination, Self-Relevant Responding, ACT, Self-As-Context

*Target Audience: Beginner*

Chair: MaKensey Sanders, M.A., University of Louisiana at Lafayette

Orla Moran, Ph.D., DkIT

Robert Zettle, Ph.D., Wichita State University

Daniel Maitland, Ph.D., Morehead State University

Recent estimates suggest that depression affects about 17.3 million US adults every year, and 264 million worldwide (World Health Organization, 2020). Negative self-evaluations and conceptualizations have traditionally been linked to depression, both in terms of predicting levels of severity and onset of depressive episodes (Mccarthy & Morina, 2020). CBS perspectives, however, take a broader view of self-discrimination and self-relevant responding. For example, the three selves model specifies three functional classes: self-as-process, self-as-content, and self-as-context, which early data suggest predict important areas of functioning related to mental health (Moran & McHugh, 2020). This panel will discuss self-discrimination and self-relevant responding in depression, with a particular emphasis on (1) the development, maintenance, and treatment of depression, and (2) how CBS research and intervention might be responsive to this way of conceptualizing the self in the context of depression.

Educational Objectives:

1. Discuss self-relevant responding in depression across the classes of self-as-process, self-as-content, and self-as-context.

2. Explain the role the different aspects of “selfing” in the development, maintenance, and treatment of depression.

3. Discuss future implications for treatment and research.

**36. Shaping Psychological Flexibility with Real-Time Functional Feedback**

Workshop - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, Behavioral Interventions, Functional Analysis

*Target Audience: Intermediate*

Lou Lasprugato, MFT, Sutter Health

Thomas Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Rikke Kjelgaard, M.Sc., ACT Danmark / Human ACT Sweden

Stock ACT exercises and metaphors that help clinicians introduce new repertoires and promote psychological flexibility abound. However, practicing ACT organically and functionally can remain challenging for many clinicians. As therapists, we may find ourselves returning to old exercises and missing opportunities to create precise, efficient interventions in the moment. We may overlook client feedback that could sharpen our clinical effects. When focused on doing it right, we can easily miss the client in the room or forget to ask clients to make commitments for practice and tracking the effects of their actions.

This workshop will be facilitated by three peer-reviewed ACT trainers who combine practical functional analysis and contextual behavioral approaches to guide clinical conversations. We will demonstrate how to 1) assess and code the function of verbal repertoires in flight; 2) promote behavioral variation through modeling, evoking, and reinforcing within therapeutic exchanges; and 3) foster selection and retention of new behavior through in-session rehearsal. Participants will have opportunities to observe these skills in a demonstration and practice them within small group breakout sessions.

Educational Objectives:

1. Apply an integrated approach of behavioral intervention and functional analysis to guide clinical conversations.

2. Demonstrate how to shape psychological flexibility through modeling, evoking, and reinforcing behavior within therapeutic exchanges.

3. Utilize feedback from a process-based functional analysis to sharpen clinical skills and inform interventions.

**37. Learning how to publish Contextual Behavioral Science**

Workshop - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation*

Categories: Professional Development, Other, Publishing CBS-based work

*Target Audience: Beginner*

Michael Levin, Ph.D., Utah State University

Louise McHugh, Ph.D., University College Dublin

Jonathan Bricker, Ph.D., Fred Hutchinson Cancer Research Center

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

ACBS values sharing knowledge gained through members’ research and applied activities. However, there are challenges for students, early-career professionals, practitioners, and individuals from underrepresented countries and backgrounds in navigating the publishing process. This workshop aims to help support ACBS members’ success with publishing. Presenters from the Centering Science committee, in collaboration with the JCBS editorial team, will discuss strategies for navigating the steps of publishing and common challenges authors encounter. We will aim to “demystify” the publishing process by outlining the process at JCBS, with an emphasis on what editors look for and their decision-making steps. We will discuss how to write an impactful manuscript, highlighting what reviewers/editors look for, and how to effectively revise and resubmit manuscripts. We will also discuss how to communicate CBS-based work, and its significance, to journals unfamiliar with CBS. The workshop will be interactive, with opportunities for questions throughout and to share examples of issues to problem solve. We welcome attendees emailing us their questions and/or manuscripts two weeks in advance so we can tailor the workshop to you.

Educational Objectives:

1. Explain how to effectively communicate CBS principles, concepts, interventions, and overall significance to journal audiences with little or no familiarity with CBS.

2. Identify common mistakes that can be made in preparing and submitting a manuscript.

3. Describe how to effectively interpret and respond to decision letters from journals.

**38. Self Compassion and Courage: An Introduction to Compassion Focused Therapy for Anxiety**

Workshop - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Didactic presentation, Experiential exercises, Literature review, Role play*

Categories: Clinical Interventions and Interests, Anxiety

*Target Audience: Beginner, Intermediate*

Laura Silberstein-Tirch, Psy.D., The Center for CFT

Dennis Tirch, Ph.D., The Center for Compassion Focused Therapy, New York, NY

Human beings have evolved to have a fast-acting threat detection system that can fire up at a moment’s notice to help us survive. However, this capacity leads to trouble when our fear and anxiety dominate the way that we approach our lives. Fortunately, we have also evolved powerful allies in facing challenges: mindfulness and compassionate courage. This introductory workshop in Compassion Focused Therapy (CFT) will explore how the science of compassion can enhance our clinical work with anxiety. Increasing advances in psychological research practice have suggested that compassion may be a significant, active process in psychotherapy effectiveness. Participants will learn an evolutionary model grounded in CFT and the contextual science of compassion. This workshop is specifically designed to open practitioners’ understanding and practice of compassion. Direct, experiential exercises will invite participants to begin to learn key elements of compassionate mind training. Participants will learn how deliberate activation of compassion can generate the courage and psychological flexibility we need to face life's challenges, and step forward into lives of meaning, purpose and vitality.

Educational Objectives:

1. Describe the foundational evolutionary model of compassion, mindfulness and anxiety treatment and how it is used in CFT.

2. Identify the 12 competencies of compassion and how they relate to compassionate mind training and CFT.

3. Explain how to apply specific imagery exercises to help develop compassionate strengths and address anxiety.

**39. Evaluación del funcionamiento conyugal mediante la Integrative Behavioral Couple Therapy: La Formulación DEEP**

***Evaluation of marital functioning through Integrative Behavioral Couple Therapy: learning to do the DEEP Formulation***

Workshop - Thursday, 24 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Professional Development, Terapia de pareja

*Target Audience: Intermediate*

Mara Lins, Ph.D., FACEFI

Para la IBCT en una relación diádica cualquiera, las dos personas se influyen mutuamente a través de su interacción, en el mantenimiento de aspectos positivos y de factores agobiantes. Christensen y contribuyentes establecieron un marco conceptual para comprender el funcionamiento marital. Una relación agobiada tiene una parte de su interacción que regularmente conduce a emociones agobiantes, como la ira y la decepción o la ausencia de reacciones positivas esperadas, como mostrar afecto o atracción sexual. IBCT utiliza un análisis DEEP para comprender la insatisfacción de una pareja: las Diferencias se refieren a las características de cada pareja, como las diferencias en sus personalidades e intereses; sensibilidad Emocional, que es más probable que cree conflicto y angustia; los estresores Externos en el entorno social y físico que interfieren y los Patrones de interacción inflexibles que no resuelven los problemas y los agravan. En este taller se presentará cómo realizar la formulación del caso DEEP a través de ejercicios experienciales y aplicación de cuestionarios para aprender a evaluar el funcionamiento marital antes de iniciar un proceso terapéutico.

*For IBCT in any dyadic relationship, the two people influence each other through their interaction, maintaining positive aspects and stressors. Christensen and contributors established a conceptual framework for understanding marital functioning. A burdened relationship has a part of its interaction that regularly leads to overwhelming emotions, such as anger and disappointment or the absence of expected positive reactions, such as showing affection or sexual attraction. IBCT uses a DEEP analysis to understand a couple's dissatisfaction: Differences refer to the characteristics of each couple, such as differences in their personalities and interests; Emotional sensitivity, which is more likely to create conflict and distress; External stressors from the social and physical environment that interfere and Patterns of inflexible interaction that do not solve problems and aggravate them. This workshop will present how to formulate the DEEP case through experiential exercises and the application of questionnaires to learn to evaluate marital functioning before starting a therapeutic process.*

Educational Objectives:

1. Analizar cuestionarios sobre la relación marital.

2. Hacer la formulación DEEP: Describir las diferencias de una pareja, evaluar las vulnerabilidades emocionales de cada pareja, identificar factores estressantes externos y demostrar el patrón de interacción marital

3. Escribir la Formulación DEEP para presentar a la pareja en la sesión de retroalimentación

**40. Youth and the Transition to Adulthood: The Role of Context, Development, and Process-based Treatment**

Plenary - Thursday, 24 June (5:45 PM - 6:45 PM)

Components: *Didactic presentation, Literature review, Original data*

Categories: Clinical Interventions and Interests, Other, Youth and anxiety

*Target Audience: Intermediate*

Anne Marie Albano, Ph.D., Columbia University Medical Center and Modern Minds of Charleston

The developmental transition through early adulthood is a time of uncertainty and anxiety but also of optimism and growth. For youth with anxiety disorders, everyday tasks become insurmountable, resulting in a failure to achieve independent functioning. CBT and medication are effective treatments for anxiety in youth however, long-term remission through the transition to adulthood is not maintained for half of effectively treated youth, rendering risks for future mental health problems and long term dependency. Traditionally, symptom remission is the focus of treatment, with family context being minimally involved in empirical studies as well as in community-based care. In addition, developmental milestones and age-appropriate functioning has not been a primary target of treatment. And, the unique contextual features of the environments and situations experienced by youth calls for specific attention from therapists in delivering ecologically valid exposure and treatment goals that are meaningful and values-based for the youth. This talk will describe a novel model consistent with ACT and a process-oriented approach with an emphasis on novel components addressing development, parental “letting go” by engaging and addressing core beliefs and fears of the parents and their emerging adult child, and engaging youth in ecologically valid treatment.

Educational Objectives:

1. Describe the tasks of development necessary for adolescents to transition to adulthood.

2. Explain the need for addressing parental over involvement and adolescent dependency.

3. Explain the value of context and developmental stage issues in treatment to increase ecological validity and reduce or develop tolerance of anxiety.

# Friday, 25 June (all times GMT/UTC +2)

**41. Nonattachment: Letting go, becoming free**

Plenary - Friday, 25 June (8:00 AM - 9:00 AM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Literature review*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, Nonattachment, Mindfulness

*Target Audience: Beginner*

Joseph Ciarrochi, Ph.D., Australian Catholic University

Baljinder Sahdra, Ph.D., Australian Catholic University

Acceptance and Commitment Therapy has focused on reducing experiential avoidance, or what clinicians often call “away moves.” I argue ACT has under emphasised experiential attachment, or the downsides of “towards moves.” We define experiential attachment as attempts to cling to positive thoughts, feelings, and other internal experiences, even when doing so creates harm in the long run. One can cling to positive ideas about autonomy (clinging to the idea of “being strong” prompts bullying and job loss”), competence (clinging to the idea of being “a good parent” prompts neglect of self-care), and connectedness (clinging to the idea of “being liked” prompts chasing popularity and neglecting genuine relationships”). Each attachment offers an addictive substitute for genuine autonomy, competence, and connectedness needs.

We present evidence that experiential attachment and avoidance are not opposite sides of the same continuum. For example, the lust for power is not the fear of powerlessness. I hypothesize that experiential avoidance and acceptance need to be targeted by distinctive interventions, and conclude the talk with some concrete examples of how you can use ACT-based self and motivational interventions to undermine harmful attachments.

Educational Objectives:

1. Distinguish between the negative and positive valance systems and how these might relate to different interventions.

2. Describe the benefits of nonattachment for promoting prosocial and well-being behavior.

3. Describe the paradox of nonattachment: Letting go leads to higher, not lower, committed action

**42. How to enjoy old age in super-aged society: A CBS Perspective (超高齢化社会で老年期を楽しむ方法：文脈的行動科学からの観点)**

Invited - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Functional contextual approaches in related disciplines, Prevention and Community-Based Interventions, Elderly, Age-stereotypes, Dementia, Family caregiver, BPSD, the DANCE model

*Target Audience: Beginner*

Takashi Muto, Ph.D., Doshisha University

Aging society is now a global phenomenon. The United Nations’ World Population Prospects (2019) says that the number of persons aged 80 and above is going from 143 million to 426 million by 2050. And Japan has entered a “super-aged” society, with senior citizens aged 65 and above account for 28.7% of its population in 2020. The purpose of this invited address is to present some CBS researches and practices for problems such as ageism and dementia in Japan, “super-aged” society. My talk will have the following contents:

1) how to mitigate behavioral assimilation to age stereotypes, based on Hashimoto et al. (2020).

2) how to reduce the burden of caring for dementia and enhance the quality of life (QOL) in family caregivers, based on Muto (2015, 2016)

3) how to reduce BPSDs through contextual-behavioristic family-based intervention, based on Muto (2018, 2019).

高齢化社会は，今や世界的な現象となっている。国連の「世界人口展望」（2019年）によると，80歳以上の人口は2050年には1億4,300万人から4億2,600万人になるという。そして，日本は2020年には，65歳以上の高齢者が人口の28.7％を占める「超高齢社会」となっている。この招待講演の目的は、日本の「超高齢社会」におけるエイジズムや認知症などの問題に対するCBSの研究と実践を紹介することにある。

私の講演は，以下のような内容を予定している。

1)年齢に対するステレオタイプによる行動同化をいかに緩和するか（Hashimoto et al., 2020）。

2）認知症の介護負担を軽減し、家族介護者のQOLをいかに高めるか（武藤, 2015, 2016）

3）文脈行動科学的な家族介入によってBPSDをいかに減らすか(武藤, 2018, 2019）

Educational Objectives:

1. Conduct the exercise of self-as-observer and word-repetition in order to defuse age-stereotypes for older people.

2. Explain how to conduct case-formulation and interventions for the family caregivers of persons with dementia, based on the DANCE model developed by Dr. McCurry.

3. Describe how to conduct case-formulation and interventions for the behavioral and psychological symptoms of dementia (i.e., BPSD), based on the functional assessments in Behavior Analysis.

**43. The role of ACT processes in understanding and attenuating nonclinical paranoia**

Symposium - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Paranoia

*Target Audience: Beginner, Intermediate*

Chair: Jess Kingston, BSc., M.Sc., Ph.D., DClinPsy, Royal Holloway, University Of London

Eric Morris, Ph.D., La Trobe University

Katherine Newman-Taylor, DClinPsy, University of Southampton, UK & Southern Health NHSF Trust

Lyn Ellett, DClinPsy, Ph.D., Royal Holloway, University of London

Paranoia describes the belief that another person is, or is planning, to intentionally cause one harm—be that physical, social or psychological. Paranoia is common in the general population and is associated with distress and low levels of wellbeing. This international symposium (Australia and UK) reports four novel research studies examining the role of ACT processes in understanding and attenuating nonclinical paranoia. Paper 1 examines the role of psychological flexibility in understanding the impact of paranoid thinking on wellbeing and distress in a nonclinical sample. Next, paper 2 present two linked studies examining the role of self- and other-beliefs, and cognitive fusion, on the impact of attachment imagery on paranoia. Paper 3 focuses specifically on mindfulness, presenting a randomised control trial on the use of an online mindfulness programme for attenuating paranoia. Finally, study 4 presents data from 2 samples with high nonclinical paranoia (university students and adolescents), examining the use of a values and committed action intervention and processes of change. Clinical implications and future directions will be discussed.

* Over Your Shoulder: assessing multidimensional and personalized psychological flexibility on how paranoia impacts wellbeing and distress

Eric Morris, School of Psychology & Public Health, La Trobe University

Jacob Malthouse, School of Psychology & Public Health, La Trobe University

Paranoia can be understood as occurring on a spectrum including common concerns of mistrust and fears of harm from others through to severe persecutory beliefs. There are indications clinical paranoia is associated with psychological inflexibility, and experiential avoidance in particular (Udachina et al., 2014). Less is known about associations between aspects of psychological inflexibility and non-clinical paranoia.

This paper investigates the role of psychological flexibility components in influencing the impact of paranoid thinking on wellbeing and distress. Multidimensional and personalized approaches to measuring psychological flexibility were used in a cross-sectional, online survey study involving a general population sample from Australia and New Zealand (N = 358). As expected, paranoid thinking was associated with poorer wellbeing and greater distress. We found evidence for mediation of the paranoia-wellbeing and -distress pathways via psychological flexibility and inflexibility (Multidimensional Psychological Flexibility Index: MPFI), and similarly for acceptance and avoidance (Personalized Psychological Flexibility Index: PPFI), but not harnessing. A comparison of these mediation pathways will be presented, and implications discussed for understanding and influencing the impact of non-clinical paranoia.

* How does attachment imagery reduce paranoia? The role of cognitive content (beliefs) and process (fusion)

Katherine Newman-Taylor, University of Southampton, UK, and Consultant Clinical Psychologist, Southern Health NHSF Trust, UK

Monica Sood, University of Southampton, UK

Kathy Carnelley, University of Southampton, UK

Paranoia is characterised by unfounded interpersonal threat beliefs, and fusion with these beliefs. Attachment imagery fosters a sense of ‘felt security’ in people with non-clinical and clinical paranoia. Little is known about the mechanisms of change. Models of paranoia differ in terms of the weight placed on cognitive content and process, and therefore whether therapeutic interventions should focus on addressing beliefs or relationship with beliefs. We present two linked studies examining the role of self- and other-beliefs, and cognitive fusion, in the impact of attachment imagery. We used a randomized experimental design and recruited people with non-clinical paranoia (n=117; n=303) to test the impact of secure and insecure attachment imagery, and causal mechanisms. Secure imagery led to reduced paranoia and anxiety, and improved help-seeking, compared with insecure imagery. Self- and other-beliefs, and cognitive fusion mediated the impact on paranoia and anxiety, but not help-seeking. We found larger effects for cognitive fusion. These studies suggest that secure attachment imagery is likely to benefit people with paranoia, and operate via both cognitive content (beliefs) and process (fusion).

* Brief Online Mindfulness for nonclinical paranoia: A Randomised Controlled Trial

Lyn Ellett, Royal Holloway University of London

Robert Shore, University of Surrey, Guildford

Clara Strauss, University of Sussex

Kate Cavanagh, University of Sussex

Mark Hayward, University of Sussex

Brief online mindfulness-based interventions (MBIs) have been shown to reduce anxiety and depression in non-clinical samples; however, there is limited research investigating whether they can reduce paranoia. The current study explored whether a brief online MBI reduced levels of paranoia and increased levels of mindfulness in a non-clinical population. Using a randomised controlled trial design, participants (n=110) were randomly allocated to either a 2-week online MBI or to a waitlist control condition. Measures of mindfulness and paranoia were administered at baseline, post-intervention and 1-week follow-up. Participants in the MBI group displayed significantly greater reductions in paranoia compared to the waitlist control group. Mediation analysis demonstrated that change in mindfulness skills mediated the relationship between intervention type (MBI vs control) and change in levels of paranoia. This study provides evidence that a brief online MBI can significantly reduce levels of paranoia in a non-clinical population

* Using a brief values intervention to attenuate high nonclinical paranoia in university students and adolescents.

Jessica Kingston, Royal Holloway, University of London

Megan Davies, Royal Holloway, University of London

Alice Parker, Royal Holloway, University of London

Lyn Ellett, Royal Holloway, University of London

Paranoia is common, distressing, and negatively impacts health, wellbeing, and functioning. This presentation reports on two RCTs examining the effects of a brief values and committed action intervention in university students (study 1, n=95) and adolescents (study 2, n=90) with height levels of nonclinical paranoia. In university students, the values and committed action intervention led to significant reductions in paranoia as compared to a goals only and a non-values/goals control over a 2-week period. In adolescents, the values and committed action group showed significant reductions in paranoia compared to a non-values control over a 6-week period. In both studies, findings suggested that participants may have been experiencing more positive self-related cognitions after completing the values and committed action intervention as compared to control.

Educational Objectives:

1. Describe what is meant by nonclinical paranoia.

2. Discuss aspects of the ACT model and how they may relate to nonclinical paranoia.

3. Describe the use of ACT components in attenuating nonclinical paranoia.

**44. ACT Interventions and Processes**

Symposium - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Conceptual analysis, Original data*

Categories: Clinical Interventions and Interests, Substance Addiction, Self-help, Appearance, Disfigurement, Auditory hallucinations among patients with schizophrenia, Obesity, Psychedelic, Process, GIMME analysis, Hiigh-density longitudinal, self-perspective

*Target Audience: Beginner, Intermediate, Advanced*

Fabio Zucchelli, M.Sc., University of the West of England

Ayman Elashry, Faculty of Nursing, Alexandria University, Egypt

Lee Hogan, Ph.D., Bangor University

Idoia Iturbe, M.A., University of the Basque Country (UPV/EHU)

Edurne Maiz, Ph.D., University of the Basque Country (UPV/EHU)

Henry Whitfield, M.Sc., Peer-reviewed ACT trainer, Regents University London

Brandon Sanford, M.S., University of Nevada Reno

While ACT is a transdiagnostic intervention, adaptations may be necessary to maximize the acceptability or effectiveness of interventions for particular presenting problems. Alternative methods, such as psilocybin-assisted ACT therapy is also gaining interest, but the mechanisms are poorly understood. The current symposium reports on 1) applications of ACT to challenging clinical problems, such as visible differences, auditory hallucinations, substance addiction, and overweight, and 2) idiographic network analysis of participants’ experiences following a psilocybin-assisted ACT retreat. Applications span the globe and make use of mobile technology, while the psilocybin paper utilizes newer statistical techniques to analyze high-density longitudinal data to examine processes of change.

* Designing and testing a mobile health ACT intervention for adults with visible differences

Fabio Zucchelli, UWE Bristol

Olivia Donnelly, North Bristol NHS Trust

Emma Rush, Vitiligo Support UK

Paul White, UWE Bristol

Heidi Williamson, UWE Bristol

VTCT Foundation Team at the Centre for Appearance Research, UWE Bristol

Adjusting to having an unusual appearance (visible difference) can be challenging. Whether resulting from a congenital condition or acquired injury, treatment or disease, visible difference can lead to social anxiety, depression and/or body dissatisfaction (Rumsey & Harcourt, 2004). Self-management shows promise in addressing such concerns (Norman & Moss, 2015), but mobile health remains an unexplored platform for adults with visible difference.

We will present data from a research project undertaken to design, develop and test a theoretically sound and user-centred ACT-based prototype mobile intervention for this group. In study 1, 220 adults with visible differences took a survey to test experiential avoidance and cognitive fusion as mediators between appearance dissatisfaction and key appearance-focused behavioural outcomes. Significant findings were found in the expected directions. Study 2 charted stakeholder involvement from user representatives and clinicians using mixed qualitative methods to iteratively design a prototype. In study 3, we tested the prototype in a single-group feasibility trial with 36 participants, assessing demand (via retention/usage rates), acceptability (via semi-structured interviews) and limited efficacy testing of appearance and ACT-based outcomes.

* Effect of Applying ACT on Auditory Hallucinations Among Patients with Schizophrenia

Ayman Mohamed Nasr El Ashry, Faculty of Nursing, Alexandria University, Egypt

Samia Mohamed Abd El dayem, Faculty of Nursing, Alexandria University, Egypt

Fatma Hussien Ramadan, Faculty of Nursing, Alexandria University, Egypt

Experiencing voices contributes to struggle and interference with valued living. ACT represents a new generation of behavioral therapies that proposes active acceptance despite experiencing voices. The utilization of ACT may assist in reducing voices and may increase the patient’s feeling of control. Aim: Determine the effect of applying ACT on voices among schizophrenic patinets. Setting: The study conducted at El-Maamoura Hospital for Psychiatric Medicine in Alexandria, Egypt. Subjects: A random sample of 70 male inpatients with schizophrenia was selected. TOOLS: Psychotic Symptom Rating Scales and Voices Acceptance and Action Scale. A quasi-experimental research design was utilized. Results: Significant differences were found between the study and control groups. Conclusion: ACT offers a promising new treatment for auditory hallucination among patients with schizophrenia. A significant improvement in auditory hallucination was found in the study group immediately after implementing ACT and after 3 months and a decrement in re-hospitalization rate and improvement in drug compliance for the study group compares to control one. Recommendations: ACT should be integrated with psychiatric treatment and nursing interventions in the psychiatric setting.

* Moving On In My Recovery: An ACT Intervention for Substance Addiction

Lee Hogan, Ph.D., DClinPsy, Bangor University

W. Miles Cox, Ph.D., Bangor University

Moving On In My Recovery (MOIMR) is a 12-session (12-week), acceptance-based cognitive behavioural group programme that was co-produced and is co-facilitated by treatment professionals and service users in recovery in the United Kingdom. In this talk, two MOIMR studies are described and a new App is proposed. First, the talk reports on a Alcohol Change UK funded feasibility study. This study recruited 61 participants from 6 separate MOIMR groups. Participants were tested prior to group commencement, following completion, and again at a three-month follow-up. The study demonstrated reasonable feasibility to support a larger randomised controlled trial and it showed significantly improved outcomes in wellbeing and psychological flexibility at the end of the programme, which was maintained at a three-month follow-up: abstinence rates increased from 55%, to 62% to 68% at the three-month follow-up. Second, a qualitative study recruited 10 participants (up to 12 months after competing MOIMR) to explore the mechanisms of change using a grounded theory. Finally, the development of a newly funded MOIMR App is described.

* The effect of an ACT and mindfulness group intervention on psychological and physical well-being of adults struggling with overweight: a preliminary study

Idoia Iturbe, University of the Basque Country

Edurne Maiz, University of the Basque Country

Iratxe Urkia, University of the Basque Country

Eva Pereda-Pereda, University of the Basque Country

Enrique Echeburúa, University of the Basque Country

Although obesity has a steady increase of prevalence, we do not count on a treatment guaranteeing results’ maintenance, yet. Third-wave behavioral therapies have shown favorable results in this regard. This preliminary study examines the effect of an ACT- and mindfulness-based group intervention (Mind&Life intervention) on quality of life, eating behaviors, and weight-management of people with overweight or obesity. Sample was comprised of 70 adults between 20 and 70 years old with overweight or obesity and were randomly assigned to either (a) the treatment as usual (TAU) or (b) TAU plus Mind&Life intervention. Individuals receiving Mind&Life intervention showed a greater reduction of the impact of weight on quality of life (F(1)= 12.164; p= .001), emotional eating (F(1)= 5.202; p= .026), external eating (F(1)= 13.632; p= .000), and BMI (F(1)= 7.196; p= .009); and a greater increase of mindfulness ability (F(1)= 10.560; p= .002) than people receiving TAU at posttreatment. Results give preliminary support to Mind&Life intervention for enhancing quality of life and mindfulness abilities, eating behaviors modification, and weight-management of people struggling with weight-related issues.

* A longitudinal investigation into psychedelic-assisted ACT therapy processes: An ideographic network analysis

Henry Whitfield, Regents University London

Brandon Sanford, University of Nevada, Reno

The integration phase of psychedelic-assisted therapy remains the one of the least understood. Meanwhile new statistical methods are emerging to analyze high-density longitudinal data in order try and understand causal processes. Data was collected from participants undergoing a Psilocybin-assisted ACT-informed retreat that consisted of two psychedelic ceremonies during a 4.5 day period. Participants were encouraged to lean into self-as-content and shame and were then supported with ACT therapy post-retreat.

Using the Subgrouping Group Iterative Multiple Model Estimation (S-GIMME), analyses were run using 6 nodes at 24hr intervals over an average of 2 months, with 16 participants. Nodes were: 1) Openness, 2) Acting with awareness, 3) Pursuing what matters, 4) Negative emotion, 5) Personality in the way and 6) Life Satisfaction. Data-driven subgrouping and uSEM analysis were utilized. Significant network models were created for each member of our sample and collapsed into two subgroups. Statistically significant models were found at group-level, showing predictive and causal relationships. We will consider how these relate to our individual cases presentations as well as future research questions.

Educational Objectives:

1. Discuss applications of ACT to unique clinical problems, including visual differences, auditory hallucinations, addiction and overweight.

2. Describe the development of mobile ACT interventions.

3. Discuss process models and outcomes from psilocybin-assisted ACT therapy.

**45. ACT for Cancer: Processes and Applications with Patients and Oncology Nurses**

Symposium - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Cancer, Online interventions, Qualitative study, Moderation, Mediation, Experiential avoidance, Cognitive fusion, Depression, ACT stress-management intervention, Fatigue

*Target Audience: Beginner, Intermediate, Advanced*

Silvia Golita, Babes-Bolyai University

Wenqian Zhao, Ph.D. Student, The Chinese University of Hong Kong, Faculty of Medicine

Huiyuan LI, The Nethesole School of Nursing, The Chinese University of Hong Kong

William Kent, BSc, University of Chester

Individuals with cancer, as well as the nurses that care for them, endure high levels of stress. Faced with life-threatening situation, they may experience an array of distressing thoughts/feelings, at the same time that values might also be particularly poignant. The current symposium presents 5 papers exploring ACT processes and applications with cancer patients and oncology nurses using a variety of methodology. The first paper reports on semi-structured interviews on acceptability of an online guided ACT intervention for breast cancer patients. The second paper presents self-report data on the relationship between cognitive fusion, experiential avoidance and depressive symptoms in large sample of breast cancer patients. The third reports on themes of experiential avoidance in lung cancer patients. The fourth reports on a pilot study on ACT for lung cancer. A final paper reports on 2 non-concurrent multiple-baseline single-case experimental design studies with oncology nurses participating in an ACT intervention for stress management.

* Patients experience of an internet-based Acceptance and Commitment Therapy intervention for breast cancer: a qualitative study

Silvia Golita, Ph.D. Candidate, Babes-Bolyai University

Adriana Baban, Ph.D., Babes-Bolyai University

Background: Breast cancer patients report lack of social engagement, few meaningful activities and high symptom interference. Acceptance and Commitment Therapy is effective for cancer patients and online interventions are a well-researched alternative, with caveats in tailoring treatment content and format, and attrition. Oncovox is an online guided ACT intervention focused on improving behavioural activation, social engagement and symptom interference for breast cancer patients diagnosed in the past 18 months.

Methods: An exploratory approach was used to investigate how Oncovox was experienced. Fifteen participants were interviewed over videoconference after completing Oncovox.

Results: Qualitative analysis using grounded theory yielded 2 core categories and 8 subcategories. In treatment: Physical restraints, Temporal restraints, Therapist contact, and Willingness. After treatment: Attitude to distress, Acting with distress. Individual differences and specific intervention conditions may explain variations in how the treatment was experienced and its impact.

Conclusions: Engagement and intervention outcome might by enhanced by tailoring it`s content and delivery to individual characteristics. Further research on attrition and negative effects of intervention might clarify what enables users to benefit from Oncovox."

* Role of experiential avoidance between cognitive fusion and depression in breast cancer patients: A cross-sectional study

Wenqian Zhao, Ph.D. Student, The Chinese University of Hong Kong

Lulu Li, M.SC., Xian Jiaotong University

Xiaomei LI, Ph.D., Xian Jiaotong University

Yuen-yu Chong, Ph.D., The Chinese University of Hong Kong

Wai-tong Chien, Ph.D., The Chinese University of Hong Kong

Breast cancer patients often suffer from depression in association with fixed negative thinking (i.e., cognitive fusion), accompanied by negative coping strategies such as avoidance. This study aims to explore the role of the experiential avoidance between cognitive fusion and depression in breast cancer patients. Acceptance and Action Questionnaire-2nd Edition (AAQ-II), Cognitive Fusion Questionnaire (CFQ) and Patient Health Questionnaire Depression Scale-9 (PHQ-9) were used as instruments. The results from 204 participants showed that experiential avoidance had no statistically significant mediating effect on cognitive fusion and depression among breast cancer patients (R-square=0.06, F=4.59, p=0.52). While a statistically significant moderating effect was found (R-square=0.15, p＜0.001) with 8.43% contribution of variance of moderation (R-square change=0.08, F=19.72, p＜0.001). This study recommends future study could improve depressive symptoms related to cognitive fusion of breast cancer patients by addressing their evasive coping.

* Patients’ experience of experiential avoidance on the trajectory of being diagnosed with advanced lung cancer: A qualitative study

Huiyuan Li, The Chinese University of Hong Kong

Cho Lee Wong, The Chinese University of Hong Kong

Xiaohuan Jin, The Chinese University of Hong Kong

Patients with advanced lung cancer experience avoidance when they are diagnosed with lung cancer. This study aims to understand the experience of experiential avoidance on coping with disease among patients with advanced lung cancer.

A qualitative study was conducted with individual face-to-face semi-structured interview. Twenty-one patients with advanced lung cancer were recruited in the respiratory department in China. Content-analysis was used for data analysis.

Patients adopted avoidant strategies to cope with disease. They think they were condemned to death, fall into the thought of “why I got this disease”, fear of imminent death, worry about being burden to the family, and even feel that life has no meaning. They chose to deliberately conceal their despair in front of their families and not participate social activities, recognizing the disease as a shame.

The findings increased understanding of this topic that has been seldom studied in China. Healthcare professionals should develop an acceptance-based intervention based on the situation to help increase the tolerance of cancer to live a meaningful cancer life guided by their own values.

* Acceptance and Commitment Therapy for improving fatigue interference and health-related quality of life in patients with advanced lung cancer: Protocol for a feasibility randomised controlled trial

Huiyuan Li, The Chinese University of Hong Kong

Cho Lee Wong, The Chinese University of Hong Kong

Xiaohuan Jin, The Chinese University of Hong Kong

Most patients with lung cancer in China are first diagnosed at advanced stage. Fatigue is the most prevalent symptom for lung cancer patients, which refers to cancer-related fatigue (CRF). Lack of acceptance and avoiding fatigue-related experience can narrow meaningful adaptive behaviors and reduce value-based life. Acceptance and Commitment Therapy (ACT) does not focus on reducing symptoms but aims to improve functioning and health-related quality of life (HRQoL) by increasing psychological flexibility. This study aims to assess feasibility and acceptability of the intervention as well as preliminary effectiveness of ACT on fatigue interference and health-related quality of life in patients with advanced lung cancer. Twenty-four participants with advanced lung cancer will be randomly allocated to four sessions (1 h/session) of ACT group or usual care control. The primary outcome are fatigue interference and health-related quality of life. The main outcomes will include the feasibility of the recruitment process and the measurement tools, the acceptability of the intervention for participants and the adherence to the programme. Data will be collected pre- and post-intervention.

* Testing the initial effectiveness of ACTION for stress-management: An Acceptance and Commitment Training Intervention for Oncology Nurses

William Kent, BSc, University of Chester

Nick Hulbert-Williams, Ph.D., University of Chester

Kevin Hochard, Ph.D., University of Chester

Lee Hulbert-Williams, Ph.D., University of Chester

Oncology nurses are at high-risk of chronic stress and burnout. Evidence-based stress-management interventions are essential to promote wellbeing and optimal patient care. We report results from two studies which aimed to test the initial effectiveness of an ACT-based stress-management intervention for oncology nurses (ACTION). ACTION is group-delivered across three weekly 90-minute sessions, and was evaluated using a non-concurrent multiple-baseline single-case experimental design in both studies (n=7 and n=11, respectively). Participants completed self-report assessments of daily stress, psychological inflexibility and self-efficacy over a five-week period. Study 1 failed to identify significant intervention effects from baseline to intervention, but follow-up analyses indicate potential delayed intervention effects for stress and psychological flexibility. Due to floor effects in stress measurement in study 1, we screened participants for high baseline stress in study 2 as additional eligibility criteria. Findings indicate medium intervention effects (average Tau-U=-0.58) on stress for five participants. Alternative, future-oriented outcomes such as stress-management self-efficacy may be a more useful outcome than direct self-reported stress-reduction; we are currently developing such a measure for future ACT-based stress-management research.

Educational Objectives:

1. Discuss acceptability and feasibility of pilot cancer interventions.

2. List themes of avoidance and control in cancer patients and their relationship to depressive symptoms.

3. Describe outcomes for ACT for stress management of oncology nurses.

**46. Never Good Enough: Responding to perfectionistic self-criticism as a therapist using flexibility and compassion: Australia & New Zealand Chapter Sponsored**

Workshop - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Professional Development, Perfectionism, Therapist well-being, Self-care, Compassion

*Target Audience: Beginner, Intermediate, Advanced*

Jennifer Kemp, MPsych, Private Practice

“Another therapist would help this person better than me”

As we sit with our clients, making room for their doubts, fears, and struggles, so too do we sit with our own doubts, fears, and struggles as therapists. The uncertainty in our work, a rapidly changing world, challenging clients, and our desire help, all come with worries we are not adequate as a therapist. We seek reassurance, attend training, and buy books, yet none of these silences our critical inner voice. We must somehow live with uncertain outcomes and our own imperfection.

This presentation dives into the inner world of the therapist and explores the impact perfectionistic self-criticism can have on our working life. Following a concise behavioral framework for self-criticism, the presenter will guide participants through experiential exercises that explore their unworkable responses to self-criticism and how to move towards values.

Through metaphors infused with self-compassion, participants will learn to respond to self-criticism with flexibility, compassion, and appreciation. Participants will leave the workshop with scripts and templates to use with both their clients and themselves.

Educational Objectives:

1. Define therapist self-criticism from a behavioral perspective and explain how this can interfere with living a valued life.

2. Describe your own patterns of self-criticism and unhelpful ways of responding.

3. Apply skills of self-compassion and Acceptance and Commitment Therapy to develop new ways of responding to self-criticism and move towards a valued life.

**47. How to improve the effectiveness of therapeutic relationship in complex conceptualization: A FAP perspective**

Workshop - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Professional Development, FAP, Complex clinical cases, Therapeutic Relationship

*Target Audience: Intermediate, Advanced*

Katia Manduchi, Ph.D., Iescum, ACT Italia, Acbs, Cbt Italia, Ascco, Ascco, Humanitas

Irsida Zaimaj, Psy.D., Studio ANKORA; IESCUM Alumni, ASCCO

Eleonora Maria Villa, Psy.D., Iescum Alumni, ACT Italia, Acbs, Humanitas

Clients with complex conceptualization (multiple traumas, challenging diagnoses, with existential problems or with difficulties in relationships) represent a big challenge and chance for all therapists. But sometimes this could mining the therapeutic relationship and improve the risk to create a low self-efficacy experience in both, clients and therapists. Sometimes also dealing with these clients could determinate an increasing of Non-Functional Therapist Clinically Relevant Behavior (T1), not always easy to be recognize from the therapist. In this context sincerity, authenticity and intimacy behaviors of the therapists are important processes that can model and can improve the therapeutic relationship with clients.

In this workshop, sharing with participants the Fap conceptualization of different clinical cases, would be used as a starting point for illustrate how to operationalize in the clinic context a model of more authentic relationship that could improve at the same time the Functional Therapist Clinically Relevant Behavior (T2) and the Functional Client Clinically Relevant Behavior (CRB2).

Experiential exercises in small groups would be an instrument for exploring some clinical issues in our clinical practices.

Educational Objectives:

1. Describe the characteristics that FAP can improve in the therapist, and in the therapeutic relationship.

2. Explain complex cases formulation.

3. Use sincerity and authenticity in the therapeutic relationship.

**48. A third wave CBT universal protocol and its application for therapy & a community resilience prevention intervention**

Workshop - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Original data*

Categories: Prevention and Community-Based Interventions, Clinical Interventions and Interests, ACT, Children and Adults, Social emotional learning, Universal protocol, Brain research based techniques, Mindfulness

*Target Audience: Intermediate, Advanced*

Daniel Hamiel, Ph.D., IDC Herzliya Israel

This course should be taken as part of the current innovative approach to psychotherapy, directed to address masses of people who might need psychological assistance. The course will present a universal short protocol mainly based on Acceptance and Commitment Therapy approach, created for psychotherapy and implemented and adapted to a resilience prevention intervention.

Based on the therapeutic protocol, an intervention that integrates emotional, physiological and cognitive behavioral techniques as well as attentional regulation, mainly mindfulness, was developed to build resilience in the community. Thousands of teachers and counselors have trained, to deliver resilience to their students (~1,000,000 nationwide). The program has been endorsed by the Ministry of Education of Israel to be part of the regular curriculum of every school. A series of empirical studies has shown the effectiveness of the program. This cost-effective approach, delivered by the teachers decreased by 50% the development of posttraumatic responses in children following severe stressful exposure.

The intervention is adapted to different age groups and cultures (Israeli Muslims, Refugees, Orthodox Jews and a pilot in schools in Norway).

Educational Objectives:

1. Explain the theoretical background of the clinical and the resilience prevention intervention.

2. Describe how to implement the principles and techniques of the intervention with groups, and with individuals in the clinic.

3. Explain how to use tools from the intervention.

**49. CFT for Caregivers of young people with mental health difficulties: Introduction to essential skills and activities: Ontario Chapter**

Workshop - Friday, 25 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Experiential exercises, Original data, Role play*

Categories: Clinical Interventions and Interests, Compassion Focused Therapy, Parenting/Caregiver, Child and Adolescent

*Target Audience: Beginner*

Eli Cwinn, Ph.D., C.Psych, University of Western Ontario

Katarina Guillen, B.A., Psychology, Western University

Olivia Faulconbridge, M.A., Western University

This workshop provides instruction on a CFT-based group approach for caregivers of children and adolescents with mental health difficulties (CFT-Caregiver). CFT-Caregiver supports caregivers manage their own self-criticism, self-blame, and parental self-efficacy while also increasing their capacity to support their child’s recovery and treatment. Empirical evidence for virtual delivery of the program will be briefly summarized, followed by a review of the 4 two-hour sessions covering caregiver-directed interventions for self-criticism/blame, assertiveness, and behaviour change, as well as, caregiver-mediated interventions (targeting the child) that help young people access and resolve painful emotions, strengthen the connection between parents and children, and engage in committed actions.

Workshop attendees will learn how to use CFT-Caregiver strategies through didactic instruction, demonstration, experiential exercises, and the use of breakout rooms for role play and practice. Our intent is to increase clinician capacity in using CFT approaches to target caregivers as an active component in the treatment of young people with mental health difficulties. The workshop is intended for clinicians with a basic knowledge of CFT and/or psychotherapy with young people.

Educational Objectives:

1. Apply clinical reasoning decisions related to when, why, and how caregivers should be targeted as a component of treatment plans for young people with mental health difficulties.

2. Use CFT interventions to promote psychological flexibility in caregivers and reduce caregiver burnout.

3. Explain how to help caregivers respond to their child's emotional needs in a way that promotes psychological flexibility in the child and safeness and trust in the caregiver-child relationship.

**50. Rapid Role-Play: Flexibly Integrating the ACT Core Processes into Therapy**

Workshop - Friday, 25 June (10:00 AM - 1:15 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Flexible use of ACT

*Target Audience: Beginner, Intermediate, Advanced*

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation

Darrah Westrup, Ph.D., Private Practice

Many therapists are drawn to Acceptance and Commitment Therapy (ACT) for its compassionate stance toward the self and others, its fundamental acceptance approach to human experience, and its capacity to assist clients in making powerful life-enhancing choices linked to values. In our experience, many therapists are truly moved by their contact with ACT's work and its potential to reduce suffering. Despite this heartfelt connection to the model, some therapists continue to grapple with flexibly integrating the six core processes in a session. From those newer to ACT and more seasoned, we hear that they still struggle to work within the framework in real-world settings. Becoming competent in ACT can take time and effort. This workshop will use a rapid role-play method to demonstrate and explore the core processes' flexible integration. Attendees are invited to role-play clients in short segments. Presenters will demonstrate both flexible integration of the 6 core processes in whole cloth and “on-demand” audience selected processes. Short discussion will follow each role-play to understand the desired function of the demonstrated intervention.

Educational Objectives:

1. Describe the 6-part ACT model and the functional purpose of each process.

2. Describe how flexible application of the 6 core processes is built into clinical work.

3. Describe and apply the core processes from an ACT perspective given several client presentations

**51. Rule Busting: Using the RFT account of rule-following to promote flexible, appropriately contextualized responding**

Workshop - Friday, 25 June (10:00 AM - 1:15 PM)

Components: *Didactic presentation, Experiential exercises, Literature review, Original data*

Categories: Relational Frame Theory, Clinical Interventions and Interests, Rule-governed behavior

*Target Audience: Intermediate, Advanced*

Louise McHugh, Ph.D., University College Dublin

Alison Stapleton, B.A., University College Dublin

Rules have a substantial influence on human behavior, with many instances of psychological rigidity seeming to stem from rigid rule-following. Rule-following is a double-edged sword. While it can allow us to bypass trial and error, facilitating rapid and effective responding, it can also reduce our sensitivity to our context. Reduced sensitivity and awareness of shifting environmental contingencies is highly problematic and can cause us to maintain behaviors that are no longer useful for us or even cause us to engage in harmful behaviors. And yet, at times we need to promote rule-following. For example, we want people to adhere to guidelines that reduce the spread of COVID-19, we don’t want children to test rules around looking both ways before crossing the street, and in a clinical context, we want clients to test and follow rules that clinicians provide (e.g., rules around valued action). This workshop will introduce attendees to the Relational Frame Theory account of rule-governed behavior and how this account can facilitate flexible, appropriately contextualized rule-following, while emphasizing the importance of the individual.

Educational Objectives:

1. Describe key developments within relational frame theory and acceptance and commitment therapy in the area of rule following.

2. Demonstrate knowledge of how to reduce rigid rule following in the individuals/groups that they work with.

3. Describe how to apply cutting edge developments in relational frame theory research to promote flexible, appropriately contextualized responding with the individuals/groups that they work with.

**52. CBS on a Large Scale: Applications to Higher Education, Sociopolitical Conflict and Healthcare**

Symposium - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Conceptual analysis, Didactic presentation, Original data*

Categories: Organizational behavior management, Educational settings, PROSOCIAL, FACT, DBT, ACT Matrix, Higher Education, Processes of Change, Applied Behavioral Analysis of Culture Change, Employee Engagement, Psychological Safety, Civility, COVID-19, Crisis Intervention, Verbal Aikido

*Target Audience: Beginner, Intermediate, Advanced*

Anna Young, Ph.D., Montana State University Billings

Brian Ernest, Ed.D., Montana State University Billings

Hubert Czupała, M.A., Center for Cognitive and Behavioral Therapies in Poznań

Elizabeth Gifford, Ph.D., National Center for Organizational Development

Beth Peyton, Ph.D., Veterans Health Administration

Stephanie Caldas, M.S., University of North Texas

Tahereh Seghatoleslam, professor, University of Malaya Centre of Addiction Sciences (UMCAS)

Hussain Habil, M.D., B.S., Mahsa University

Contextual behavioral science (CBS) seeks a set of principles and processes that can be scaled to large groups of people for prosocial purposes. This includes in specific settings of higher education, organizations and healthcare, but also at a global level to end suffering and achieve a more just and kind world. The current health crisis of the pandemic has intensified this need, with new challenges in education and healthcare delivery, and increased burden to people already enduring incredible suffering with war and unmet basic needs. The first paper of the symposium presents on the application of the psychological flexibility model to higher education. This is followed by several papers in healthcare that report on 1- efforts to use prosocial principles to support healthcare workers, 2- work with adolescents with HIV in Zambia, and 3- outcomes of a large scale roll out of ACT to increase civility in diverse health care organizations. A final paper theorizes how ACT or related interventions might be leveraged for sociopolitical peace.

* Turning Universities Teal: Application of Psychological Flexibility in Higher Education Settings

Ania Young, Ph.D., Montana State University, Billings

Brian Ernest, Ed.D., Montana State University, Billings

Nicole Gurash, Psy. D., ABC Behavioral Services, LLC.

The COVID-19 pandemic, which has padlocked economies around the world, has also affected education systems in most countries. Some 1.5 billion students are no longer able to physically attend school (Kandri, 2020; Kezar & Holcombe, 2017). The impact has been transformational as educators struggle to put in place practical solutions for remote teaching and learning. COVID-19 is causing colleges and universities to challenge deep-rooted philosophies of when, where, and how to deliver education. Now more than ever, institutions of higher education need to figure out ways to be flexible and to alter existing operations, many of which are built upon long-standing traditions. Are there mechanisms and strategies that can help higher education organizations grow more malleable in face of impending challenges that pressure them to change? The authors will examine the higher education organizational model through the lens of a behavioral science paradigm (i.e., the psychological flexibility model) and will describe how this model encourages patterns of optimal organizational behavior as described in Frederick Laloux’s (2014) contemporary prototype for reinventing organizations.

* Pay ACT Forward: Application of ACT crisis intervention training during COVID-19 pandemic as an example of PROSOCIAL activities of a global nature

Hubert Czupała, M.A., Center for Cognitive and Behavioral Therapies in Poznań

One way to be a part of the support system for people experiencing frontline crisis was for us to create an online crisis intervention center where employees of the healthcare services could get free help. To our surprise no one used it.

The use of PROSOCIAL, helped us to change the course of our action: Instead of offering free crisis interventions, we proposed crisis intervention training for professionals and not for free but in a barter agreement.

As I write, we have trained over 370 professionals from different European countries and created local supervision groups that provide support adapted to the local context. And since all of them pay forward, the chain is growing!

We want to share our experience, values, methodological assumptions and the results of the qualitative evaluation of the workshops conducted so far. We believe our story of how we overcame helplessness, and how we managed to build an ACT oriented community ready to provide professional help will encourage other ACBS members to become part of this initiative themselves.

* Bringing Connection to Scale: Fostering Relational Values, Acceptance, and Flexibility Across Large Organizations

Elizabeth V. Gifford, National Center for Organizational Development

Beth J. Peyton, National Center for Organizational Development

A just and sustainable world requires many people working together in shared purpose. We need tested models that help people bridge their differences and embrace collaborative ends. This paper presents an ACT-informed group program that was designed to foster acceptance, values, flexibility and relationships in large, diverse healthcare organizations. The goal was to improve the culture of care and connection among all employees in the demographically and professionally diverse workforce of VHA hospitals. The program spread from a pilot of the process model to a national, employee-led movement with over 10,000 participants across 100 hospitals. Random coefficient models (Holtz & Harold, 2009; N = 2,027) indicate that ACT-informed processes significantly moderated participant improvement. To the extent that participants' ACT-I skills improved during training, workplaces were experienced as more collaborative, civil, and psychologically safe at follow up. Participants also felt more engaged with their organization. Using Bliese and Ployhart’s model-building approach (2002), final models accounted for 44% of variance in workplace civility, 45% of variance in psychological safety, and 44% of variance in employee engagement.

* Disparate times call for mindful measures: Longitudinal invariance of the MAAS in Zambian adolescents and young adults living with HIV

Stephanie V. Caldas, M.S., University of North Texas

Amy R. Murrell, Ph.D., Behavior, Attention, and Developmental Disabilities Consultants, LLC

Danielle N. Moyer, Ph.D., Oregon Health & Sciences University

Julie A. Denison, Johns Hopkins Bloomberg School of Public Health

Adolescents living with HIV face unique risk factors related to HIV care and adherence to antiretroviral medication (Adejumo et al., 2015). Mindfulness has been linked to increased adherence behavior among adolescents (Luna et al., 2013). Examining mindfulness in health and mental health interventions depends on the reliability, validity, and cultural relevance of the measurement. This study examined the factor structure and longitudinal invariance across three time points of the Mindful Attention Awareness Scale (MAAS) in Zambian adolescents and young adults (N = 278) living with HIV (Mage = 19.11; [SD = 2.45]). Participants completed the MAAS at baseline, midpoint (six months post baseline), and at endline (12 months post-baseline) of an intervention aimed to increase adherence among adolescents and young adults living with HIV. Using confirmatory factor analysis, we examined the factor structure and longitudinal measurement invariance of the MAAS. The MAAS was not supported, though a short-form 6-item version was invariant at the configural, metric, and scalar level. We will discuss relevant cultural, lingual, and developmental factors and other sources of measurement bias.

* ACT and Globalization: World Peace DBT or ACT

Tahereh Seghatoleslam, Ph.D., University of Malaya Centre of addiction Sciences (UMCAS)

Hussaain Habil, M.D., Mahsa University

Rusdi Rashid, M.D., University of Malaya Centre of Addiction Sciences (UMCAS)

In the last decade the third wave of behaviour scientists such as, ACT and DBT are debating the process of reducing human suffering and deal with mental illnesses.

Meanwhile, the people of Middle Eastern Countries are fighting against Corona Virus in 2020-2021. In addition, they are also victims of Socio-political Wars.

The daily and hourly news and research have shown that people living in Middle East are experiencing lot of trauma even their children and family are killed in the war every day.

the immigrants or refugees to other countries depriving of the basic needs and do not have security, food, and cloths to survive (as example in Malaysia).

Which principal of ACT (RFT) and DBT could creative World Peace?

My assumption is that ACT needs to add another dimension named Culture.

Therefore, might be Cultural and Psychological Flexibility could solve the political conflicts in the Middle Eastern Countries or worldwide.

Educational Objectives:

1. Describe how processes of psychological flexibility may be applied to higher education.

2. Discuss how processes of psychological flexibility may address issues of sociopolitical conflict.

3. Describe the application of ACT to healthcare professionals and organizations.

**53. Empirical innovations in psychometric development & validation of self-report measures of psychological flexibility: Hawai'i Chapter Sponsored**

Symposium - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Other, Psychometrics

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Samuel Spencer, M.A., University of Hawai'i at Mānoa

Discussant: Ronald Rogge, Ph.D., University of Rochester

Lucas Baker, M.A., University of South Dakota

Nicholas Borgogna, M.A. (Ph.D. Expected July 2021), College of William and Mary (Incoming Texas Tech University)

Clarissa Ong, M.S., McLean Hospital

Within a process-based CBT account, reliable and valid measures are necessary to quantify both process of change and outcome variables (Hayes & Hofmann, 2020). Within a CBS framework (Hayes et al., 2011), psychological flexibility is posited as a key process of change (Doorley et al., 2020). This symposium seeks to advance our understanding of innovative strategies and contexts for studying the psychometric properties of measures of psychological flexibility and related processes from a CBS perspective. The first paper highlights the utility of network analyses to identify structural relations among psychological flexibility processes and their associations with psychiatric symptomology and quality of life. The second paper examines the measurement and structural invariance of the Acceptance and Action Questionnaire-II (AAQ-II; Bond et al., 2011) as it applies to individuals from diverse ethnic backgrounds. The third paper explores the psychometric properties of commonly used contextual CBT self-report questionnaires using an ethnically diverse sample of emerging adults from Hawai’i. The final paper compares the discriminant validity and item performance of four commonly used measures of psychological inflexibility.

* Network Analysis of Structural Relations of Psychological (In)flexibility Processes, Psychiatric Symptomology, and Quality of Life

Lucas D. Baker, University of South Dakota

Rachel C. Bock, University of South Dakota

Jen L. Kuo, University of South Dakota

Emily A. Kalantar, University of South Dakota

Christopher R. Berghoff, University of South Dakota

Recent psychometric developments have allowed for process-sensitive assessment of psychological (in)flexibility, yet evaluation of structural relations between processes, as well as their unique associations with relevant outcomes, remains limited. The present study aimed to clarify interrelations of processes by applying regularized gaussian graphical network analyses to data from a student sample that completed cross-sectional surveys, which included the Multidimensional Psychological Flexibility Inventory (MPFI; Rolffs et al., 2017). Results identified six flexible and six inflexible processes that organized into theoretically consistent clusters. Moreover, majority of flexible processes exhibited unique inverse associations with corresponding inflexible processes (e.g., defusion ⟷ fusion). Results also suggested that processes quantitatively aligned with open, aware, and active dyads theorized by others (Hayes et al., 2011), though substantial associations between dyads were observed. No single process emerged as universally associated with psychiatric symptomology or quality of life over and above others, which supports the need for multidimensional assessment of individuals to identify targets of intervention in the process-based era. Network psychometrics and opportunities to enhance meaningful clinical outcomes will be discussed.

* A Multicultural Examination of the Measurement and Structural Invariance of the AAQ-II: Implications for Asian American, Black, Latinx, Middle Eastern, and White Individuals

Nicholas C. Borgogna, M.A., University of South Alabama, College of William and Mary, and Texas Tech University

Ryon C. McDermott, Ph.D., University of South Alabama

The AAQ-II is a popular measure of psychological inflexibility. Though its psychometric properties have been extensively studied, a gap remains regarding the measurement function of the AAQ-II across English-speaking ethnic groups. The present study examined a large dataset of college students (N = 24,439) and tested the measurement invariance of the AAQ-II across Asian American, Black, Latinx, Middle Eastern, and White participants. We then examined how ethnic group moderated psychological inflexibility as a predictor of anxiety and depression. Multigroup SEM indicated support for configural but not stricter forms of measurement invariance across all groups. DMACS analyses suggested the effect size of the non-invariance was small. The AAQ-II demonstrated a strong positive correlation with psychological distress measures across groups. Moderation analyses indicated the AAQ-II was a significantly stronger predictor of anxiety and depression for White participants (β’s = .717, .738) compared to Asian American participants (β’s = .671, .665) and a significantly stronger predictor of anxiety for White participants compared to Latinx respondents (β = .662). Implications for research, theory, and clinical practice are discussed.

* A Preliminary Psychometric Validation of the Five Facet Mindfulness Questionnaire, Engaged Living Scale, and Acceptance and Action Questionnaire-II, with Racially and Ethnically Diverse Emerging Adults in Hawaiʻi

Samuel D. Spencer, M.A., University of Hawaiʻi at Mānoa

Joanne Qina’au, M.A., University of Hawaiʻi at Mānoa

Duckhyun Jo, M.A., University of Hawaiʻi at Mānoa

Mapuana Antonio, DrPH, University of Hawaiʻi at Mānoa

Earl S. Hishinuma, Ph.D., University of Hawaiʻi at Mānoa

Fumiaki Hamagami, Ph.D., University of Hawaiʻi at Mānoa

Akihiko Masuda, Ph.D., University of Hawaiʻi at Mānoa

Research on contextual cognitive behavior therapy (CBT) remains limited for racially and ethnically diverse adults in the U.S. The present study aimed to psychometrically validate three commonly used, contextual CBT-related self-report measures with racially and ethnically diverse adults in Hawaiʻi. These measures were the Five Facet Mindfulness Questionnaire (Baer et al., 2006), Engaged Living Scale (Trompetter et al., 2013), and Acceptance and Action Questionnaire-II (Bond et al., 2011). We examined the psychometric properties of these measures with a large sample of racially and ethnically diverse emerging adults in Hawaiʻi (N = 1104) using cross validation. Preliminary findings revealed a replication of the extant five-factor model of the FFMQ (Baer et al., 2006). Factor structures of the AAQ-II and ELS diverged slightly from previous literature (e.g., Bond et al., 2011, Trompetter et al., 2013), but remained consistent with the underlying contextual CBT model (Hayes et al., 2011). The present study also provided preliminary evidence of reliability and convergent and divergent validity of the measures. Implications of these findings are discussed in the context of cross-cultural generalizability.

* A Psychometric Comparison of Psychological Inflexibility Measures: Discriminant Validity and Item Performance

Clarissa W. Ong, Utah State University

Benjamin G. Pierce, Utah State University

Julie M. Petersen, Utah State University

Jennifer L. Barney, Utah State University

Jeremiah E. Fruge, Utah State University

Michael E. Levin, Utah State University

Michael P. Twohig, Utah State University

Psychological inflexibility is a rigid behavioral pattern that interferes with engagement in personally meaningful activities; it is the hypothesized root of suffering in acceptance and commitment therapy (ACT). Thus, the quality of its measurement affects the research, theory, and practice of ACT. The current study aimed to evaluate the discriminant validity and item performance of four measures of psychological inflexibility: the Acceptance and Action Questionnaire—II (AAQ-II), a revised version of the AAQ-II (AAQ-3), the Brief Experiential Avoidance Questionnaire (BEAQ), and the Comprehensive assessment of Acceptance and Commitment Therapy processes (CompACT). We analyzed data from community (n = 253), student (n = 261), and treatment-seeking samples (n = 140) using exploratory factor analysis and multigroup graded-response models. The CompACT had the strongest discriminant validity followed by the AAQ-3, whereas items in the CompACT Behavioral Awareness and Valued Action subscales performed most consistently across groups. No single measure emerged as clearly superior to others; rather, appropriate selection of measures depends on the goals and context of assessment. We discuss the scientific and clinical implications of these findings.

Educational Objectives:

1. Compare diverse measures of psychological flexibility and related CBS constructs based on critical evaluation of the psychometric properties of those measures.

2. Describe the significance and clinical applications of recent research exploring the cross-cultural validation of measures of psychological flexibility.

3. Demonstrate knowledge of the development and clinical utility of innovative and diverse measures of psychological flexibility.

**54. Context Matters: Actionable Behavioral Conceptualizations of Matters of Social Significance**

Symposium - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Functional contextual approaches in related disciplines, Social issues

*Target Audience: Intermediate*

Chair: Heather Volchko, M.Ed., BCBA, Old Dominion University and Louisiana Contextual Science Research Group

Discussant: Karen Kellum, Ph.D., BCBA-D, University of Mississippi

MaKensey Sanders, M.A., University of Louisiana at Lafayette

Janani Vaidya, M.S., BCBA, Louisiana Contextual Science Research Group

Eva Lieberman, M.S., Louisiana Contextual Science Research Group

Contextual behavioral science is, in keeping with behavior analytic roots, committed to doing science that informs change on matters of social significance (see Baer et al., 1968; Hayes et al., 2012). Conceptual work that involves the identification of manipulable contexts is a necessary aspect of sound and actionable scientific strategy. This symposium will offer nested behavioral conceptualizations of increasingly specific phenomena of social significance. The first paper analyzes privilege as a manipulable aspect of context which sets the foundation for innovative intervention and larger-scale behavior change. The second paper explores gender identities as a response class, including gender identification and gender-relevant responding, where cultural humility in negating a savior complex is implied. Last, disproportionate effects of criminalizing the commodities of sex and bodies in the sex work industry are analyzed regarding misconceptions leading to negative stigmas. The ultimate goal of this symposium is to contribute to a discussion of larger societal issues from a behavior analytic framework.

* Beyond Checking: A Behavioral Conceptualization of Privilege

MaKensey Sanders, M.A., University of Louisiana at Lafayette

Emily K. Sandoz, Ph.D., University of Louisiana at Lafayette

Louisiana Contextual Science Research Group, University of Louisiana at Lafayette

The concept of privilege has become increasingly controversial recently as police brutality against the Black community has received more attention. However, despite its long history, the concept of privilege has not been subjected to a behavioral analysis focusing on the contextual conditions involved therein. This paper will discuss such an analysis, focusing on privilege as a manipulable aspect of context and its relationship to behavioral repertoires of both the privileged and the underprivileged. This analysis will focus on how divergent proportions of appetitive to aversive stimulation in the learning environment impact the sensitivity of the repertoire to appetitive and aversive learning opportunities. Traditional conceptualizations of privilege and what a behavioral conceptualization adds, why it is pertinent today, the implications of a behavioral conceptualization and specific recommendations for self-evaluation for those committed to equity will also be discussed. This paper is intended to contribute to a discussion of larger societal issues from a behavior analytic framework, with the ultimate goal of the innovative intervention strategies supporting larger-scale behavior change.

* Dismantling Binaries: A Culturally Humble Behavioral Conceptualization of Gender

Janani Vaidya, Louisiana Contextual Science Research Group

Eva Lieberman, Louisiana Contextual Science Research Group

Emily K. Sandoz, Louisiana Contextual Science Research Group

Gender is typically conceptualized to include covert behaviors of self-identity (e.g., cisgender, transgender, agender, nonbinary, genderqueer, queer, questioning, hijra, two-spirit) and phylogenic selection of reproductive and sexual biology (cisgender, intersex; Chiang & Arondekar, 2019). This paper will provide a behavioral conceptualization of gender as a response class, that is - in terms of the contexts that select for gender identification and gender-relevant responding. This conceptualization will extend into discussion of inequities among gender identities at individual, group, and cultural levels. The discussion will highlight how even in supposedly gender-affirming spaces, there is often an erasure of Indigenous and non-Western conceptualizations of gender (Picq, 2020; Pyle, 2019). How this erasure influences the distinction between the value of anti-oppression and anti-oppressive behaviors will be demonstrated (Pritchett et al., 2020). Implications of setting aside one’s savior complex (Gingles & Preudhomme, 2020) and approaching gender and marginalized identity groups with cultural humility (Wright, 2019) will be discussed.

Chiang, H., & Arondekar, A. (Eds.). (2019). Global encyclopedia of lesbian, gay, bisexual, transgender, and queer (lgbtq) history. Farmington Hills, Mich.: Charles Scribner's Sons.

Picq, M. L. (2020). Decolonizing Indigenous Sexualities. In The Oxford Handbook of Global LGBT and Sexual Diversity Politics.

Pyle, K. (2019). “Women and 2spirits”: On the Marginalization of Transgender Indigenous People in Activist Rhetoric. American Indian Culture and Research Journal, 43(3), 85-94.

Wright, P. I. (2019). Cultural humility in the practice of applied behavior analysis. Behavior Analysis in Practice, 12(4), 805-809.

* Bodies in Context: Contingencies Involved in the Legalization and Prohibition of Sex Work

Eva Lieberman, University of Louisiana at Lafayette

Janani Vaidya, University of Louisiana at Lafayette

Emily K. Sandoz, University of Louisiana at Lafayette

In the United States, sex work is surrounded by stigma and misconception. The criminality of the majority of jobs in the sex industry leads to a number of tragedies that are exacerbated by intersecting marginalized identities (e.g., people of color, transgender women, people in poverty). Meanwhile, countries throughout the world are decriminalizing sex work, allowing sex workers autonomy, safer working conditions, and protection under the law (Lutnick & Cohan, 2009; Outshoorn, 2012; Seib et al. 2010). This paper will discuss the tragedies and negative effects of criminalized sex work, and conceptualize from a behavioral perspective: 1. How legality contributes to crime that disproportionately affects people who work in the sex industry; 2. Perspective-taking on sex and bodies as commodities; 3. How we can work toward changing the negative stigma around sex work, improve working conditions, and decrease violence for sex workers.

Lutnick, A. & Cohan, D. (2009). Criminalization, legalization or decriminalization of sex work: what female sex workers say in San Francisco, USA, Reproductive Health Matters, 17:34, 38-46, DOI: 10.1016/S0968-8080(09)34469-9

Outshoorn, J. (2012). Policy Change in Prostitution in the Netherlands: from Legalization to Strict Control. Sex Res Soc Policy, 9 pp 233-243.

Seib, Charrlotte, Dunne, Michael P., Fischer, Jane, & Najman, Jackob M. (2010). Commercial sexual practices before and after legalization in Australia. Archives of Sexual Behavior, 39(4), pp. 979-989.

Educational Objectives:

1. Describe recommendations to address and self-evaluate context and experienced privileges.

2. Identify methods to perspective shift to a lens of cultural humility within one’s own repertoire.

3. Describe the consequences of criminalized sex work, and the benefits to decriminalization while conceptualizing differences in manual labor and the implications of treating sex work differently than other forms.

**55. Upping our game: Research methods for contextual behavioral science**

Panel - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Conceptual analysis*

Categories: Research methods, Theoretical and philosophical foundations, Research methods

*Target Audience: Intermediate, Advanced*

Chair: Rhonda Merwin, Ph.D., Duke University Medical Center

Joseph Ciarrochi, Ph.D., Australian Catholic University

Andrew Gloster, Ph.D., University of Basel

Scott Compton, Ph.D., Duke University, Psychiatry and Behavioral Sciences

Dominika Kwasnicka, M.A., M.Sc., Ph.D., University of Melbourne

Roger Vilardaga, Ph.D., Duke University

Henry Whitfield, M.Sc., Peer-reviewed ACT trainer, Regents University London

Research methods that dominate clinical intervention development are often not well-matched to the theoretical underpinnings and goals of CBS. RCTs in particular, could have much greater yield, rather than inferring about the individual from the average of a group of individuals. This panel will discuss research methods that may be better suited for CBS research, but less familiar to researchers or less commonly employed. Panelists will discuss ecological momentary assessment for high-density longitudinal measurement, single case designs paired with digital technologies (sensors etc.), adaptive trial designs (e.g., SMART designs), user-centered design methodology and advanced statistical approaches that allow greater exploration of dynamic relationships among variables. They will provide rich discussion of what these methods yield, how they have employed these strategies in their own work, and challenges and opportunities in their use. Attendees are invited to bring specific questions about employing these methods in their own research.

Educational Objectives:

1. Describe research methods that are well-matched to the strategies and goals of CBS.

2. Outline the benefits and yield of various methodologies or approaches, and how they may be effectively employed.

3. Describe how technology may be uniquely leveraged in CBS research.

**56. Clinicians’ Perspectives on Clinical Behavior Analysis: Concepts & Clinical Implications: Clinical Behavior Analysis SIG Sponsored**

Panel - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Conceptual analysis*

Categories: Clinical Interventions and Interests, Theoretical and philosophical foundations, Clinical Behavior Analysis (CBA)

*Target Audience: Intermediate, Advanced*

Chair: Abbey Warren, B.S., University of Louisiana at Lafayette

Michael May, M.A., LPCC, Compassionate Psychological Care, LLP

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Andrew Carr, Ph.D., VA Sierra Nevada Health Care System

Luisa Canon, Psy.D., BCBA-D, ACT to Thrive

Evelyn Gould, Ph.D. BCBA-D, LABA, Harvard Medical School

Clinical Behavior Analysis (CBA) could be understood as both an umbrella-term, subsuming a variety of different behavior-change approaches including Acceptance & Commitment Therapy (ACT), Behavioral Activation (BA), and Functional Analytic Psychotherapy (FAP), as well as a standalone framework for psychotherapy. Although the term is growing in interest, no clear definition or framework exists for CBA in the academy or the consulting room. This panel aims to examine the following, and other, questions from the perspective of the clinician – as opposed to the academic or researcher only. How do clinicians bridge the gaps between complex theory (even metatheory), scientific principles, and their work - on the ground - in the consulting room? This panel is composed of individuals who are regularly providing clinical behavior analytic treatment to their clientele. Panelists will discuss the varying conceptualizations of CBA as well as what they see as the implications for clinical practice.

Educational Objectives:

1. Describe clinical behavior analysis and clinical behavior analytic approaches.

2. Explain an example of CBA case conceptualization within clinical practice.

3. List ways to improve literacy and adoption of CBA into more clinical settings.

**57. Awareness Courage and Love Accessing Self Forgiveness To Rewrite Your Pandemic Story**

Workshop - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, Self-Forgiveness, Self-Compassion, Self-care

*Target Audience: Beginner, Intermediate*

Grant Dewar, Ph.D., University of Adelaide

Stavroula Sanida, M.Sc., Private Practice

Holly Yates, M.S., LCMHC, Certified FAP Trainer, Private Practice

This workshop will show you how to access the contextual science of Self-forgiveness to improve psychological and social wellbeing. Techniques will enable participants to discover sources of compassion courage and flexibility within their experience of life setbacks. The scientific advancements currently underway across Contextual Behavioural Science reveals that language creates suffering and struggle: remorse, and regret, self-blame, guilt, shame, self-hatred and self-disgust. These processes may be instantaneous and highly automated. This workshop will demonstrate behavioural responses that are proven to work – in promoting mental health and self-care. We demonstrate a novel approach to self-forgiveness focused on intrapersonal transgressions against the self in the context of unworkable responses to life events.

The therapeutic approach describes seven principles and their interweaving with CBS therapeutic responses: including innovations in perspective-taking, the lessons of "improv" and through the effective restructuring of story. These processes promote flexibility through granting self-forgiveness; putting values into action; an ongoing commitment to flexible response to life challenges. Participants will be provided with a principles-based framework for promoting self-forgiveness to enhance flexible living.

Educational Objectives:

1. Demonstrate an understanding of self-forgiveness by ‘identification of the burden’ and ‘taking a transcendent perspective’, using expressive and evocative writing techniques, perspective taking, expansion, as approaches to self-forgiveness.

2. Explain and demonstrate ‘granting self-forgiveness’ to overcome destructive self-criticism.

3. Assess how ACT, FAP, CFT, DBT and other third-wave contextual therapies respond to issues of self-forgiveness and appropriately apply CBS experiential techniques that promote behavioural changes supporting Self-Forgiveness.

**58. ACT made simpler, easier and effective: six steps to psychological flexibility with the ACT Matrix**

Workshop - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Professional Development, ACT Matrix

*Target Audience: Beginner, Intermediate*

Benjamin Schoendorff, M.Sc., Contextual Psychology Institute

The six steps approach to the ACT Matrix form the core of The Essential Guide to the ACT Matrix. Clinical effectiveness data collected at our Montreal Center suggest the six step is a rapid and effective way to significant clinical improvement.In this workshop, participants will explore the six steps from the perspective of their personal experience and practice two key exercises through real play. In a first part, participants will explore their personal matrix, the effectiveness of their “away moves” and how human functioning can get people stuck in unworkable control attempts. Participants will practice delusion using the powerful Hooks Worksheet. In a second part, participants will practice with the Verbal Aikido worksheet which activates all ACT processes to train increased psychological flexibility in difficult life situations. Next participants will explore the “Kittens,” a powerful self-compassion exercise. Finally, participants will practice with the Texting worksheet, a simple and effective perspective-taking exercise that helps cue valued action.

Educational Objectives:

1. Describe the ACT Matrix and utilize the Stuck loops exercise to work with creative helplessness.

2. Utilize the Hooks worksheets for defusion, the Verbal Aikido worksheet for psychological flexibility and Texting my future self worksheet for perspective-taking.

3. Implement the Kittens exercise to train self-compassion.

**59. Identificando patrones de flexibilidad e inflexibilidad psicológica en niños**

***Identifying patterns of flexibility and psychological inflexibility in children***

Workshop - Friday, 25 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Didactic presentation, Role play*

Categories: Clinical Interventions and Interests, Relational Frame Theory, Infantil

*Target Audience: Beginner, Intermediate*

Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Daniela M Salazar, Ph.D., Light House Arabia

Aplicar ACT en niños puede ser complicado debido a que éstos cuentan con un repertorio relacional menos complejo que el de adolescentes y adultos. Particularmente difícil puede ser identificar patrones de flexibilidad e inflexibilidad psicológica en niños. Adicionalmente, algunos niños pueden encontrar complicadas de responder las preguntas tradicionales para realizar un análisis funcional. Teniendo lo anterior en cuenta, este taller tiene como objetivo mostrar estrategias indirectas de promover la diferenciación entre flexibilidad e inflexibilidad psicológica. En primer lugar, se presentarán las definiciones de flexibilidad e inflexibilidad psicológica expuestas por Törneke, Luciano, Barnes-Holmes y Bond (2016). En segundo lugar, se mostrarán algunos recursos y estrategias que hemos utilizado en estudios clínicos para realizar el análisis funcional en niños a través de juegos de discriminación de comportamiento flexible e inflexible. Finalmente, los asistentes diseñarán ejercicios adicionales para promover la discriminación de estos repertorios.

*Applying ACT to children can be complicated because they have a less complex relational repertoire than adolescents and adults. It can be particularly difficult to identify patterns of flexibility and psychological inflexibility in children. Additionally, some children may find it difficult to answer traditional questions to perform a functional analysis. Taking the above into account, this workshop aims to show indirect strategies to promote the differentiation between flexibility and psychological inflexibility. First, the definitions of flexibility and psychological inflexibility presented by Törneke, Luciano, Barnes-Holmes and Bond (2016) will be presented. Second, some resources and strategies that we have used in clinical studies to perform functional analysis in children through flexible and inflexible behavior discrimination games will be shown. Finally, attendees will design additional exercises to promote discrimination of these repertoires.*

Educational Objectives:

1. Describir las implicaciones prácticas de la definición de flexibilidad psicológica en términos de la RFT.

2. Diseñar ejercicios y ejemplos dirigidos a promover la diferenciación entre flexibilidad e inflexibilidad psicológica.

3. Usar los anteriores ejercicios para llevar a cabo el análisis funcional en niños.

**60. ACT at the Intersection of Art and Science: the Aesthetics of Doing and Teaching Psychotherapy**

Invited Workshop - Friday, 25 June (2:15 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, The art of psychotherapy

*Target Audience: Beginner, Intermediate, Advanced*

Kelly Wilson, Ph.D., University of Mississippi

I could not give a line-by-line description of how to create a song or painting, but I could provide a context where that art might begin to flow. Some contexts promote creativity. Some stifle it.

Clients come wanting to break free of the bondage of unremitting sadness, anxiety, and hopelessness. They bring lives that seem broken. But what if those lives, as the poet, Amanda Gorman has put it, are not "broken, but simply unfinished.” We must create in the midst of hardship because life delivers it to us, each and every one.

But how do we create contexts that foster creative living? Taking lessons from art and literature, participants will learn through artistic, poetic, and therapeutic examples, the ways in which negative space, rhythm, repetition, continuation, and enjambment can alter an ACT inquiry. We will explore the space where ACT and art meet and a behavioral analysis of why principles of design can have such an impact on behavior. Special attention will be paid to what Salvador Dali called “the plasticity of negative space.”

Educational Objectives:

1. Explain why insisting on a specific clear objective in advance of working can be an obstacle to creative psychotherapeutic work.

2. Describe how to create negative space in an ACT intervention in order to increase the impact of the intervention.

3. Explain, in behavioral terms, why artistic design elements have an impact on ACT processes.

**61. From Rats to Walden II Revisited: Research Reflections on Contemporary Issues in Contextual Behavior Science**

Symposium - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Literature review*

Categories: Theoretical and philosophical foundations, Functional contextual approaches in related disciplines, Idiographic Analysis

*Target Audience: Intermediate, Advanced*

Steven Hayes, Ph.D., University of Nevada, Reno

Discussant: Maria Karekla, Ph.D., University of Cyprus

Neal Falletta-Cowden, M.A., BCBA, University of Nevada, Reno

Stuart Law, BCBA, University of Nevada, Reno

Fredrick Chin, M.S., University of Nevada Reno

In these papers we will link contemporary research issues in basic and applied CBS research to a small set of key issues: the nature of functional contextual concepts; how to build concepts and models with treatment utility; the problematic impact of psychometrics and group comparison designs; the need for idiographic functional analysis; how to address biophysiological and social cultural levels of analysis; processes of change; and how to nest CBS under the umbrella of evolutionary science.

All of the papers are deliberately drawn from a single laboratory at the University of Nevada that has been of historical importance to CBS and that combines clinical psychology and behavior analysis students into a single research team. We argue that contextual behavioral assumptions provide unique and progressive approaches for a range of contemporary issue, and that the CBS journey is just beginning.

* The Profound Implications of CBS for Concepts, Measures, Models, and Methodologies

Steven Hayes, Ph.D., University of Nevada, Reno

The earliest days of what would become Contextual Behavioral Science included work not just on what would soon become ACT and RFT,

it also included philosophical and methodological work on the role of treatment utility in psychometrics, the need for contextually bound concepts that could address the impact of one behavior on another, and work on how effective theoretical models could be constructed. In this paper we argue that current developments in clinical psychology, applied behavior analysis, psychopathology, cultural change, and evolutionary science underline how important these early issues are for the contemporary growth and impact of CBS. We argue in particular that psychometric analysis is invalid as a way of vetting concepts linked to processes of change, and that concepts with treatment utility

require a new meta-theoretical approach that is idionomographic, contextually bound, and vetted by experimental analysis.

An expanded version of the psychological flexibility model seen as a form of extended evolutionary thinking provides a proof of concept for this approach.

* From Fiction to Reality: Developing a Foundational Theory Capable of Addressing Cultural Concerns

Neal Falletta-Cowden, M.A., BCBA, University of Nevada, Reno

Behavioral scientists and practitioners following in the functional contextual and Skinnerian tradition have long held the lofty goal of understanding not only individual human behavior, but cultural practices and societal issues. The search for understanding and, eventually, influence of larger-scale human enterprises has at times led to the development of new units of analysis, new definitions of “cultural behavior,” and new applied intervention methodologies. A key issue that has hindered these efforts is the lack of an adequate understanding of the foundations of verbal behavior. We argue that Relational Frame Theory (RFT) can be used to build the conceptual bridge that will allow us to cross into such areas of study. This talk will cover the pitfalls that have ensnared behavior analysts as they seek an understanding of human culture and groups, and how Relational Frame Theory and Contextual Behavior Science can put us on more solid footing as we approach these topics.

* The history and potential future of Behavior Science and idiographic approaches to measurement, research, and practice

Stuart Law, M.A., BCBA, University of Nevada, Reno

Idiographic assessment, treatment, and research has been a part of the behavioral tradition since its inception. Individual-focused data analysis has been the lifeblood of behavior analytic technology, research and applied practices such as Early Intensive Behavioral Intervention (EIBI) and functional analysis (FA). With growing research in the area of language and cognition in applied behavioral practices—and the relatively recent emergence of idiographic statistical methods a viable means of augmenting visual inspection as a means of discovery and testing—careful thought and design must be given regarding the role of behavior in the modern scientific landscape.

* One person at a time: How idiographic, process-based analyses can improve populations

Fredrick Chin, M.S., University of Nevada, Reno

The field of clinical psychology has long sought to explore and identify change processes that bring about clinically relevant outcomes, and has largely pursued this goal through group-based, nomothetic designs. However, group-based analyses violate assumptions of ergodicity, suggesting that these findings may be valid for individuals that comprise the group. The present discussion will highlight the problems with utilizing nomothetic data to infer individual outcomes, and will further explore both traditional and modern methods (i.e., mediational analyses, innovative statistical algorithms) that can address this discrepancy. Finally, preliminary data on functionally meaningful processes that may be drivers of change across interventions will be provided.

Educational Objectives:

1. Explain the implications of ergodic assumptions and idiographic analysis.

2. Explain the importance of idiographic analysis with regard to the histories and potential futures of both ABA and clinical psychology writ large.

3. Identify some key features of traditional and modern methods of discovery, research and practice with regard to different levels of analysis.

**62. 100RCTs: Reviewing Up-to-Date Research on ACT**

Symposium - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Didactic presentation, Literature review*

Categories: Clinical Interventions and Interests, Professional Development, ACT, RCT, Clinically-relevant concerns

*Target Audience: Beginner, Intermediate*

DJ Moran, Ph.D., Pickslyde Consulting

Abigail Rotter, B.A., LIU-Post

Amneet Kaur, B.A. Psychology; B.S. Business Management, LIU-Post

Jesse Basson, M.S., LIU Post

Samantha Brooks, Long Island University

Michelle Fioravante, M.A., M.S., B.A, Long Island University Post

Ali Levine, M.A., LIU-Post

If consider yourself an ACT therapist, you are an applied behavioral scientist. The question is, as a scientist, how familiar are you with the scientific literature on ACT? This 90 minute workshop will inform you of the solid facts from the latest 100 randomized controlled trials about Acceptance and Commitment Therapy. Each article will be succinctly summarized, and presented in a digest format so that you can absorb the latest findings, and understand what questions are being answered by CBS professionals. ACT is known as an evidence-based practice, and this event will present you with the latest results from empirical articles. As an applied behavior scientist, you will benefit from being “in the know,” and this workshop will update your knowledge about the breadth of ACTs effectiveness.

Educational Objectives:

1. Describe the state of the science with respect to ACT interventions.

2. Critique the latest research as it relates to randomized controlled trials for ACT.

3. Describe the latest research on trauma, depression, chronic pain, and anxiety disorders.

**63. The Latest Advancements in RFT and Future Directions**

Panel - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Literature review*

Categories: Relational Frame Theory, Research

*Target Audience: Intermediate, Advanced*

Chair: Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Louise McHugh, Ph.D., University College Dublin

Nigel Vahey, Ph.D., Technological University Dublin

Carmen Luciano, Ph.D., University Almeria, Spain

Jordan Belisle, Ph.D., Missouri State University

Julio de Rose, Ph.D., Universidade Federal de São Carlos

RFT is a CBS account of human language and cognition. In line with the functional contextual philosophy underlying CBS, it explains the development of language and cognition in terms of evolving behavior-environment relations. In explaining human language and cognition in terms of its ontogenetic origins (i.e., within the lifetime of the individual as opposed to the history of the species), it builds upon more basic learning processes of operant and respondent conditioning. The current panel will look at recent advances and future directions for RFT research. The discussion will focus on examining recent research and theoretical developments such as Relational Density Theory, HDML, the issue of effective measurement, idiographic analyses, dynamic network-based research, the need for an emphasis on observable behavioral and biophysiological change (as distinct from global self-report measures) and how RFT research can develop understanding in therapy, education, social justice, prosocial behaviour and other areas of interest to the human condition.

Educational Objectives:

1. Describe the latest advancements in RFT research.

2. Identify the needs for future research in RFT.

3. Discuss the application of RFT research to social issues.

**64. A CBS perspective on the dialogue between Buddhist traditions and empirically-supported systems of behavior change.**

Panel - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, Buddhism, Contemplative Practice

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Michael May, M.A., LPCC, Compassionate Psychological Care, LLP

Troy DuFrene, M.A., SSC, SF Center for Compassion-Focused Therapies

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Louise Hayes, Ph.D., Institute for Mindful Action

Dennis Tirch, Ph.D., The Center for CFT

As mindfulness-based approaches continue to gain traction within the empirically supported systems of behavior change, interest in Buddhism and Buddhist-derived contemplative practice has also increased. This dialogue has continued to evolve over the past decades and now include the voices of basic scientists, clinicians, secular-oriented practitioners, and even Buddhist monastics. As traditions with such apparent disparate philosophies continue to converse, the present panel aims to critically examine the ongoing evolution of this dialogue. How can contextual behavioral science contribute to this dialogue? What has been beneficial, thus far? Have there been problematic elements to this dialogue (ex. cultural appropriation or colonialism)? Panelists will offer advice to students, clinicians, and scientists who desire to carry this dialogue forward into the future with cultural humility and scientific rigor.

Educational Objectives:

1. Identify ways in which CBS perspective can contribute to the dialogue with Buddhist traditions/Buddhist-derived contemplative practices.

2. Describe how a CBS perspective can aid in addressing issues such as cultural appropriation.

3. Identify ways in which certain CBS approaches intersect with Buddhist traditions/Buddhist-derived contemplative practices.

**65. Psychedelics and Psychological Flexibility: A CBS Account of Processes of Change: Psychedelic and Non-Ordinary States of Consciousness SIG Sponsored**

Panel - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Didactic presentation*

Categories: Clinical Interventions and Interests, Psychedelics, Psychedelic-assisted therapy, processes of change, psychological flexibility

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Brian Pilecki, Ph.D., Portland Psychotherapy Clinic, Training, and Research Center

Discussant: Steven Albert, M.A., University of New South Wales

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center

Rosalind Watts, DClinPsy, Synthesis Institute

Anne Wagner, Ph.D., Remedy

As psychedelic-assisted therapy emerges as a new paradigm in mental health treatment, there is a need to increase understanding of the processes of change implicated in its therapeutic benefit. Psychological flexibility has been identified as one such process, creating a role for CBS and ACT to inform treatment development and research in this area. The psychological flexibility model is being used to guide psychedelic preparation and integration in clinical practice and in clinical trials investigating psychedelic assisted therapy, and this panel includes researchers and clinicians involved in both. This panel will discuss possible processes of change behind psychedelic assisted therapy, including the psychological flexibility model. Limitations of the psychological flexibility model in understanding possible processes of change in relation to psychedelic assisted therapy will also be discussed. Participants will learn about the current state of empirical evidence for psychedelic-assisted therapy and how ACT is influencing the development of treatment protocols in ongoing trials. Finally, future directions for the role of CBS in psychedelic medicine will be explored.

Educational Objectives:

1. Describe the current state of empirical support for psychedelic assisted therapy.

2. Identify strengths and limitations of using the psychedelic flexibility model with psychedelic assisted therapy.

3. Describe processes of change implicated in therapeutic benefit from psychedelic-assisted therapy.

**66. Supporting Caregivers of those with Memory Loss Through ACT ad DBT**

Panel - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *None of these*

Categories: Clinical Interventions and Interests, Aging in Context

*Target Audience: Beginner*

Chair: John Forsyth, Ph.D., University at Albany, SUNY

Discussant: Thom Neill, LCSW, University at Buffalo

Janice Keeman, LCSW, Single Step, LLC

Kary Strickland, LCSW, Terra Firma DBT

Jamie Forsyth, Ph.D., Freedom First Psychological Services

Watching someone decline physically and cognitively can be incredibly challenging. Caregivers bear witness to changes on multiple dimensions, including with cognition, personality and movement. Mindful attention to these changes involves grieving what is being lost, while acting to maximize functioning. In this panel we will examine the challenges that caregivers face through the lenses of ACT and DBT. Discussion will be anchored in values desired by caregivers; dignity, safety, and love. Through examination of creative hopelessness and distress tolerance, caregivers can acknowledge their own frustration and pain, while taking steps towards compassionate care. We will describe emotion regulation and diffusion techniques that can serve as a springboard for self-care, enabling the caregiver to develop resilience and interpersonal effectiveness through the progression of the condition. We will discuss the challenge caregivers face regarding balancing attention to the present moment, while also being mindful of how history and horizon impact them and their loved one.

Educational Objectives:

1. Describe challenges for caregivers as the progression of symptoms occurs.

2. List strategies to work effectively with caregivers to navigate these challenges.

3. Describe how the ACT and DBT models can be applied to caregivers in order to maximize values driven action and interpersonal effectiveness.

**67. Improving supervision using FAP-Based on Processes: Strengthening Supervisor-Supervisee relationship**

Workshop - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*

Categories: Supervision, Training and Dissemination, Performance-enhancing interventions, Therapeutic Alliance, FAP, Interpersonal therapy

*Target Audience: Intermediate, Advanced*

Amanda Muñoz-Martinez, Ph.D., Universidad de los Andes

Priscila Rolim de Moura, iMind Psicologia e Mindfulness

Katia Manduchi, Ph.D., Iescum, ACT Italia, Acbs, Cbt Italia, Ascco, Ascco, Humanitas

Supervision is the key context in which practitioners develop their clinical competencies. The APA and the European Association of Clinical Psychology and Psychological Treatment (EACLIPT) have delimited several fundamental competencies in clinical practice; for instance, relationships, professionalism, and cultural diversity. Functional Analytic Psychotherapy (FAP) proposes a contextual behavioral approach to enhance supervision relationships. FAP emphasizes developing a naturally reinforcing relational context in supervision to facilitate shaping and modeling supervisees' interpersonal skills. Such context will allow building meaningful and collaborative relationships with clients, stakeholders, and colleagues by supervisees. This workshop will walk participants through a process-based training model to maximize supervision’s relationship as a fruitful learning environment for enhancing supervisees' relationships and facilitating their learning process of other functional clinical competencies.

Educational Objectives:

1. Assess and apply behavioral processes embedded on FAP within the supervision relationship, from a functional approach, to enhance learning of clinical competences.

2. Implement FAP experiential exercises through role-plays and behavioral rehearsals to model and shape supervisions relationship.

3. Identify and plan effective strategies to modify supervisee´s interpersonal behaviors within supervision’s relationship that could lead to inadvertent problems therapeutic in relationships.

**68. ACT for Gastrointestinal Disorders in Youth: Neuroscience Metaphors, Functional Goals, and Measurable Outcomes: Children, Adolescents & Families SIG Sponsored**

Workshop - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review*

Categories: Behavioral medicine, Clinical Interventions and Interests, Children

*Target Audience: Beginner, Intermediate*

Amy Hale, Ph.D., Boston Children’s Hospital/Harvard Medical School

Bradley Jerson, Ph.D., Connecticut Children's Medical Center, University of Connecticut Health

Kari Baber, Ph.D., Hepatology & Nutrition Center for GI Motility

Gastrointestinal symptoms are common, with more than 20% of children and adolescents experiencing symptoms consistent with functional gastrointestinal disorder (FGID) diagnosis (e.g. irritable bowel syndrome, abdominal pain and nausea; Robin et al., 2018; Saps et al., 2018). FGIDs are disorders of the brain-gut axis and treatment guidelines for nearly all include CBT (Hyams et al., 2016; Reed-Knight et al., 2016). ACT’s focus on acceptance and behavioral change makes it particularly well-suited for treatment of FGIDs (Keefer & Mandal, 2015, Pielech, Vowles, & Wicksell, 2017), which are often characterized by chronic pain and digestive symptoms. In this workshop, a trio of pediatric psychologists integrated in Gastroenterology programs will provide an overview of ACT for GI symptoms. An introduction to FGID diagnoses and their psychological factors, metaphors for understanding the biopsychosocial model, GI-specific biobehavioral strategies, and cognitive defusion strategies for this population will be discussed and practiced. Case illustrations, role plays, and experiential exercises will be used throughout the workshop to practice effective communication and implementation of behavioral strategies to address functional impairments secondary to GI symptoms.

Educational Objectives:

1. Explain the etiology and maintenance of pain-predominant functional gastrointestinal disorders, constipation, and rumination syndrome/functional vomiting disorders.

2. Discuss metaphors that can be used to explain the biopsychosocial model and its treatment.

3. Describe application of at least one behavioral, cognitive defusion or acceptance-based intervention to address FGID symptoms or associated impairment.

**69. El dolor en la aceptación: Favorecer la apertura para incrementar la experiencia sentida del consultante**

***The pain in acceptance: resources for increasing the client’s experience in favor of openness***

Workshop - Friday, 25 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Aceptación, ejercicios experienciales

*Target Audience: Beginner, Intermediate*

Alvaro Paredes-Rivera, Psy.D., Centro Contexto / Universidad de Lima

Al entrenarse como terapeuta ACT uno recorre la importancia de desarrollar un repertorio de apertura en el consultante para experimentar aquellos eventos privados con los que siempre luchó y forman parte de su historia de intentos fallidos por alcanzar la vida que desean. En la literatura y en los entrenamientos para profesionales, mayormente este proceso se aprecia y experimenta como un espacio liberador, agradable y beneficioso en que uno rápidamente deriva funciones apetitivas frente a la “aceptación”, muchas veces ignorando lo que en la práctica clínica observamos con pacientes con historias extensas de variado e intenso malestar: abrirse es doloroso. Por si fuese poco, olvidamos que ACT es un abordaje experiencial, y que ese dolor aparecerá, se sentirá e intensificará, y que el proceso de hacer espacio a ello es un momento en que el terapeuta deberá modelar y moldear constantemente de una única forma: conectando también con el dolor en la sesión. El taller proporcionará algunas ideas para entrar a este camino sintiendo dolor y conexión con nuestro consultante.

*In ACT therapist’s training, there is some importance of developing a repertoire of openness in the client to experience private events that have been matter of fights and part of the unsuccessful attempts to build life they want. In literature and professional trainings, this process is viewed as a liberating, pleasant and beneficial place, where one can quickly derivate appetitive functions in relation to “acceptance”, ignoring what we can see in clinical practice with client who have passed to extensive and multiple stories of intense pain: being open is painful. If that were not enough, we forget about ACT as an experiential treatment, and that that pain will show up and intensify, and that the process of making space to this, is a moment where therapist must model and shape constantly in only one direction: connecting with the pain in the session. This workshop provides some ideas to enter in this path feeling pain and connection with our client.*

Educational Objectives:

1. Describir el proceso de aceptación desde la perspectiva del consultante.

2. Entrenar habilidades clínicas para intensificar la experiencia emocional asociada a la aceptación.

3. Favorecer el espacio para que la interacción clínica pueda sostener el proceso de aceptación y transformarlo en un contexto de cambio.

**70. The Challenge of Change in Couples: How Integrative Behavioral Couple Therapy brings about change and acceptance**

Invited Workshop - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Conceptual analysis*

Categories: Clinical Interventions and Interests, Other, Couples

*Target Audience: Intermediate*

Andrew Christensen, Ph.D., University of California, Los Angeles

Integrative Behavioral Couple Therapy (BCT) is an evidence-based intervention for couples. In this presentation, the co-developer of IBCT, Dr. Andrew Christensen, will present on IBCT strategies for bringing about change in the emotional tenor of relationships as well as change in specific problematic behaviors. He will show the link between individual approaches to change, which distinguish different stages and processes of change, and IBCT. He will also explain how the IBCT strategies of empathic joining and unified detachment can directly change the emotional tenor of the relationship and indirectly change specific behaviors. In addition, he will show how the IBCT strategies of Direct Change have a direct impact on specific behaviors but an indirect impact on the emotional tenor. Throughout, he will show how these IBCT strategies bring about emotional acceptance.

Educational Objectives:

1. Define what is meant by stages of change and processes of change.

2. Describe how empathic joining in IBCT directly affects the emotional tenor of a relationship and indirectly affects specific behavior change.

3. Describe how unified detachment in IBCT directly affects the emotional tenor of a relationship and indirectly affects specific behavior change.

**71. Understanding the role of contextual behavioral science in obesity and obesity treatments**

Symposium - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Original data*

Categories: Behavioral medicine, Clinical Interventions and Interests, Obesity

*Target Audience: Beginner*

Chair: Kristy Dalrymple, Ph.D., Lifespan Physician's Group, Alpert Medical School of Brown University

Discussant: Jud Brewer, M.D., Ph.D., Alpert Medical School of Brown University

Tosca Braun, Ph.D., The Miriam Hospital/Alpert Brown Medical School

Christine Call, M.S., Drexel University & University of Pittsburgh

Margaret Sala, Ph.D., Drexel University

Jason Lillis, Ph.D., Alpert Brown Medical School; California Northstate University

Several weight loss and maintenance treatments exist to treat obesity, such as CBS-consistent interventions (ACT, mindful eating, intuitive eating) and bariatric surgery. While these interventions generally have demonstrated short-term efficacy, outcomes vary and less is known about factors that may promote better long-term outcomes. To improve our ability to help patients achieve sustainable outcomes, further examination of modifiable treatment targets is required. This symposium presents findings from 5 studies that examined CBS-consistent factors that may serve as mediators or moderators related to obesity and its treatment. These studies include examination of mindfulness facets as mediators of the relationship between emotional eating and depression in bariatric surgery candidates, mindfulness as a link between weight bias, craving, and grazing in bariatric surgery candidates, potential mediators of an ACT for weight loss intervention, real-time fluctuations in CBS-related processes in patients seeking weight loss treatment, and grit as a moderator of outcomes in an acceptance-based treatment for physical activity and weight loss maintenance. Implications for future research will be discussed.

* Judgment towards emotions as a mediator of the relationship between emotional eating and depression symptoms in bariatric surgery candidates

Kristy Dalrymple, Ph.D., Lifespan Physician's Group and Alpert Medical School of Brown University

Viliyana Maleva, Ph.D., Private Practice

Iwona Chelminski, Ph.D., Lifespan Physician's Group and Alpert Medical School of Brown University

Mark Zimmerman, M.D., Lifespan Physician's Group and Alpert Medical School of Brown University

Emotional eating is prevalent in bariatric surgery candidates and is significantly associated with poorer weight loss outcomes. Emotional eating is particularly common in surgery candidates reporting depression symptoms, and this relationship has been documented across cultures. Mindfulness has been shown to be a mediator between emotional eating and depression in a general population sample, but none have been specific to bariatric surgery populations. The current study examined the potential mediating effects of mindfulness on the relationship between emotional eating and depression symptoms in bariatric surgery candidates (n=745). Participants completed a psychiatric presurgical evaluation that included a semi-structured diagnostic interview and self-report questionnaires. Mediation effects were examined using the Hayes PROCESS macro 3.5 for SPSS. Out of the 5 mindfulness facets examined, only nonjudgment significantly mediated the relationship between depression symptoms and emotional eating. Results suggest that fostering nonjudgment towards emotional experiences may be important to address to reduce emotional eating in bariatric surgery candidates experiencing symptoms of depression, although further research in longitudinal samples is required.

* Real-time fluctuations in mindful awareness, willingness, and values clarity, and their associations with craving and dietary lapse among those seeking weight loss

Margaret Sala, Ph.D., Center for Weight, Eating, and Lifestyle Science (WELL Center), Drexel University

Corey Roos, Ph.D., Yale University School of Medicine

Rebecca Crochiere, WELL Center, Drexel University

Meghan Butryn, Ph.D., WELL Center, Drexel University

Adrienne Juarascio, Ph.D., Center, Drexel University

Stephanie Manasse, Ph.D., WELL Center, Drexel University

Evan Forman, Ph.D., WELL Center, Drexel University

Mindful awareness, willingness, and values clarity have been examined as protective factors across a wide range of problems, including overweight/obesity. However, these variables have almost exclusively been examined at the trait-level. It is possible that these variables also fluctuate within individuals in daily life, and that these intraindividual fluctuations may in turn be related to key drivers of weight change among weight-loss seeking individuals with overweight/obesity. The current study used ecological momentary assessment (EMA) to examine the extent to which momentary mindful awareness, willingness, and values clarity varied within-person, and were associated with craving and likelihood of dietary lapse. We also examined the extent to which craving was associated with dietary lapse. Adults with overweight/obesity ( N = 126 ) completed one week of EMA prior to enrolling in a randomized controlled trial of behavioral weight loss treatments. They responded to EMA questions assessing dietary lapses, craving, mindful awareness, willingness, and values clarity six-times per day. We found that mindful awareness, willingness, and values clarity demonstrated substantial within-person variability, and higher within-person mindful awareness, willingness, and values clarity were concurrently associated with lower craving and lower likelihood of dietary lapse. Higher craving was concurrently associated with higher likelihood of dietary lapse. Overall, momentary mindful awareness, willingness, and values clarity vary substantially at the daily level, and may be important mechanisms to target to reduce craving and dietary lapses in the daily lives of individuals with obesity and overweight.

* Grit as a Moderator of Long-Term Weight Loss in a Randomized Controlled Trial of an Acceptance-Based Behavioral Treatment for Obesity

Christine Call, M.S., WELL Center, Drexel University

Laura D'Adamo, WELL Center, Drexel University

Nicole T. Crane, WELL Center, Drexel University

Meghan Butryn, Ph.D., WELL Center, Drexel University er

A majority of adults with overweight/obesity regain weight after a weight loss (WL). Grit, the tendency to persevere in long-term goal pursuit, could theoretically help individuals sustain the behavioral changes needed for long-term weight loss. It is not yet known if grit predicts treatment success, or if different forms of behavioral treatment (BT) are better suited to those with low vs. high grit. This study examined if grit or its interaction with intervention condition predicted WL in adults with overweight/obesity (N&#3f320) enrolled in a RCT comparing three conditions: standard BT, BT emphasizing physical activity (BT+PA), and acceptance-based BT+PA (ABT+PA). There was no main effect of grit on WL. The interaction of Grit\*Condition was significant at 12- and 24-months (p’s<.05). Participants in ABT+PA with low (vs. high) grit had greater percent WL (e.g., 24-months: 10.5&#37; vs. 3.1&#37;), but grit did not predict WL in BT or BT+PA. ABT+PA, which helps participants commit to values-based behaviors, might be particularly effective for those with low grit, compared to participants with high grit who may already possess ABT-consistent skills.

* Process of change data in two randomized trials testing ACT for long-term weight loss

Jason Lillis, Ph.D., Alpert Brown Medical School, The Miriam Hospital, California Northstate University

This talk will present data from two randomized trials testing ACT for long-term weight loss. In the first, standard behavioral treatment (SBT) was compared to SBT + ACT for individuals with overweight or obesity who reported high levels of disinhibited eating (N&#3f162). Results showed that the ACT group had greater changes in values-consistent behavior, however there were no differences between groups on change in weight-related experiential avoidance. The second study compared an ACT-based weight loss maintenance program to an SBT program and a no-treatment Control group for individuals with overweight or obesity who recently completed a 3-month online weight loss program. Although process of change differences were evident comparing ACT to Control, no differences were observed between ACT and SBT with respect to values-consistent behavior and experiential avoidance. Implications of these findings will be discussed, including the need for more sensitive measurement in this area, issues of treatment potency, and the possibility that standard weight loss may genuinely move ACT processes.

* Low Mindfulness Implicated in the Links between Weight Bias, Craving, and Grazing among Individuals Seeking Bariatric Surgery

Tosca D. Braun, Ph.D., The Miriam Hospital and Alpert Medical School of Brown University

Rebecca M. Puhl, Ph.D., University of Connecticut Rudd Center for Food Policy & Obesity

Diane M. Quinn, Ph.D., University of Connecticut

Amy A. Gorin, Ph.D., University of Connecticut

Ana M. Abrantes, Ph.D., Butler Hospital and the Alpert Medical School of Brown University

Introduction: Among bariatric surgery patients, grazing (a repetitive eating behavior) is associated with post-operative weight regain and with stress, which contributes to the food craving-intake relationship. A common stress reported by individuals seeking bariatric surgery (ISBS) is the anticipation, experience, and internalization of weight bias (WB). WB may deplete attentional resources (e.g., mindfulness) and thereby increase craving and grazing, the focus of this cross-sectional study.

Method: Patients (N&#3f209, 82.8&#37; women, 64.1&#37; White, M. BMI 47.6+8.8) completed self-report surveys linked with patient medical record data. Regression analyses examined associations between constructs, and, using SPSS PROCESS, the mediation model: Experienced-WB->Anticipated-WB->Internalized-WB->Low Mindfulness->Food Craving->Grazing, covarying demographics, adverse childhood experiences, and distress.

Results: All modeled constructs accounted for unique variance in grazing (R2=.28, p<.001). Experienced-WB was linked with grazing through pathways implicating Anticipated-WB, Internalized-WB, low mindfulness, and food craving (p<.001).

Conclusion: Among ISBS, anticipated- and internalized-WB, low mindfulness, and food craving indirectly account for the experienced-WB and grazing link. Alongside structural/interpersonal WB reduction efforts, mindfulness training may partially combat the effects of weight bias on food craving and grazing.

Educational Objectives:

1. Describe CBS-consistent factors that may mediate the relationship between emotional eating and emotional problems in individuals experiencing obesity.

2. Explain CBS-consistent factors that may mediate or moderate outcomes in weight loss interventions

3. Discuss ways to improve measurement of these variables in future research.

**72. Leveraging ACT and Values to Increase Treatment Adherence in Diverse Healthcare Contexts**

Symposium - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Original data*

Categories: Behavioral medicine, Clinical Interventions and Interests, Treatment Adherence

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Joanna Arch, Ph.D., University of Colorado Boulder

Discussant: Kirk Strosahl, Ph.D., HeartMatters Consulting LLC

Lilian Dindo, Ph.D., Baylor College of Medicine

Brandon Gaudiano, Ph.D., Brown University

Elizabeth Slivjak, M.A., University of Colorado Boulder

Medical and mental healthcare advances benefit people only to the extent that they adhere to treatment. This symposium showcases the innovative ways in which contextual behavioral science is being leveraged to promote treatment adherence across diverse medical populations. Dr. Gaudiano will share the rationale, pilot data, and large-trial methodology for a novel values-based intervention to improve treatment adherence and functioning for adults with co-occurring bipolar and substance use disorders following discharge from psychiatric hospitalization. Dr. Dindo will present the rationale, content/framing, refining, and piloting for an ACT intervention for hospitalized adults with HIV to help them more consistently adhere to HIV care and medication. Dr. Arch will present on intensively-measured affective responses to three novel values-based approaches for promoting adherence to endocrine therapy among breast cancer survivors. Finally, Ms. Slivjak, will share findings from thematically-coded, semi-structured interviews with 21 breast cancer survivors who participated in the online values-based intervention for endocrine therapy adherence, toward identifying how, why, and when values-based approaches are experienced as helpful in the context of medication adherence.

* Using a values framework to address treatment adherence in individuals with co-occurring bipolar disorder and substance use following discharge from a psychiatric hospital

Brandon Gaudiano, Ph.D., Brown University

Nicholas Rosenthal, Providence VA Medical Center

Gloria Peters, Butler Hospital

Lauren Weinstock, Ph.D., Brown University

Ivan Miller, Ph.D., Brown University

Jane Metrik, Ph.D., Brown University

The transition from psychiatric hospitalization to outpatient care is a time of heightened risk for relapse, rehospitalization, and suicide. Gaps in the healthcare system often result in patients not being given the extra support needed during this critical period to put them on the path to recovery. Patients diagnosed with co-occurring bipolar disorder and substance use disorders show particularly high levels of treatment nonadherence following discharge that can lead to rapid rehospitalization. However, acceptable and feasible interventions to assist these patients are rare, especially those that would be consistent with a contextual behavioral science framework. We developed a novel values-based intervention to assist patients with co-occurring bipolar disorder and substance use to improve treatment adherence and functioning following hospital discharge. The intervention combines brief individual, phone, and family sessions driven by patients’ personal values and offered for up to 6 months post-discharge. We will describe the rationale, pilot data, and methods of two large-scale randomized controlled trials currently underway in civilian and Veteran samples to test the effectiveness and implementation of this program.

* Improving medication adherence and retention in medical care for out-of-care patients with HIV

Lilian Dindo, Ph.D., Baylor College of Medicine

Thomas Giordano, M.D., Baylor College of Medicine

Ethan Moitra, Ph.D., Brown University

Many people with HIV (PWH) are not consistently engaged in HIV care and exhibit poor adherence to medications. This results in lower rates of HIV viral suppression, higher rates of HIV transmission, and exacerbates racial and ethnic disparities in health outcomes, including survival. Many PWH are hospitalized with life-threatening but preventable complications of inadequately treated HIV infection. They are among the most important patients to retain in care. Our previous research shows that among out-of-care hospitalized PWH, avoidance coping, stigma, and mental health difficulties were nearly universal. Further, avoidance coping was a predictor of failure to re-engage in care after discharge. ACT is a transdiagnostic intervention that targets avoidance and has the capacity to address a range of psychosocial and behavior-related issues that PWH experience. We are developing, refining, and piloting a brief (4-5 contact hours) ACT intervention titled THRIVE to help hospitalized out-of-care PWH overcome avoidance and re-engage in their HIV care, including medication adherence. We herein will describe the THRIVE rationale, clinical approach/framing, and pilot data, with a larger randomized trial underway.

* Affective responses to different values-based exercises to increase adherence to endocrine therapy among breast cancer survivors

Joanna Arch, Ph.D., University of Colorado Boulder and the University of Colorado Cancer Center

Annette Stanton, Ph.D., University of California Los Angeles

Catherine Crespi, Ph.D., University of California Los Angeles

Sarah Genung, University of Colorado Boulder

Madeline Nealis, MPH, University of Colorado Boulder

Jessica Magidson, Ph.D., University of College Maryland College Park

Jill Mitchell, Ph.D., MSW, Rocky Mountain Cancer Centers

Daily endocrine therapy (ET; e.g., anti-hormonal medication) represents the most effective way to prevent breast cancer recurrence and breast cancer survivors who take it as prescribed live longer. However, only about half of breast cancer survivors take ET as prescribed, and few existing interventions increase ET adherence. We present a brief, novel, online ET Education+Values intervention designed to increase ET adherence along with data on affective responses to three values-based adherence strategies used therein: affirming health-related values (prior to receiving ET education), using perspective-taking to link values to adherence, and creating a personal values cue-to-action sticker for the participant’s pillbox. In a randomized trial with 88 breast cancer survivors, compared to Education alone, Education+Values led to less tense and sad, and more loving affective states. Within the Education+Values group, the different values-based exercises produced very different affective responses, with significantly more positive responses to values affirmation and the values sticker than to perspective taking. In summary, distinct approaches to linking domain-relevant values to ET adherence produced markedly different affective responses, informing theory and practice.

* Qualitative analysis of breast cancer patients’ responses to a values-based intervention to enhance endocrine therapy adherence

Elizabeth Slivjak, M.A., University of Colorado Boulder

Emma Bright, Ph.D., University of Colorado Boulder

Madeline Nealis, MPH, University of Colorado Boulder

Maya Martinko, University of Colorado Boulder

Karen Albright, Ph.D., University of Colorado School of Medicine

Joanna Arch, Ph.D., University of Colorado Boulder and the University of Colorado Cancer Center

Despite evidence that adherence to endocrine therapy (ET) prevents breast cancer recurrence and promotes longevity among women with estrogen receptor-positive tumors, only about half of breast cancer survivors adhere as recommended. Thus, there remains a need to improve medication adherence through effective intervention. The current trial evaluated a personal values-based online intervention for promoting ET adherence among breast cancer survivors. Herein, we present qualitative data from semi-structured exit interviews conducted with 21 breast cancer survivors who were randomized to the values intervention arm. Participants provided detailed feedback about the experience of identifying their values and connecting them with their motivation to adhere to ET. They also reflected on creating a personalized sticker that illustrated their values to place their ET pillbox. We will present qualitative findings based on a detailed coding scheme for a priori and emergent concepts using thematic analysis. Findings from the present study will inform the clinical applications of values-based interventions for medication adherence. In addition, results will help to refine and tailor this novel intervention to best meet stakeholders’ needs.

Educational Objectives:

1. Describe the diverse ways in which ACT is being applied to increase medication and broader treatment adherence in healthcare contexts.

2. List specific exercises and approaches that aim to increase treatment adherence in medical and mental healthcare populations.

3. Describe the themes that emerged from a values-based intervention to increase medication adherence among breast cancer survivors.

**73. CBS Research Task Force Report: Recommendations with Commentary**

Panel - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Literature review*

Categories: CBS Research, CBS Research

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Steven C. Hayes

Task Force: Rhonda M. Merwin, Louise McHugh, Emily Sandoz, Jacqueline A-Tjak, Francisco J. Ruiz, Dermot Barnes-Holmes, Jonathan B. Bricker, Joseph Ciarrochi, Mark R. Dixon, Kenneth Fung, Andrew T. Gloster, Robyn L. Gobin, Evelyn R. Gould, Stefan G. Hofmann, Roscoe Kasujja, Maria Karekla, Carmen Luciano, Lance M. McCracken

Commentators: Anne Marie Albano, Michelle Craske, Vikram Patel

Throughout its history, the strategy and tactics of contextual behavioral science (CBS) research have had distinctive features as compared to traditional behavioral science approaches. Continued progress in CBS research can be facilitated by greater clarity about how its strategy and tactics can be brought to bear on current challenges. The ACBS Task Force on the Strategies and Tactics of Contextual Behavioral Science Research was created by the ACBS Board in Fall 2018. A central charge was to put forth a clear statement of the nature and needs of the CBS research program. This panel will outline the task force’s multi-year process and consensus report. Specific recommendations will be reviewed along consensus characteristics of CBS research, i.e., that CBS research is multilevel, process-based, multidimensional, prosocial, and pragmatic. We will then hear brief expert commentaries on the implications of the report and the task force executive committee will be available for questions and discussion.

Educational Objectives:

1. Identify the impetus and charge of the ACBS Task Force on the Strategies and Tactics of CBS Research.

2. Outline the key elements of the Task Force Report.

3. Discuss the implications of the Task Force Report for the broader field of contextual behavioral science.

**74. Variation with Vignettes: Responding to Clinical Presentations from the Perspectives of ACT, FAP, RFT, and CFT**

Panel - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Conceptual analysis*

Categories: Clinical Interventions and Interests, Functional contextual approaches in related disciplines, Idiographic Functional Analysis

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Lou Lasprugato, MFT, Sutter Health

Matthew Skinta, Ph.D., ABPP, Roosevelt University

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation

Fabián Olaz, Ph.D., National University of Córdoba. Argentina

Dennis Tirch, Ph.D., The Center for Compassion Focused Therapy, New York, NY

The growing movement into a process-based model of therapy is calling for a “context-and individual-sensitive, principles-informed approach to care” (Ong, Levin, & Twohig, 2020) that asks, “What core biopsychosocial processes should be targeted with this client given this goal in this situation, and how can they most efficiently and effectively be changed?” (Hofmann & Hayes, 2019). Manualized protocols, while convenient, don’t take into account the dynamic psychology and sociocultural variables of our clients. Contextual behavioral approaches, on the other hand, have long argued for a “commitment to responding to in-the-moment processes, which are to be conceptualized based on the functions they serve for the individual.” (Ong, Levin, & Twohig, 2020).

This panel discussion will call upon experts to offer an idiographic functional analysis and proposed process-based intervention in response to clinically challenging video vignettes. In the spirit of “choose your own adventure”, panelists will be asked to present their responses from one of the following perspectives: acceptance and commitment therapy (ACT), clinically-applied relational frame theory (RFT), functional analytic psychotherapy (FAP, and compassion-focused therapy (CFT).

Educational Objectives:

1. Explain a brief contextual behavioral case conceptualization that accounts for sociocultural variables.

2. Compare and contrast idiographic functional analyses among related, yet distinct, approaches to therapy.

3. Design a process-based intervention based upon one of several contextual behavioral approaches to therapy.

**75. Inspiring Stories: Global Perspectives On Facilitating Climate Action in a Just and Culturally Sensitive Manner: Climate Justice and Action SIG Sponsored**

Panel - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation*

Categories: Prevention and Community-Based Interventions, Functional contextual approaches in related disciplines, Climate Change

*Target Audience: Beginner*

Chair: Victoria Beckner, Ph.D., University of California San Francisco

Discussant: Martin Wilks, M.S., HCPC, Flexible Psychological Solutions

Shelot Masithi, University of Limpopo South Africa

Baida Hercus, Free Tree Society Kuala Lumpur

Daria Suchilina, M.A., Private Practice

Climate change will ravage our planet and cause widespread suffering without comprehensive and sustained action. While many solutions have been proposed, progress has been slow. Even among motivated stakeholders, the complexity and enormity of the problem can evoke helplessness, and strategies often ignore diverse perspectives and perpetuate inequities. CBS can play a role in applying behavioral principles to motivate and reinforce value-driven environmental action. But our regenerative approaches must be rooted contextually in the cultural, historic, and indigenous knowledge and practices across the planet. To this end, Baida Hercus will discuss the environmental stewardship activities of Free Tree Society to influence sustainable lifestyle changes in an urban context in Kuala Lumpur, Malaysia. Shelot Masithi will discuss the African psychology of “ubuntu” or togetherness, and how this is essential to tackle the climate crisis and the problem of global water scarcity. And Daria Suchilina will share stories of activists in Russia who are transcending their country’s traumatic history and isolation to forge more open-hearted and eco-centered solutions. Martin Wilks will be the discussant.

Educational Objectives:

1. Explain why CBS support for climate solutions is strengthened when culturally informed.

2. Describe how the African psychology of “ubuntu” can provide a helpful frame for approaching the problem of climate change.

3. Provide two examples of global efforts to support environmental action—one from Malaysia and one from Russia.

**76. Using Exposure to Strengthen Psychological Flexibility: Oregon Chapter Sponsored**

Workshop - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Literature review*

Categories: Clinical Interventions and Interests, Exposure, Anxiety, Psychological flexibility

*Target Audience: Beginner, Intermediate*

Brian Thompson, Ph.D., Portland Psychotherapy

Joanne Chan, Psy.D., Portland Psychotherapy

Brian Pilecki, Ph.D., Portland Psychotherapy

Although common to treating anxiety and obsessive-compulsive and related disorders within a traditional symptom-reduction paradigm, exposure may be used to target core ACT processes (Thompson, Luoma, & LeJeune, 2013). Newer research indicates exposure delivered outside of an ACT context (e.g., focused on symptom reduction) strengthens psychological flexibility as much as ACT-informed exposure (Thompson, Twohig, & Luoma, in press; Twohig et al., 2018).

This workshop focuses on using exposure to strengthen psychological flexibility with clients who may struggle with traditional ACT-concepts such as acceptance and values. Although exposure therapy has a history of bad PR and therapist reluctance to utilize (e.g., Scherr, Herbert, & Forman, 2015), the rationale for exposure is often easy for clients to understand. The repetition of exposure offers advantages for deepening learning compared to traditional ACT metaphors and experiential exercises.

Participants will learn to use the ACT model to maximize flexibility in designing exposure exercises. The workshop welcomes ACT therapists new to incorporating exposure in treatment and therapists experienced with traditional exposure who are new to the ACT model.

Educational Objectives:

1. Describe how exposure may be used to strengthen psychological flexibility.

2. Explain how to increase buy-in with clients who are ambivalent about ACT and exposure.

3. Design exposure exercises to maximize success in strengthening core psychological flexibility processes.

**77. ACT Quest: Gamifying Therapy for Treating Anxiety and Trauma: Women in ACBS SIG Sponsored**

Workshop - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Experiential exercises, Literature review*

Categories: Clinical Interventions and Interests, Anxiety, PTSD

*Target Audience: Beginner*

Janina Scarlet, Ph.D., Superhero Therapy

Megan Connell, Psy.D., ABPP, Geeks Like Us

“The opposite of play isn’t work. It’s depression” (Dr. Brian Sutton-Smith). The ongoing pandemic shed light on how devastating the effects of social isolation and loneliness can be on client mental health. Finding novel approaches to build rapport, helping clients to feel accepted and understood, and finding tools to create meaningful social connections are essential for client success.

One way that some clients have been able to maintain social connections is via online gaming, writing fanfiction, and other forms of playfulness behaviors. This workshop will present ways in which providers can utilize clients’ interests and passions, such as popular culture, cosplay, and games as a strength to build acceptance, mindfulness, core values, and committed actions skills in therapy, as well as a way to "gamify" therapy sessions. The workshop will include a review of gaming, fanfiction, and cosplay literature, as well as ways to incorporate fanfiction, and games, like Dungeons and Dragons into a therapeutic setting. No prior experience necessary. Capes are optional.

Educational Objectives:

1. Describe the concept of Game-based therapy.

2. Discuss research related to game-based and pop-culture-based treatments.

3. Demonstrate how to incorporate fanfiction and role playing games, like Dungeons and Dragons into therapy.

**78. Functional Analytic Psychotherapy (FAP): Cultivating the Sacred in Therapy and Beyond**

Workshop - Friday, 25 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Original data, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, Therapeutic Alliance

*Target Audience: Beginner*

Mavis Tsai, Ph.D., University. of Washington; ACL Global Project

Serena Wong, M.A, M.Ed., London Health Sciences Centre

Emerson Hardbeck, B.A., Antioch University, Seattle

Barbara Kohlenberg, Ph.D., University of Nevada Reno School of Medicine

Robert Kohlenberg, Ph.D., ABPP, University of Washington

Sacred moments are transcendent and life-changing. They are moments filled with deep interconnectedness, awe, gratitude, or timeless truth. Clients report that they have been transformed by the sacred moments experienced in therapy, and providers find that sacred moments make their work most meaningful and sustaining. In this workshop, you will explore how you can create and deepen sacred moments with Functional Analytic Psychotherapy (FAP), a treatment that uses functional analysis to foster deep and healing relationships. By focusing on the subtle ways clients' daily life problems occur in therapy and by augmenting the therapist repertoires identified as awareness, courage and love (behaviorally defined), many sacred moments are created. FAP calls for therapeutic stances and techniques that no single orientation would predict, and provides a conceptual framework that will supercharge your next session. A model also will be presented for going beyond individual therapy so communities can bring together people to connect more open-heartedly and support one another in rising to live more true to themselves.

Educational Objectives:

1. Describe the rules of Functional Analytic Psychotherapy which lead to the cultivation of sacred moments in treatment.

2. Identify your own therapist avoidance repertoires, and gain a more functionally precise understanding of the contexts in which commonly used interventions may be inadvertently counter-therapeutic.

3. Implement the FAP principles of Awareness, Courage and Love beyond the therapy room to impact greater change and to increase sacred moments in your community.

**79. Charting a path towards a just and caring future for transgender people: A CBS approach to addressing discrimination**

Plenary - Friday, 25 June (5:45 PM - 6:45 PM)

Components: *Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Clinical, occupational and community insights and interventions, Transgender people

*Target Audience: Beginner, Intermediate, Advanced*

Jo Lloyd, Ph.D., Goldsmiths, University of London

Transgender people are one of the most heavily marginalised social groups today, suffering pervasive discrimination on interpersonal, institutional, and systemic levels. This discrimination is a major contributing factor to the lower levels of physical and psychological health, and poorer life outcomes experienced by transgender people, relative to their cisgender counterparts. Contextual Behavioural Science (CBS) offers us concepts, models, and approaches to begin to understand and address this significant social justice issue at the different levels that it exists. At the same time, as we progress through these increasingly complex levels, the requirements and demands of research and practice become more challenging, and the need for professional, analytical, and disciplinary diversity more evident. The CBS community is well-positioned to meet this challenge. In our desire for multiple perspectives, penchant for research-practice synergies, and compassion for self and others, we find our strength of collective action and the possibilities for charting a path towards a just and caring future for transgender people.

Educational Objectives:

1. Describe how discrimination towards transgender people manifests at interpersonal, institutional, and systemic levels and the impacts of this.

2. Discuss the CBS concepts, models, and approaches that can help us to understand and address discrimination at these levels.

3. Explain the challenges and opportunities that exist and how CBS offers a meaningful path towards a just and caring future for transgender people.

# Saturday, 26 June (all times GMT/UTC +2)

**80. Internet interventions in the era of a pandemic**

Plenary - Saturday, 26 June (8:00 AM - 9:00 AM)

Components: *Literature review, Original data*

Categories: Clinical Interventions and Interests, Other, Internet interventions

*Target Audience: Beginner, Intermediate*

Gerhard Andersson, Ph.D., Linköping University

It is clear that mental health problems have increased as a consequence of the COVID-19 pandemic. The specific problems across countries reflect their response to the pandemic with mental health problems, including the effects of social isolation (physical distancing), loss followed by disrupted grief ceremonies, loss or disruption to vocational, economic or educational opportunities, fear of additional outbreaks of COVID-19 and future post-corona mental health consequences even following vaccination. Recent studies indicate that service demands for psychiatric assessments and interventions have increased, while at the same time in person psychiatric visits for mild to moderate conditions have been advised against while partly being replaced with video-conferencing contacts. Internet-delivered cognitive behaviour therapy (ICBT) has existed for 20 years and there are now a large number of controlled trials for a range of problems. In this talk I will outline how ICBT can be of help and also present data from two controlled trials on psychological problems associated with the pandemic.

Educational Objectives:

1. Explain how internet interventions can be set up at delivered.

2. Describe how internet interventions work.

3. Describe how internet interventions can be adapted to be of help for specific target groups and transdiagnostic problems.

**81. The complexities of compassion: What inhibits it and how we can help facilitate it**

Invited - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Literature review, Original data*

Categories: Clinical Interventions and Interests, Evolution, Compassion and Compassion Focused Therapy

*Target Audience: Beginner, Intermediate*

James Kirby, Ph.D., The University of Queensland

We all have a sense of what compassion is, how we have experienced it or even show it. But when you dig deeper into what compassion is it can start to become complex. For example, there are many contextual factors that can inhibit a compassionate response in an individual who has generally high trait levels of compassion. But what are those factors and can they be modified? This presentation will define what we mean by compassion, using an evolved model that underpins Compassion Focused Therapy. It will then present emerging research showing the bounds of our compassion in children and adults, and present possibilities to overcome some of these inhibitors. Finally, clinical work on how compassion can help with self-criticism and shame will be presented.

Educational Objectives:

1. Describe the evolved model of compassion that underpins compassion focused therapy.

2. Design research questions and studies that incorporate compassion.

3. Describe how you might apply compassion to help with self-criticism and shame.

**82. ACT with adolescents: Preliminary outcomes and processes of change across contexts**

Symposium - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Youth

*Target Audience: Intermediate*

Chair: Carter Davis, B.F.A., Utah State University

Discussant: Joseph Ciarrochi, Ph.D., Australian Catholic University

Julie Petersen, B.S., Utah State University

Katariina Keinonen, Ph.D., University of Jyväskylä

Fredrik Livheim, Ph.D., Karolinska Institutet

Fumito Takahashi, Ph.D., Shinshu University

Dafne Morroni, M.Sc., University of Cyprus

Mental health concerns in youth are a serious concern with global prevalence increasing, particularly during the current COVID-19 pandemic. Acceptance and commitment therapy (ACT) for youth is a nascent research area with growing promise (Fang & Deng, 2020). The present symposium aims to highlight recent research on outcomes and processes of change from studies focusing on using ACT with youth. The symposia presentations cover a variety of contexts (e.g., school, community, and online) from international researchers implementing ACT with youth. The primary goal of this symposium is to review some of the current research completed with youth receiving adaptations of ACT and to discuss future research directions with youth and ACT more broadly.

* A Pilot Randomized Controlled Trial of Online-Delivered ACT-Enhanced Behavior Therapy for Trichotillomania in Adolescents

Julie Petersen, B.S., Utah State University

Michael Twohig, Ph.D., Utah State University

Jeremiah Fruge, M.S., Utah State University

Clarissa W. Ong, Utah State University

Jennifer L. Barney, M.A., Utah State University

Jennifer Krafft, M.S., Utah State University

Eric B. Lee, Ph.D., Southern Illinois University

Michael E. Levin, Ph.D., Utah State University

Treatment of adolescent trichotillomania is understudied. In this pilot study, we compared ACT-enhanced behavior therapy to a waitlist, with treatment delivered over Zoom, to 28 adolescents who met criteria for trichotillomania. A description of the treatment protocol for ACT-enhanced behavior therapy adapted to Zoom for adolescents will be presented. Pretreatment assessments were completed over Zoom by an assessor unaware of study condition; pretreatment and posttreatment questionnaires were completed online. Results indicated that therapy was delivered with fidelity and competence over Zoom. Adolescents reported that pulling severity decreased significantly more in the treatment condition than waitlist. No differences were seen in other adolescent or parent-reported pulling severity or distress. However, significant medium to large within-condition effect sizes were observed in the treatment condition. Medium effect size changes were seen in the treatment group on a measure of trichotillomania-related psychological flexibility, and a small effect size was seen for psychological distress. Overall, pilot results provide preliminary support for ACT-enhanced behavior therapy, delivered over Zoom, for adolescent trichotillomania, indicating the need for a fully powered confirmatory efficacy trial.

* A Quasi-Experimental, Multicenter Study of Acceptance and Commitment Therapy for Antisocial Youth in Residential Care

Fredrik Livheim, Karolinska Institutet

Background: Treatment of youth in residential care is a challenging task for most providers because comorbid problems are common and general psychosocial functioning is low.

Objective: The purpose of this study was to test a brief, transdiagnostic, ACT group intervention for youth in residential care.

Method: With a quasi-experimental design, 69 youth received Treatment-as-Usual

(TAU), and 91 youth received TAU with an additional 12 hours of ACT in a group setting (TAU+ACT). Both short- and long-term follow-up was conducted. We hypothesized that psychological flexibility (PF) would mediate outcome.

Findings: ITT analyses showed statistically significant improvements in the primary outcome variables of anxiety and depression in TAU+ACT youth after the end of treatment and at 18 month follow up. Regarding secondary outcomes, the TAU+ACT group showed several improvements. Psychological flexibility mediated the decrease in the primary outcome of decreased anxiety.

Conclusions: ACT in group format may be of help in promoting various positive outcomes for youth in residential care. Increasing psychological flexibility is a promising process variable that can be targeted to increase the effectiveness of interventions for this population.

* Developmental trajectories of experiential avoidance and depressive symptoms among adolescents during a guided online ACT intervention

Katariina Keinonen, University of Jyväskylä

Anne Puolakanaho, University of Jyväskylä

Päivi Lappalainen, University of Jyväskylä

Raimo Lappalainen, University of Jyväskylä

Noona Kiuru, University of Jyväskylä

While relatively many children and adolescents experience psychological problems, only few receive treatment. Online interventions can help respond to the need of support among young people without requiring considerable resources. However, there are relatively few studies examing the effectivity of online interventions for youth. The current study sought to examine the developmental trajectories of experiential avoidance and depressive symptomatology during a brief guided online ACT intervention in the school context. A total of 123 9th grade adolescents completed the 5-week intervention including online support. The analysis showed three separate sub-groups based on baseline experiential avoidance and depressive symptoms and changes in these two variables; 1) high symptoms/avoidance, significant improvements (16 %), 2) moderate symptoms/avoidance, no significant improvement (36 %) and 3) low symptoms/avoidance, significant improvement (46 %). High symptoms/avoidance was associated with sex (82 % girls) and with poorer health and sleep, higher substance abuse and less physical activity. The results suggest that guided online ACT can reduce experiential avoidance and depressive symptomatology especially among those reporting high depressive symptoms and experiential avoidance at baseline.

* Effects of school-based Acceptance and Commitment Therapy on parent-reported emotional/behavioral problems in adolescents

Fumito Takahashi, Shinshu University

Many adolescents suffer from a clinical or sub-clinical level of internalizing or externalizing problems (Moffitt, 2018; Thapar, Collishaw, Pine, & Thapar, 2012) but are not motivated to seek help from professionals. The current study, which is informed by a preliminary trial by Takahashi et al. (2020), examined the effects and change processes of Acceptance and Commitment Therapy (ACT) as a school-based universal intervention for all students at public secondary school. Participants were 179 seventh and ninth graders aged 12 to 15. They were randomized into the ACT group or waiting-list control group. The ACT intervention consisted of bi-weekly six sessions, 50 minutes for each. The primary outcomes were the parent-reported emotional/behavioral problems, and the secondary outcomes included personal value, mindfulness, and avoidance. Linear mixed models showed interaction effects in total difficulties (β = -2.48 [95&#37; CI: -4.68 to -0.27], p = .028) in participants with the clinical-level total difficulties, suggesting that the ACT program contributed to significant reduction. Detailed results and future directions will be shared at the conference.

* Acceptance and Commitment Therapy for Unaccompanied Minors

Dafne Morroni, M.Sc., University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Unaccompanied minors (UM) are considered to be a highly vulnerable refugee subgroup. Research has indicated that UM experience traumatic events and consequently develop high levels of psychopathology. Post-traumatic stress disorder is the most prevalent diagnosis, followed by depression, anxiety disorders as well as traumatic grief and conduct problems. Acceptance and Commitment Therapy (ACT) may be particularly suited to the treatment of survivors of trauma and with vulnerable refugee groups such as UM. Due to the multifaceted nature of the psychological distress that UM are confronted with, the aims of this presentation are three-fold. Firstly, to illustrate the unique needs of this population and hence, the appropriate considerations prior to treatment. Secondly, to explain why ACT and the psychological flexibility model could be suitable for UM. Thirdly, to propose a novel six-week ACT group intervention for UM which will be implemented in a prospective pilot study. To conclude, it is anticipated that the ACT group intervention will improve UM psychological wellbeing, augment prosocial behaviour and enhance quality of life.

Educational Objectives:

1. Describe current contextual and developmental adaptations for using ACT with youth.

2. Demonstrate knowledge of recent research in applying ACT for youth.

3. Discuss limitations, challenges, and future research directions for research on ACT for youth.

**83. Recent theoretical and empirical advances in understanding and remediating rigid rule-governed behavior.**

Symposium - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Original data*

Categories: Relational Frame Theory, Clinical Interventions and Interests, Rule-governed behavior

*Target Audience: Beginner, Intermediate*

Chair: Alison Stapleton, B.A., University College Dublin

Discussant: Louise McHugh, Ph.D., University College Dublin

Nigel Vahey, Ph.D., Technological University Dublin

Mark Dixon, Ph.D., BCBA-D, University of Illinois at Chicago

The present symposium comprises three papers on the topic of rule-governed behavior (RGB). Drawing on recent empirical work and a survey of ACBS members, Paper 1 will discuss types of RGB in accordance with relational frame theory (RFT). Specifically, Paper 1 will highlight definitional problems and measurement issues associated with RGB that are hindering both the advancement of research and discussions of RGB within the CBS community, concluding with innovative avenues for future advances. Paper 2 will describe an ongoing qualitative exploration of undergraduate students' self-rules that contribute to academic procrastination. Paper 3 will describe recent work examining the transfer of stimulus control between children diagnosed with autism during gameplay. Given that decreases in persistent rule-following and increases in contingency sensitivity were observed, Paper 3 will also discuss implications of derived RGB and contextual cue in persistent rule-following. Together these three papers will contribute to our understanding of the RFT account of RGB.

* Conceptualizing types of rule-governed behavior in accordance with relational frame theory: Inconsistencies and innovations

Alison Stapleton, B.A., School of Psychology, University College Dublin

Louise McHugh, Ph.D., School of Psychology, University College Dublin

Within the relational frame theory account of rule-governed behavior (RGB), pliance refers to rule-following under the control of arbitrary socially mediated consequences, whereas tracking refers to rule-following under the control of non-arbitrary consequences that arise from how the world is arranged. However, at present, there are inconsistencies regarding these definitions that pervade the field of contextual behavioral science (CBS). These inconsistencies, coupled with measurement issues and an inability to control for participants' pre-experimental learning histories, are hindering both the advancement of research on RGB and discussions of RGB within the CBS community. Beginning with a discussion of recent findings from a survey of ACBS members that demonstrates mass confusion regarding terms associated with RGB, this presentation will highlight inconsistencies in how we define types of RGB. From here, drawing on recent empirical work, this presentation will discuss the clinical relevance and functional utility of RGB, concluding by highlighting viable innovative avenues for conceptualizing and measuring RGB moving forward.

* Mapping the Boundaries of Flexibility and Rigidity in Rule-governed Procrastination Among Undergraduate Students

Nigel Vahey, Ph.D., Technological University Dublin (TU Dublin)

Gráinne Carthy, B.A., Technological University Dublin (TU Dublin)

A large body of research indicates that psychological flexibility with respect to rule-governed behaviour is an important feature of mental health and job performance, but relatively little research has yet examined its involvement in procrastination among undergraduate students. Rule-governed behavior is typically cast in terms of relational networks selectively increasing a learners’ behavioural sensitivity to some environmental consequences, while simultaneously decreasing their sensitivity to all others. This can be very useful for motivating hard work in service of delayed or probabilistic outcomes, such as obtaining a high grade in a university degree. However, the long-term effectiveness of such rules depends upon the extent to which they are contextually cued specifically within relevant contexts. This presentation will discuss ongoing qualitative research examining the contexts and personal stories (aka rules) within which undergraduate student procrastination commonly occurs. We will place particular emphasis upon (a) highlighting the procrastination scenarios that standard measures of psychological flexibility currently disregard, and (b) recommending ways of improving the precision of these measures with respect to undergraduate student procrastination.

* Transfer of stimulus control of rule-governed behavior during naturalistic gameplay in children with autism.

Mark R. Dixon, Ph.D., BCBA-D, University of Illinois at Chicago

Zhihui Yi, M.S., BCBA, University of Illinois at Chicago

Individuals diagnosed with autism often demonstrate rigid rule-following behavior. The current study examines the transfer of stimulus control between children diagnosed with autism during gameplay. The baseline probe showed a low to moderate level of rule-following when presented with pictures of colored lights, and low rule-following when presented with pictures of arbitrary symbols. Contingency-based teachings were then conducted to establish the rule-governed behavior. A match-to-sample procedure was then used to establish a frame of coordination and opposition between various stimuli and arbitrary symbols. After the relational training, participants demonstrated novel rule-governed behavior during the game by responding accordingly to the arbitrary symbols based on their relationships with the initial stimuli. Upon reaching the mastery criteria for responding under arbitrary symbols, a brief contingency reversal was then conducted without signaling to both participants. Distinct patterns of persistent rule-following and sensitivity to contingency were observed. A contextual cue was then introduced by asking the participant to demonstrate variable behavior. Decreases in persistent rule-following and increases in contingency sensitivity were observed. Implications of derived rule-governed behavior and contextual cue in persistent rule-following were discussed.

Educational Objectives:

1. Explain definitional problems plaguing terms associated with rule-governed behavior.

2. Describe recent advances in empirical work aiming to remediate rigid rule-governed behavior.

3. Discuss viable avenues for future explorations of rule-governed behavior both inside and outside research laboratories with particular reference to means of measurement.

**84. Community-Based Interventions and Cultural Adaptations**

Symposium - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, FACT, Diabetes, Refugees, anxiety, depression, Islam, Ethnicity/diversity

*Target Audience: Beginner, Intermediate, Advanced*

Ross White, Ph.D., University of Liverpool

Mashael Bahattab, M.A., King Fahd Armed Forces Hospital

Ahmad AlHadi, M.D., King Saud University

Patti Robinson, Ph.D., Mountainview Consulting Group

Kathryn Kanzler, Board-Certified Clinical Health Psychologist, Psy.D., ABPP, University of Texas Health Science Center at San Antonio

Ching-yee Lam, MPhil, MNurs, RN, The Hong Kong Polytechnic Univeristy; The Open University of Hong Kong

Duckhyun Jo, M.A., University of Hawaii

The current symposium describes efforts to bring ACT to communities in need, and in ways that are culturally aligned and effective. The first paper describes two large-scale RCTs to prevent mental health problems in refugees (in the EU and Turkey). The second paper pivots to a qualitative thematic analysis of the acceptability of an ACT group intervention for Muslim Women in Saudi Arabia. The third paper describes the adaptation of ACT for delivery in brief sessions by community workers for Hispanic/Latinx individuals in the US who have T2DM. A fourth paper describes an ACT intervention supporting mental health and well-being among community health facilitators in nonwestern countries. A final paper reports on ethnic differences in the relationship between mindfulness and psychological distress and valued living that may need to be considered in treatment development and ethnic, racial or cultural adaptations.

* Evaluating the effectiveness of the WHO Self-Help Plus (SH+) intervention for preventing mental disorders among refugees in the EU and Turkey

Ross G. White, Ph.D., University of Liverpool

Corrado Barbui, Ph.D., University of Verona

Marianna Purgato, Ph.D., University of Verona

Ceren Acarturk, Ph.D., Koc University

Mark Van Ommeren, Ph.D., World Health Organization

Kenneth Carswell, World Health Organization

Refugees are at high risk of experiencing mental disorders. Two RCTs, one conducted in EU countries (n = 459) and the other conducted in Turkey (n = 642), assessed the effectiveness of the ACT-based ‘Self-Help Plus’ (SH+) intervention for preventing mental disorders among refugees. Adult refugees experiencing psychological distress, but no mental disorder, were randomized into Enhanced Treatment as Usual (ETAU) or SH+. The primary outcome measure was the Mini International Neuropsychiatric Interview. In the Turkey RCT, SH+ participants had half the risk of having developed any mental disorder at 6-month follow-up compared to the ETAU group (Cramer’s V 0.205, p<0.001, R Risk Ratio 0.533, 95&#37; CI 0.408 to .696), with no differences at post-intervention. In the EU trial, SH+ participants had half the risk of mental disorders at post-intervention (Cramer’s V 0.13, p= 0.01, Risk Ratio 0.50, 95&#37; Confidence Interval (CI) 0.29 to 0.87), with no differences at 6-months follow-up (Cramer’s V 0.007, p= 0.90, RR 0.96, 95&#37; CI 0.52 to 1.78). Findings suggests that SH+ is effective for preventing mental disorders among refugees.

* Acceptance and commitment group therapy among Saudi Muslim females with mental health disorders

Mashael Bahattab, Notre Dame de Namur University; King Fahad Armed Forces Hospital

Ahmad N. AlHadi, King Saud University; SABIC Psychological Health Research and Applications Cha

Introduction: This study aimed to examine the potential acceptance, feasibility, and clinical impact of Acceptance and Commitment Therapy (ACT) in a group format for Saudi women who struggle with depression and anxiety disorders.

Methods: Eight women with depression and anxiety in Riyadh city in the year 2017 were included in the study. A qualitative design was used for this study to test the possible effectiveness of and receptivity to a group treatment protocol based on ACT among Muslim Saudi females. The ACT group met for one 1.5-h session per week for 8

consecutive weeks. Thematic analysis techniques were employed. To explore and describe participants’ experiences, the data were analyzed for emerging themes that were then identified and coded.

Results: ACT could be an effective, well-received therapeutic approach for Muslim Saudi women as far as decreasing symptoms of depression and anxiety and making an overall positive change in their attitudes and behavior.

Conclusions: ACT group therapy was well appreciated and viewed as being culturally and religiously acceptable by the Saudi Muslim female participants.

* Development of the Acceptance Based Coping (ABaCO) Skills Program: A Community Health Worker-delivered Focused ACT Intervention for Hispanic/Latinx patients with Type 2 Diabetes

Kathryn Kanzler, Psy.D., ABPP, University of Texas Health Science Center at San Antonio

Patricia Robinson, Ph.D., Mountainview Consulting Group

Carolina Schlenker, M.D., MPH, University of Texas Health Science Center at San Antonio

Raquel L. Romero, M.D., MPH, CDCES, CHWI, University of Texas Health Science Center at San Antonio

Jacqueline Pugh, MD, University of Texas Health Science Center at San Antonio

Erin Finley, Ph.D., MPH, University of Texas Health Science Center at San Antonio

James Aikens, Ph.D., University of Michigan

Evan Forman, Ph.D., Drexel University

Amelie Ramirez, Ph.D., University of Texas Health Science Center at San Antonio

Rates of type 2 diabetes (T2DM) are disparately high among Hispanic/Latinx people in the U.S. (ADA, 2016) and access to appropriate healthcare is often challenging (Cusi & Ocampo, 2012). Community health workers (promotores) can expand the reach of brief behavioral interventions such as Focused ACT and help address social determinants of health, thus improving health equity. Research suggests participation in low-intensity versions of ACT is associated with improved diabetic self-management and biomarkers (e.g., Gregg et al., 2007). Therefore, we will share steps in development of our study, including adaptations to tailor Focused ACT so that it is feasible and acceptable for delivery by promotores who are trained weekly to teach seven 30-minute educational sessions with Hispanic/Latinx patients who have T2DM. Our Acceptance Based Coping (ABaCo) skills program aims to support creation of behavior change plans to improve quality of life and diabetes management at each session. Psychologist presenters will review lessons learned in collaborative development of ABaCo skills with promotores, as well as qualitative data/feedback obtained in preliminary stages of this telephone-based Focused ACT intervention.

* The effect of acceptance and commitment therapy workshop on mental wellbeing among community-based health facilitators

Ching-yee Lam, MPhil, MNurs, RN, The Hong Kong Polytechnic University

Yim-wah Mak, Ph.D., RN, The Hong Kong Polytechnic University

Ka-leung Lam, MN, BN, RN, The Hong Kong Polytechnic University

Sau-fong Leung, Ph.D., RN, The Hong Kong Polytechnic University

Introduction: Acceptance and Commitment Therapy (ACT) has been advocate to nurture people’s mental wellbeing. However, the effect of such intervention for non-clinical cases, especially in non-Western countries, has received much less attention.

Methods: This study report results from a 4 sessions 3-hr ACT training the facilitators recruited from an NGO and a University. A total of 31 participants were teachers, social workers, healthcare professionals, clinical psychologists, and students of higher education. WHO-5 and DASS-21 were used to measure participants’ mental wellbeing and symptoms of depression, anxiety and stress. Paired t-test was used to compare the difference of scores obtained before and after the workshop.

Result: Compared to baseline, although participants showed increased level of depressive, anxiety and stress symptoms at post-workshop survey, they had significant improvement in mental wellbeing (p<0.001).

Discussion: Our findings may help adding evidence on the potential of ACT in keeping people’s mental wellbeing safe at primary level among non-clinical samples even when there were increased symptoms of depression, anxiety and stress.

* Ethnic Differences in the Moderating Effect of Mindfulness on the Relationship between Psychological Distress and Engaged Living

Duckhyun Jo, University of Hawaiʻi at Mānoa

Samuel D. Spencer, University of Hawaiʻi at Mānoa

Joanne Qina’au, University of Hawaiʻi at Mānoa

Lisa Nakamura, University of Hawaiʻi at Mānoa

Arleen Firoozan, University of Hawaiʻi at Mānoa

Linda Lee, University of Hawaiʻi at Mānoa

Akihiko Masuda, University of Hawaiʻi at Mānoa

Engaged, or values-based, living is a key process within a contextual CBT account of optimal health and wellbeing (Hayes et al., 2011; Trompetter et al., 2013). However, relatively less is known about correlates of, or moderating variables that may affect, engaged living. The present cross-sectional study examined whether mindfulness moderated the relationship between psychological distress and engaged living, and to what extent ethnicity impacted those associational pathways using a sample of 576 Asian-American and White university students from Hawaiʻi. Results of hierarchical regression analyses revealed a significant three-way interaction between psychological distress, mindfulness, and ethnicity (i.e., White vs. Asian). That is, the inverse relationship between psychological distress and engaged living was attenuated for White participants with higher levels of mindfulness, while the same relationship was amplified for Asian participants with higher levels of mindfulness. These results suggest that mindfulness may have differential effects across ethnicities in the context of psychological distress and engaged living. Findings are discussed in terms of cross-cultural applicability of mindfulness measures and the role of culture in conceptualizing contextual CBT variables.

Educational Objectives:

1. Describe outcomes for ACT self-help+ interventions for refugees.

2. Discuss adaptions of ACT interventions to multicultural contexts.

3. Describe adaptations of ACT for delivery by and with community workers.

**85. Shaping Supervision: Developing ACT consistent Supervision Skills**

Workshop - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Experiential exercises, Literature review, Role play*

Categories: Supervision, Training and Dissemination, Professional Development, Supervision

*Target Audience: Intermediate, Advanced*

Jim Lucas, PG Diploma Cognitive Behavioural Therapy, BABCP

Sally Bradley, DClinPsy, BPS, HCPC

Supervision empowers practitioners to implement and retain the knowledge and skills learned through training (Walser, Karlin, Trockel, Mazina & Taylor, 2013). Given the limited research into ACT supervision and the absence of a supervision competency framework, many practitioners feel unsure how to apply ACT processes in this supervisory context effectively.

CBS supervision publications agree that experiential methods predict new learning (Eric-Bilch & Morris, 2017; Thompson, Luoma, Terry, LeJeune, Guinther & Robb, 2015). Similarly, when practitioners treat their private events as data from which to pivot, it allows both the supervisor and supervisee to respond more flexibly. Together supervisor and supervisee may build competencies by responding with openness, awareness and engagement (e.g., Batten & Santanello, 2009).

This workshop is an opportunity to reflect on how you can engage in supervision from multiple perspectives. By modelling, initiating and reinforcing flexibility practitioners can experientially clarify their values, welcome self-doubt and take bold steps into peer supervision.

Educational Objectives:

1. Explain how to complete a functional analysis of supervisory experiences using an ACT Matrix.

2. Describe an ACT consistent approach to training skills in supervision.

3. Apply an ACT method to supervision that builds competencies.

**86. Breaking the Binds of Body Image using ACT**

Workshop - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Body image, Body dissatisfaction, ACT, Social change

*Target Audience: Beginner, Intermediate*

Sarah Pegrum, Ph.D., The Beacon Centre

Struggles with body image are extremely common, across the lifespan and across the world (Grogan, 2008). People who struggle with body image are not only more likely to develop an pathological eating behaviours (Stice, Ng and Shaw, 2010), depression (Richard, Rohrmann, Lohse & Eichholzer, 2016), and anxiety (Vannucci & McCauley, 2017), but also are more likely to experience lower quality of life (Mond, Mitchison, Latner, Hay, Owen, & Rodgers, 2013). Acceptance and commitment therapy (ACT) has been demonstrated as an effective intervention for body image struggles (Pearson, Follette & Hayes, 2012). The first part of the workshop aims to provide clinicians practical ACT tools that they can use with clients who are struggling with body image. The second part of the workshop explores and encourages clinicians to become agents of change outside of their clinical interactions, and take steps towards interrupting the social and societal processes that fuel body image struggles.

Educational Objectives:

1. Describe how body image can impact mental health.

2. Implement ACT based strategies in the treatment of body image struggles.

3. Identify and implement different ways to interrupt or challenge social and societal processes that fuel difficulties with body image.

**87. Top 5 mistakes you don’t want to make as an [ACT] therapist**

Workshop - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Supervision, Training and Dissemination, Professional Development, Therapist mistakes

*Target Audience: Beginner, Intermediate, Advanced*

Rikke Kjelgaard, M.Sc., ACT Danmark / Human ACT Sweden

Despite our very best intentions therapists are only humans. And naturally we make mistakes. Inside the therapy room mistakes can have damaging effects on the therapeutic process and outcome. Sometimes we are unaware of these mistakes and miss out on potentially important learning opportunities. Furthermore, we are sometimes so afraid of making any mistakes at all that our behavioral repertoire is limited and ruled by control efforts and lack of contact with the present moment, the client and our own values. This could also have damaging effects on therapy. What are some of the common mistakes we make as therapists? And once we get stuck in these, how do we get unstuck again? This workshop lists 5 common therapist mistakes in a compassionate and humorous way. Through self-disclosure and role-plays we will explore these mistakes and ways of avoiding them. Participant are invited to re-visit their own therapist mistakes and transform these into learning opportunities. This highly experiential workshop is run by licensed psychologist, passionate public speaker and peer reviewed ACT trainer Rikke Kjelgaard

Educational Objectives:

1. Describe five common therapist mistakes.

2. Describe how to avoid common therapist mistakes.

3. Describe how to make use of selfcompassion when addressing common mistakes and turn these into learning opportunities.

**88. Stuff that's Stuck: ACT for Difficult to Engage Teens**

Workshop - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Professional Development, Adolescent

*Target Audience: Beginner, Intermediate*

Ben Sedley, Ph.D. PGDipClinPsyc, New Zealand College of Clinical Psychologists

Learn how to rapidly apply ACT principles in working with the most difficult to engage teens. Packed full of techniques and strategies, Ben will cover the theoretical framework for understanding the difficulties teens are facing and practical ideas on how to engage them and their families.

Educational Objectives:

1. Explain the family, school and online contexts that our young people are navigating.

2. Describe how to incorporate systemic factors into your formulation.

3. Describe how to use the principles of Observe, Describe and Track to meet teens at their level.

**89. When the same boat is too narrow – stimulating contact with unique suffering**

Workshop - Saturday, 26 June (10:00 AM - 11:30 AM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Relational Frame Theory, RFT, Conceptualized self, Self-compassion

*Target Audience: Beginner, Intermediate, Advanced*

Bartosz Kleszcz, M.A., Uczę się ACT

Therapeutic interventions often highlight the common humanity hidden in adverse experiences. While we indeed are in the same boat in regards to our ability to experience psychological pain, conversely the suffering – the way of dealing with pain – is always personal as it is rooted in the unique history of that individual.

This is especially true among those who are the most traumatized whose experiences do not reflect what they observe among their peers. For such people, misattributed generality and commonness might inadvertently amplify estrangement from oneself, create pressure to perform “normally”, and facilitate self-invalidation.

This workshop will help you stimulate a relationship with oneself that includes a workable distinction from other people, focus on own twisted and idiosyncratic history, and a resultant natural interest shown to the person who experienced all of that pain. The same process will also help the therapist understand the client in a deeper way, that emphasizes working within a logical and constricting story of a whole individual worthy of caring attention and compassion.

Educational Objectives:

1. Identify personal presentations of suffering in client's behavior linked to that person's history of learning.

2. Explain how to stimulate more personal, compassionate and understanding contact with client's self-story and history.

3. Describe how to use your understanding of client's history in such a way that is usable in the present moment.

**90. Trauma-Focused ACT: Working With Mind, Body and Emotion**

Workshop - Saturday, 26 June (10:00 AM - 1:15 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Trauma, Exposure

*Target Audience: Beginner, Intermediate, Advanced*

Russell Harris, M.B.B.S., ACT Mindfully.com

This workshop illustrates key themes from Russ Harris's latest textbook, "Trauma Focused ACT" (coming out in August 2021). Trauma Focused ACT (TFACT) is not a protocol; nor a treatment for one specific disorder such as PTSD. It is a compassion-based, exposure-centered approach to doing ACT, that is:

a) trauma-informed: drawing upon relevant fields such as evolutionary science, polyvagal theory, attachment theory, and inhibitory learning theory

b) trauma-aware: attuned to the possible role of trauma in a wide range of clinical issues

c) trauma-sensitive: alert to the risks of experiential work, especially mindfulness meditation

TFACT is a powerful approach for targeting the core processes that underlie a wide range of trauma-related issues, from PTSD and complex trauma to moral injury, addiction and depression: processes such as experiential avoidance, cognitive fusion, lack of somatic awareness, deficits in grounding skills, and so on.

Through videos, roleplay, didactic and experiential work, we will explore key themes of TFACT, including compassionate flexible exposure to traumatic memories; somatic mindfulness; and how to work effectively with flashbacks and dissociative states.

Educational Objectives:

1. Utilize compassionate flexible exposure interventions for traumatic memories.

2. Utilize a range of core ACT processes for working with both autonomic hyperarousal and hypoarousal.

3. Explain how to use core ACT strategies to help clients develop somatic awareness and reconnect with their bodies.

**91. Psychological flexibility, mental health and health behavior in the context of COVID: An international perspective**

Symposium - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Original data*

Categories: Behavioral medicine, Functional contextual approaches in related disciplines, COVID-19, Psychological flexibility, Mental Health, Behavioral Science

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Yuen yu Chong, Ph.D., The Chinese University of Hong Kong, Faculty of Medicine

Discussant: Brooke Smith, Ph.D., Western Michigan University

Elisa Haller, Ph.D., University of Basel

Ho Yu Cheng, Ph.D., The Chinese University of Hong Kong, Faculty of Medicine

Gökçen Aydın, Ph.D., Hasan Kalyoncu University

Andronikos Strouthou, M.S., University of Cyprus

During the early phase of the COVID-19 pandemic, an international team (COVID-IMPACT) of scholars and researchers was established to examine the psychological responses and behavioral changes to the pandemic among the general public worldwide. This symposium will present the key findings of the COVID-IMPACT project. The first study will present the large-scale cross-sectional data that examined and compared the roles of psychological flexibility, prosociality and coping in the impacts of illness perceptions toward COVID-19 on mental health across seven geographical regions. The second study will report the psychosocial predictors of prosociality among the public worldwide experiencing the pandemic. The third study will discuss the relationship between eHealth literacy and psychological flexibility in a sample of Hong Kong adults. The fourth study will present the descriptive statistics of psychological flexibility and its correlates in a sample of Turkish adults and describe the psychometric properties of the Turkish version of PsyFlex. Finally, the fifth study will present the impact of COVID-19 and its related lockdown measures on smoking behaviors across 22 countries.

* Patterns of psychological responses among families during the early phase of COVID-19: A cross-regional analysis

Yuen Yu Chong, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Wai Tong Chien, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Ho Yu Cheng, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Angelos P. Kassianos, Ph.D., University of Cyprus; University College London

Andrew T. Gloster, Ph.D., University of Basel

Maria Karekla, Ph.D., University of Cyprus

Few studies have compared the resilience and coping patterns of families with children when facing the COVID-19 pandemic across geographical regions and explored if any common factors could be identified as future targets for interventions. Using a convenience sampled online survey data involving a total of 3730 families (77.8&#37; mothers) across 21 countries worldwide, we aimed to examine and compare the roles of psychological flexibility, prosociality and coping in the impacts of illness perceptions toward COVID-19 on mental health across regions. Multiple-group structural equation model analysis showed that psychological flexibility was the only factor that significantly associated with mental health across all regions (β range=1.54-2.72, SE range=0.33-0.82, all Ps range=<.001-.008). In addition, prosociality was significantly associated with mental health among the participants from Western Asia, Northern Europe, Western Europe and Southern Europe (β range=0.59-0.82, SE range=0.15-0.26, all Ps range=.002-.047). The findings of this study provide empirical support regarding the significance of fostering psychological flexibility and prosociality in mitigating the adverse mental impacts of COVID-19 regardless of how the situations of pandemic differ across regions.

* To help or not to help? Prosocial behavior and predictors thereof during the COVID-19 pandemic

Elisa Haller, Ph.D., University of Basel

Jelena Lubenko, Ph.D., Riga Stradiņš University

Maria Karekla, Ph.D., University of Cyprus

Angelos P. Kassianos, Ph.D., University of Cyprus; University College London

Andrew T. Gloster, Ph.D., University of Basel, Switzerland

Background: Lockdown measures drastically limit everyday social interactions, resulting in a condition that goes directly against basic human needs. Given the individual and societal benefits of prosocial behavior, identifying predictors thereof in times of crisis and social isolation is of importance. Methods: This study is part of the international online and cross-sectional COVID-Impact project. Prosocial behavior was measured using 6 items of the self-report Prosociality Scale for Adults. Results: The sample included N = 9496 respondents (77.6% female) from 60 countries clustered into eight geographic regions (Southern Europe, Western Europe, Northern Europe, Eastern Europe, North America, Latin America, West-Asia, and East-Asia). Preliminary results show that, overall, respondents reported high levels of prosocial behavior without substantial differences between regions. Strong psychosocial predictors were high levels of perceived social support, positive affect, and psychological flexibility. Sociodemographic predictors were female gender and living situation (with roommates/friends), whereas changes in the financial situation due to the lockdown did not meaningfully explain prosocial behavior. Discussion: Psychosocial factors appear to be driving factors of prosocial behavior despite a socially disruptive situation.

* eHealth literacy is associated with psychological flexibility of Chinese adults during COVID-19 pandemic

Ho Yu Cheng, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Yuen Yu Chong, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Wai Tong Chien, Ph.D., The Nethersole School of Nursing, The Chinese University of Hong Kong

Andrew T. Gloster, Ph.D., University of Basel

Maria Karekla, Ph.D., University of Cyprus

Angelos P. Kassianos, Ph.D., University of Cyprus; University College London

Background: Psychological flexibility, a core mental health asset, was found to protect people’s from negative impact of COVID-19, little is known about the role of eHealth literacy on psychological flexibility in the COVID-19 infodemic. Methods: This cross-sectional survey recruited 514 community-dwelling Chinese adults (age: 32.75±11.52 years; female:74.1%). Validated questionnaires of COVID-19 related factors (self-efficacy in responding to COVID-19 and illness perceptions), coping strategies, eHealth literacy and psychological flexibility were used. Multiple regression analysis was used to delineate the association of these factors with psychological flexibility. Results: The score psychological flexibility among Chinese adults was 19.4±4.0, which was lower than the western counterparts. After adjusting for age, coping strategies (active coping, positive framing, planning, acceptance and self-blame) and COVID-19 related factors, eHealth literacy was independently and significantly associated with psychological flexibility (B = 0.11, 95% CI:0.01-0.21). The total variance explained was 36.4%. Conclusion: Adults with higher eHealth literacy has better psychological flexibility. We call for research to further investigate how eHealth literacy improves the mental health asset of people in the era of digital communication.

* Psychological Flexibility Matters in Turkey!

Gökçen Aydın, Ph.D., Hasan Kalyoncu University

Andrew T. Gloster, Ph.D., University of Basel

Angelos P. Kassianos, Ph.D., University of Cyprus; University College London

Maria Karekla, Ph.D., University of Cyprus

The concept of psychological flexibility has been brand-new for Turkish population. The broad definition of psychological flexibility means being in the present moment and living accordingly with one’s values (Hayes et al., 2004). However, Turkey is close to being a collectivist society. Therefore, psychological flexibility matters in Turkey. The first aim of this research is to describe the psychometric properties of the Turkish version of PsyFlex. The second aim is to present some descriptive statistics about psychological flexibility level unique to COVID-19 process. The participants included 690 adults (aged between 18 and 71, M=30.89) living in 36 different cities around the country. The data were collected during the time period of April to June 2020, when the lock-downs were applied meticulously. The current study describes the age, gender and education level differences of psychological flexibility in COVID-19 process in Turkey.

* The impact of the COVID-19 pandemic governmental measures on smoking behavior: A study of 22 countries

Angelos P. Kassianos, Ph.D., University of Cyprus; University College London

Maria Karekla, Ph.D., University of Cyprus

Andrew T. Gloster, Ph.D., University of Basel

The COVID-19 pandemic has impacted almost all aspects of our lives. We wanted to examine the impact of the pandemic on smoking behaviors across 22 countries. A random sampling approach was used to obtain participant characteristics through an online survey. We asked how many cigarettes per day participants smoked prior to the pandemic compared to the present period. Participants were N&#3f9150 (77.7&#37; female) and mean age was 36.9 (13.3) years. Smoking rates ranged from 1.4&#37; to 32.7&#37;. A repeated measures ANOVA of Country by Time (before the pandemic vs. currently) of number of cigarettes smoked was significant, F(36,1533)= 4.12, p <.001, η2= .09. The countries that drove the interaction and presented with significant increases in cigarettes smoked per day were: Cyprus, Greece, Austria, France, Latvia and Ireland. In the rest of the countries, participants did not change their smoking behavior. Implication of these findings and the impact of different levels of lockdown and quarantine on smoking behavior will be discussed.

Educational Objectives:

1. Describe the role of psychological flexibility in protecting global mental health in the context of the COVID-19 pandemic.

2. Identify plausible reasons explaining the interrelationships between psychological flexibility, prosociality, ehealth literacy and mental health.

3. Describe appropriate strategies and interventions that could mitigate the adverse mental impact of COVID-19 and promote better health behavior.

**92. Bend, But Don’t Break: Psychological Inflexibility and Responses to Trauma, Abuse, and Assault**

Symposium - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Literature review, Original data*

Categories: Clinical Interventions and Interests, Abuse, ACEs

*Target Audience: Beginner*

Chair: Jessica Criddle, Murray State University

Discussant: Michael Bordieri, Ph.D., Murray State Univeristy

Eva Lieberman, M.S., Louisiana Contextual Science Research Group

Brad Parfait, Louisiana Contextual Science Research Group

Thomas Sease, B.S., Texas Christian University

Psychological inflexibility following abuse and other adverse events is associated with numerous disadvantageous outcomes. Specifically, attempts to avoid or escape aversive experiences may contribute to the etiology and maintenance of many of these outcomes. The first presenter will examine self-concealment following romantic partner emotional abuse through the constructs of psychological inflexibility and emotion dysregulation The second presenter will explore the role of experiential avoidance in rape myth acceptance and inflexibility in views of sexual violence victims. The final presenter will discuss the roles of avoidance and fusion in the relation between adverse childhood experiences and dissociation. Attendees will be able to identify possibly dysfunctional strategies to regulate the presence and strength of unpleasant emotions after abusive experiences, as well as their relation to various aspects of psychological inflexibility.

* The influence of emotion dysregulation on the relationship between emotional abuse and self-concealment among romantic partners

Thomas B. Sease, B.S., Texas Christian University, Louisiana Contextual Science Research Group

David R. Perkins, Ph.D., University of Louisiana at Lafayette

Emily K. Sandoz, Ph.D., University of Louisiana at Lafayette

Within the framework of psychological flexibility, self-concealment is an attempt to downregulate unwanted internal events (Masuda et al., 2017). Considering the negative association between self-concealment and romantic relationship well-being (Larson et al., 2015), it is important to identify antecedents of self concealment for people in intimate relationships. The current study investigated the impact of emotional abuse on self-concealment in a sample of 126 college students currently in a romantic heterosexual relationship. This study also examined whether emotion dysregulation moderated the relationship between emotional abuse and self-concealment. Results showed emotion dysregulation moderated the relationship between emotional abuse and self-concealment. When emotion dysregulation was low, being in an emotionally abusive relationship was positively associated with self-concealment. When emotion dysregulation was high, emotional abuse was not associated with self-concealment. In the context of intimate partner emotional abuse, this study suggests self-concealment serves a regulatory function even in people with low emotion dysregulation.

* Rape Myth Avoidance: Exploring the Relationship Between Rape Myth Acceptance and Experiential Avoidance

Eva Lieberman, Louisiana Contextual Science Research Group

Emily K. Sandoz, University of Louisiana at Lafayette

Acceptance of stereotypical and false beliefs about how and why rape happens, called Rape Myths, has numerous negative and harmful effects on victim recovery, social support, and criminal liability (Berman & Brooks, 2016; Venema, 2019). The Illinois rape myth acceptance scale has been used to examine to what extent people ascribe to these harmful beliefs, and many studies have found that participant characteristics (i.e., participant gender, previous experience with sexual assault) play a role in rape myth acceptance (RMA; Davies et al., 2012; Hockett et al., 2016). However, few studies have examined the role that psychological flexibility might play in the extent to which people ascribe to rape myths. This presentation will discuss the results of a study examining psychological flexibility, specifically Experiential Avoidance and RMA, as well as address implications for reducing rape myth acceptance, and improving overall attitudes toward victims of sexual violence.

* Psychological inflexibility as a mediator on the relationship between adverse childhood experiences and dissociation

Brad M. Parfait, University of Louisiana at Lafayette

Thomas Sease, Texas Christian Unviersity

Emily K. Sandoz, University of Louisiana at Lafayette

From a behavioral perspective, dissociation is an avoidant-focused behavior that is often precipitated by difficult life events, such as abuse or neglect in childhood (Haferkamp, L., Bebermeier, A., Möllering, A., & Neuner, F., 2015). Psychological inflexibility has been proposed as an influencing factor that affects the relationship between adverse childhood experiences (ACEs) and negative psychological outcomes (Makriyianis, H. M., Adams, E. A., Lozano, L. L., Mooney, T. A., Morton, C., & Liss, M., 2019). While other projects have examined psychological inflexibility as mediating the relationship between ACEs and post-traumatic symptomatology, little to no work has assessed the associations among ACEs, psychological inflexibility, and dissociation—a specific response to ACEs. This project examined whether psychological inflexibility mediated the relationship between ACEs and dissociation. Psychological inflexibility had a mediating effect on the positive association between ACEs and dissociation. This presentation will also discuss implications for potentially reducing dissociation through bettering our understanding of ACEs and the role of psychological inflexibility.

Educational Objectives:

1. Describe the link between abusive experiences and various strategies to avoid or regulate aversive internal events.

2. Discuss how these behaviors may serve different functions in the short and long term.

3. Discuss possibilities to enhance the well-being of victims of abuse in clinical settings.

**93. Psychological Flexibility Processes: Evidence and Explorations**

Symposium - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Clinical Interventions and Interests, Theoretical and philosophical foundations, Psychological flexibility, Treatment Processes, Network analysis, Meditation, Dispositional Mindfulness, Depression, Prospection

*Target Audience: Beginner, Intermediate, Advanced*

Jenna Macri, B.A., University of Rochester

Ronald Rogge, Ph.D., University of Rochester

Andria Christodoulou, M.A., University of Cyprus

Miguel Rodriguez-Valverde, Ph.D., University of Jaén

Eric Tifft, M.A., University at Albany, SUNY

Hasan Erguler, University of Nicosia

The current symposium will explore psychological flexibility as a process of change. The symposium will begin with a systematic review of the extant evidence for psychological flexibility and the application of newer statistical strategies to examine flexibility components. We will then pivot to experimental study of heart rate variability as a physiological marker of emotion regulation, which includes being open to experience and not overly rigid or attached to internal experience. Finally, we will take up the issue of meditation and how it may function as avoidance and control (rather than its intended purpose), and report on the impact of dispositional mindfulness on future expectancies and psychological wellbeing.

* Flexibility as an ACT Treatment Mechanism Explaining Improvements in Psychological Distress: A Meta-analytic Review

Jenna A. Macri, University of Rochester

Ronald D. Rogge, University of Rochester

Background: The current study sought to systematically review and meta-analyze ACT treatment mechanism studies.

Methods: Comprehensive literature reviews of Proquest (i.e., psycINFO) and Web of Science (augmented with listings on the ACBS website) identified 682 possible studies of ACT-based interventions to treat psychological distress, ultimately identifying 64 manuscripts representing 59 studies with a combined N of 6,501 subjects.

Results: Separate effects were estimated (1) treating all studies as single-arm treatment studies (focused on the ACT group alone), and (2) adjusting the estimates based on control group results for randomized clinical trials. Meta-analytic estimates of repeated measures Cohen’s d statistics suggested robust effects of ACT on reducing psychological inflexibility and lack of present moment awareness, and increasing flexibility, acceptance, and value-driven action. Meta-analytic summaries of residual correlations further suggested robust links between improvements in flexibility/inflexibility and corresponding improvements in distress. The corresponding systematic review highlighted a number of key recommendations for future work.

Conclusions: The findings integrate a diverse body of studies, support flexibility/inflexibility as key mechanisms, and provide clear guidelines for future work.

* A network analysis approach on the Psychological Flexibility model

Andria Christodoulou, M.A., University of Cyprus

Michalis Michaelides, Ph.D., University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

The Psychological Flexibility (PF) model needs an in-depth examination, as in psychometric studies there are several inconsistencies about its factorial structure and associations among its components. By applying a network analysis approach, we aimed to explore the role, function, and associations of all PF components. A sample of 501 people (Mage = 25.49) participated in the study, by completing the online MPFI scale. The resulting network that consisted of the MPFI items, did not reveal six distinct components, however all of them held an important position in the PF model. Self-as-Context had a key role and was merged with Present Moment Awareness. Values and Committed Action were combined as a single group and Experiential Avoidance and Cognitive Fusion were not the strongest or most central components. In conclusion, it seems best to therapeutically target the Self-as-Context skill in combination with the Present Moment Awareness skill to better enhance the overall psychological flexibility and well-being of clients.

* Resting heart-rate variability, cognitive fusion and anxiety: An exploratory study

Miguel Rodríguez-Valverde, Ph.D., University of Jaén

Miguel de las Heras Gamero, University of Jaén

Mónica Hernández-López, University of Jaén

Heart-rate variability (HRV), the change in the time intervals between consecutive heartbeats, provides an index of cardiac vagal tone that has been linked to emotional and behavioral regulation, and to health and wellbeing more generally. Low HRV is associated with poor adaptability to internal and external demands, as well as with weak behavioral persistence. In contrast, higher vagal tone (as indexed by larger HRV) is associated with better executive function performance, emotion regulation, and physiological and social functioning. Although it has been suggested that psychological flexibility (PF) may have a mediating role on the impact of HRV on health outcomes, there is a paucity of research in this regard. The present study examines associations amongst cognitive fusion (a specific component of PF), HRV, and measures of anxiety. 127 college students underwent ECG recording in the context of a psychophysiology experiment. Frequency-domain (HF-HRV) and time-domain (RMSSD) measures of resting HRV were calculated based on a 10-min recording. Participants also completed standard questionnaires of cognitive fusion, state and trait anxiety, and anxiety sensitivity.

* Exploring Meditation as Experiential Avoidance in Adult Meditators

Eric D. Tifft, M.A., University at Albany, SUNY

Max Z. Roberts, M.A., University at Albany, SUNY

Shannon B. Underwood, B.S., University at Albany, SUNY

John P. Forsyth, Ph.D., University at Albany, SUNY

The benefits of meditation practice are well known, but meditation might also occasion iatrogenic effects (Baer et al., 2019). Given the benefits of practice, individuals may approach meditation to control unwanted emotions, and thus use it as a form of experiential avoidance. In the current study, adult meditators (N = 328) completed a battery of well-established measures of anxiety, depression, and psychological inflexibility. Participants also reported the proportion of their meditation practice that was guided by experiential control vs cultivation of acceptance. Results of linear regression analyses suggest that meditation, when guided by acceptance, is associated with lower anxiety (β = -.12, SE = .03, R2 = .08, p < .001) and depression (β = -.05, SE = .01, R2 = .07, p < .001). Moreover, greater psychological inflexibility predicted use of meditation as experiential control after controlling for anxiety and depression (β = -12.82, SE = 2.43, R2 = .17, p < .001). These and other results will be discussed in the context of attending to the function of meditation in clinical practice.

* Moderating Impact of Dispositional Mindfulness in the Relationship Between Future Expectancies and Psychological Well-being

Hasan Erguler, Ph.D. Candidate, University of Nicosia

Nuno Ferreira, Ph.D., University of Nicosia

Mindfulness has been studied under cultivated or dispositional divisions where the latter has strong implications for psychological well-being in meditators and non-meditators alike. There is, however, a lack of empirical research looking at possible links between dispositional mindfulness, as understood in its facet structure, and future expectations or prospective imagery. Therefore, this research aimed at examining how dispositional mindfulness may be related to probabilistic risk assessments of positive and negative future events (stage I); and how mental imagery vividness may be moderated by mindfulness facets (stage II) - through a multiple regression analysis. This is an exploratory study aimed at investigating above mentioned questions to address the lack in the related field of research. Findings suggest that although there was no interaction effect in stage I, negative imagery vividness and nonreactivity to inner experience facet of dispositional mindfulness F(1,103)=4.00, R2 change=.018, p<.05) showed a significant interaction in stage II. This is a novel finding that could inform a future line of research looking into the stated variables in question - informing better equipped mindfulness interventions.

Educational Objectives:

1. Outline the evidence for psychological flexibility as a process of change, including a network analysis of component processes.

2. Describe preliminary findings on the relationship between heart rate variability and psychological flexibility.

3. Discuss the relationship between meditation/mindfulness and psychological flexibility.

**94. Harnessing ACT to develop/deliver innovative interventions targeting university students’ health & illicit drug use: College/University Student Mental Health SIG Sponsored**

Symposium - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Original data*

Categories: Educational settings, Clinical Interventions and Interests, ACT Intervention and Development, College Student Mental Health

*Target Audience: Intermediate*

Chair: Vasilis Vasiliou, Ph.D., University College Cork, Ireland

Discussant: Raimo Lappalainen, Ph.D., University of Jyväskylä

Ana Gallego, M.A., University of Jyväskylä Jyväskylä, Finland

Emily Kroska, Ph.D., University of Iowa

Benjamin Pierce, Ph.D., University of Minnesota Medical School

Mental health problems and drug use are highly prevalent among university students, yet university counseling services are limited in their capacity to deliver to large student bodies, and students may be unlikely to recognize a need for or be reluctant to seek support. Thus, alternative delivery methods should be considered. ACT’s transdiagnostic focus fits well for college settings, yet innovations to address context variation, engagement, and personalization to meet students’ needs, are still lacking.

In this symposium, Dr. Vasiliou will present findings from a sequential mixed-method study, showing ACT’s processes as key determinants in mitigating the risks of harm from drug use. Ms. Gallego will describe findings from a brief ACT intervention, delivered as a lecture, to improve wellbeing. Dr. Kroska will present findings of a digitally delivered ACT micro-intervention, targeting self-awareness and behavioral changes among distressed students. Finally, Dr. Pierce will show how a digitally delivered ACT Matrix intervention, can support distressed students while waiting for mental healthcare. Dr. Lappalainen will then discuss these studies and associated broader topics that they raise.

* Mindful decision making as a targeted harm reduction practice to college students using illegal drugs: Harnessing the Behavioral Change Wheel model to develop a contextual behavioral digital intervention

Vasilis S. Vasiliou, Ph.D., School of Applied Psychology, University College Cork

Samantha Dockray, Ph.D., School of Applied Psychology, University College Cork

Samantha Dick, M.A., School of Public Health, University College Cork

Martin P. Davoren, Ph.D., Cork Sexual Health Centre

Ciara Heavin, Cork University Business School, University College Cork

Conor Linehan. Ph.D., School of Applied Psychology, University College Cork

Michael Byrne, M.D., Student Health Department, University College Cork

Digital harm-reduction interventions exert moderate effectiveness for student population, and this occurs due to a lack of addressing context variation and personalization of interventions for students’ needs. Harnessing contemporary behavioral accounts to understand drug-use behaviors and map the content of new interventions can improve upon the effectiveness of these interventions. We applied the Behaviour Change Wheel (BCW) framework through a contextual-behavior lens, to understand: (a) what influences students’ capabilities, opportunities, and motivations (COM-B) in drug-use behaviors and (b) identify behavior patterns of responding to drug use influences. Using a sequential mix-method design, we analyze data from an on-line survey, a Delphi exercise, and findings from three systematic reviews. We mapped evidence onto the COM-B using pattern-based discourse analysis. Increasing reflective motivation in drug use decisions and social opportunities for value-based activities were found to be key determinants in mitigating the risk of harm from drug use. Mindful decision making, valued-based activities, and flexible application of personalized harm-reduction practices were selected as digital artifacts, to support a harm reduction intervention for drug use in college students.

* Effects of a brief ACT intervention provided in the form of a lecture to a large sample of novice college students

Ana Gallego, University of Jyväskylä, Finland

Katariina Keinonen, Ph.D., University of Jyväskylä, Finland

Raimo Lappalainen, Ph.D., University of Jyväskylä, Finland

In the present study, we examined the impact of a brief ACT intervention provided in the form of a lecture to a large sample (n = 350) of college students. The intervention aimed at improving students´ wellbeing, and it lasted 90 minutes (including pre- and post-measures). At the beginning, the teacher informed students about the rational and goals of the lecture. After the students filled in a list of their current challenges, the lecturer talked about defusion, and how our thoughts can affect our behavior. Subsequently, the functional analysis was introduced with a couple of examples related to academic life, and students were encouraged to build their own analysis. Afterwards, the lecturer presented exercises that aimed at clarifying values, building acceptance and choosing values-based actions. Generally, throughout the lecture, students engaged in peer-discussion and multiple exercises. The results depicted a significant increase in students´ wellbeing (p = 0.001), and psychological flexibility (p < 0.001). However, the within effect sizes were small. Furthermore, the results are discussed in terms of their implications for teaching practices.

* Evaluating an ACT-based mobile micro-intervention for distressed first-generation college students

Emily B. Kroska, Ph.D., University of Iowa

Sydney Hoel, B.A., University of Wisconsin-Madison

Amanda Victory, B.A., University of Michigan

Tijana Sagorac Gruichich, B.A., University of Wisconsin-Madison

Zachary N. Stowe. MD, University of Wisconsin-Madison

Amy Cochran, Ph.D., University of Wisconsin-Madison

Approximately half of college students meet criteria for a psychiatric disorder (Blanco et al., 2008), and first-generation college students are at particular risk (Stebleton et al., 2014). Thus, development of efficacious and accessible treatments for emerging adults is critical. Given the range of stressors and symptoms experienced by college students, Acceptance and Commitment Therapy (ACT) is particularly appropriate as a transdiagnostic approach. The presentation will detail the findings of a randomized micro-intervention trial wherein assessments and ACT-based interventions were delivered via a mobile application for 6 weeks with distressed first-generation college students. Students completed assessments of mood, stress, and behavior twice daily, followed by randomization to assessment only versus intervention. Assessments of behavioral function indicated that 74.1% of reported behaviors were identified as values-based. Interventions emphasized openness, awareness, and engagement. Qualitative analyses indicated that 93% of free-text responses aligned with the addressed ACT process. Quantitative longitudinal results will detail proximal change in mood, stress, and behavior. Findings suggest a possible brief mobile intervention to promote self-awareness and behavioral change among an at-risk population.

* Web and app-based delivery of a transdiagnostic ACT Matrix intervention for college students: Processes and outcomes for depressive and anxiety symptoms

Benjamin Pierce, Ph. D., University of Minnesota Medical School

Michael P. Twohig, Ph.D., Utah State University ACT Research Group

Michael E. Levin, Ph.D., Utah State University ACT Research Group

Symptoms of depression and anxiety are pervasive, debilitating, and intertwined among college students, yet treatment needs surrounding these concerns are often vastly disproportionate to the availability of services. Targeted, brief, transdiagnostic interventions may serve a role in providing broadly applicable skills that can support both functional improvement and symptom relief among students experiencing these common yet impactful concerns. Such interventions cannot replace psychotherapy, but may help students looking for skills or until they can access mental healthcare. This study recruited 106 students with symptoms of depression and anxiety from a medium sized, Mountain West university, and randomly assigned them to either a waitlist or a three-week, online and app-based intervention based on the Acceptance and Commitment Therapy (ACT) Matrix. Intervention skills were delivered in three, 15-minute sessions and emphasized adopting a psychological flexibility perspective, using the ACT Matrix and an app to support noticing and labeling the functional qualities of behavior. The results of the study will be discussed in relation to potential transdiagnostic targets for college students, such that can inform brief intervention methods.

Educational Objectives:

1. Discuss how different delivery methods harness ACT transdiagnostic focus to meet students’ needs for mental health support.

2. Describe new innovations in delivering brief ACT-based interventions in educational settings.

3. Demonstrate and apply targeted ACT processes as skills in providing support for students’ mental health and harm-reduction practices.

**95. Case Conceptualization and Treatment of a Cancer Case from a CBS Perspective: Greek & Cypriot Chapter Sponsored**

Panel - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Case presentation*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Depression, Pain, Breast Cancer, ACT, Functional Analytic Psychotherapy, Compassion Focused Therapy

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Marianna Zacharia, M.Sc., Ph.D. student in Clinical Psychology, University of Cyprus

Discussant: Dennis Tirch, Ph.D., The Center for CFT

JoAnne Dahl, Ph.D., Uppsala University

Jennifer Gregg, Ph.D., San Jose State University

Holly Yates, M.S., LCMHC, Certified FAP Trainer, Private Practice

The aim of this panel is to approach the conceptualization and treatment plan of a case based on Acceptance and Commitment Therapy, Functional Analytic Psychotherapy and Compassion Focused Therapy. We use the example of a 50-year-old woman with breast cancer experiencing pain and depressive symptoms. While pain constitutes one of the most common adverse physical side effects of medical treatment reported by breast cancer patients, the most prevalent psychological reason they seek psychological help for is depressive symptoms (Costa, Monteiro, Queiroz, & Gonçalves, 2017; Kroenke et al., 2009). The comorbidity of depression and pain in women with breast cancer makes the treatment of both more challenging (Edwards et al., 2016; Gureje, 2008). Through clinical case discussions, we will explore how similar difficulties of female breast cancer patients can be addressed from different third-wave approaches, and identify where their conceptualization and treatment priorities align and where they differ in emphasis. Audience members will also be invited to provide additional cases for discussion, as time allows.

Educational Objectives:

1. Conduct a case conceptualization based on third-wave approaches for female breast cancer patients who encounter depressive symptoms and pain.

2. Design a treatment plan based on third-wave approaches for female breast cancer patients who encounter depressive symptoms and pain.

3. Identify where the conceptualization and treatment priorities of different third-wave approaches align and where they differ in emphasis.

**96. Group Acceptance and Commitment Therapy for psychosis: recovery and connection across cultures**

Panel - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Didactic presentation, Literature review, Original data*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Psychosis

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Eric Morris, Ph.D., La Trobe University

Discussant: Louise Johns, DPhil, Oxford Health NHS Foundation Trust and University of Oxford

Emma O'Donoghue, DClinPsych, South London & Maudsley NHS Foundation Trust

Helen Wood, DClinPsy, UPMC Western Psychiatric Hospital

Julia Nicholls, DClinPsy, Alfred Health

Ellie Newman, DClinPsy, Alfred Health and Peninsula Health, Melbourne Australia

Janette Symes, RMHN, RN, Auckland District Health Board

Pramila Lala, PGDPsych(Clin), Auckland District Health Board, New Zealand

Over the last decade Group ACT has been developed to support the personal recovery and wellbeing of people with psychosis.

Beginning as a way to engage young people with early psychosis in South London (UK) (O’Donoghue, Morris, Johns & Oliver, 2018), the “ACT for Psychosis Recovery” protocol is impactful (Johns et al., 2016; Jolley, Johns et al., 2020) and has been adapted across many settings. Practitioners from the UK, Europe, Australia, New Zealand, and the USA have created versions to engage people with psychosis and caregivers, learning from participants about what works. Recent adaptations have included online groups (Wood et al, 2020).

This international panel will discuss the current state of Group ACT for Psychosis:

* What have been the panellists' experiences in adapting the ACT protocol for their communities?
* What adaptations have helped to engage participants from culturally-diverse backgrounds?
* What are effective ways of training facilitators, particularly practitioners without ACT backgrounds, or peer facilitators?
* How can we effectively build in evaluation of these groups?
* What works for online groups?

Educational Objectives:

1. Describe an Acceptance and Commitment Therapy group approach to engaging people with psychosis

2. Compare approaches to adapting ACT for psychosis across cultures.

3. Discuss ideas for adapting group ACT for online sessions.

**97. Honing your ACT-skills with peers: An experiential introduction to the Portland model of peer consultation**

Workshop - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *None of these*

Categories: Supervision, Training and Dissemination, Professional Development, Peer-to-peer learning, Deliberate skills development, Experiential learning, Community building, Portland model, Peer consultation

*Target Audience: Beginner, Intermediate, Advanced*

Valerie Kiel, M.Sc., Mondriaan & Private practice

Manuela O'Connell, Lic., Private Practice, Universidad Favaloro

Peer-to-peer learning can be an effective, low-cost, and fun way to practice your ACT skills with peers. Since a couple of years, the "Portland Model" for peer consultation (Thompson, Luoma, Terry, LeJeune, Guinther & Robb, 2015) has been growing in popularity within the ACBS community. It describes a format for peer-led ACT consultation that emphasizes experiential learning and skills building over intellectual discussions. In this workshop, you will be introduced to the model’s key components around experiential skills building, which is at the heart of the Portland model. During breakout sessions, you and your small group will be guided step-by-step to create a learner’s friendly environment that is inclusive of all group members - regardless of level of experience. You will walk away with a clear idea how to create a context that facilitates experiential, skills-focused, and emotionally safe learning amongst peers. If you plan to set up your own ACT peer consultation group (F2F or online), make sure to join us and learn all you need to get going. -- [English and Spanish options]

Educational Objectives:

1. Describe the distinctive features of the Portland Model of Peer Consultation.

2. Explain the benefits and challenges of experiential peer consultation.

3. Explain how to use the structure (followed in the small group work or the session demonstration) to set up a (face-to-face or online) peer consultation group.

**98. Clinical Behavior Analysis for Behavioral Newbies: Intervening on Context, Behavior, and the Psychological Present**

Workshop - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Clinical Behavior Analysis (CBA), ACT

*Target Audience: Beginner, Intermediate*

Michael May, M.A., LPCC, Compassionate Psychological Care, LLP

Andrew Carr, Ph.D., VA Sierra Nevada Health Care System

How do you increase the precision, scope, and depth of your psychotherapy? That is the question. In this workshop, we aim to translate the world of clinical behavior analysis (CBA) through the lens of Acceptance & Commitment Therapy (ACT). Participants will learn to assess contextual control of behavior and to intervene so that desired behavior generalizes beyond the consulting room. This workshop will help psychotherapists without behavioral background or whom are less familiar with behavior analytic principles. As two clinicians who stumbled into CBA, we know how strange this world can be. We hope to discuss a simple set of practices and frameworks to help others translate their work into CBA principles. By the end of this workshop, participants will gain familiarity and skill with behavior analytic principles in psychotherapy.

Educational Objectives:

1. Identify and demonstrate CBA methodology of assessment and treatment in psychotherapy.

2. Identify contingencies (behavior-function-context).

3. Identify flexible and inflexible responding.

**99. Dancing with the Elephant: Using the ACT Matrix to Guide Conversations about Race**

Workshop - Saturday, 26 June (11:45 AM - 1:15 PM)

Components: *Conceptual analysis, Experiential exercises, Role play*

Categories: Functional contextual approaches in related disciplines, Organizational behavior management, Diversity, Equity & Inclusion

*Target Audience: Beginner, Intermediate*

Nasiah Cirincione-Ulezi, Ed.D., BCBA, Pivot 2 Inclusion

Scott Herbst, Ph.D., BCBA, Pivot 2 Inclusion, LLC

Upon meeting someone new, race is one of the first things people notice. Despite that, 63% of white, 50% of black, and 43% of Hispanic people surveyed reported they mostly or always only have conversations about race with people of the same race (Pew Research, 2019). We conceptualize this as a demonstration of bias. At the same time, race and ethnic inequality was ranked as one of the most important issues by voters in the United States’ 2020 election. Meaningfully addressing this issue requires conversation, and yet data suggest those conversations aren’t happening frequently across racial delineations. One possible reason for this bias is the discomfort that goes along with speaking about such a charged topic. In this workshop, we’ll work with the ACT Matrix (Polk & Schoendorf, 2016) to explore what stops us from having conversations about race, the impact that has on action, experience, and relationships, and practice having risky conversations from a place of commitment and values, with an emphasis on creating diverse workspaces.

Educational Objectives:

1. Define bias and identify one area where their own behavior shows bias.

2. Explain how experiential avoidance contributes to behavior that shows bias.

3. Prepare to have values-based conversations about race and identify the value in dialogue.

**100. Mindfulness and acceptance based approaches for psychosis: current evidence and future directions**

Symposium - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Original data*

Categories: Clinical Interventions and Interests, Psychosis

*Target Audience: Intermediate*

Chair: Lyn Ellett, DClinPsy, Ph.D., Royal Holloway, University of London

Discussant: Joe Oliver, Ph.D., University College London

Stacy Ellenberg, M.S., Brown University

Eric Morris, Ph.D., La Trobe University

Marilyn Cugnetto, Ph.D., The Royal Melbourne Hospital

Roger Vilardaga, Ph.D., Duke University

Jess Kingston, BSc., M.Sc., Ph.D., DClinPsy, Royal Holloway, University Of London

In this symposium, we present the latest evidence from our international research groups on mindfulness and acceptance based therapies for psychosis. The first talk will present the findings from a pilot RCT of ACT for inpatients, examining feasibility, acceptability and preliminary effectiveness. The second talk presents the results from an evaluation of an ACT group programme for recovery from psychosis. The third talk presents the findings from a secondary analysis of an RCT evaluating the mediational effect of engagement with an ACT-based smoking cessation smartphone application for adults with severe mental illness. The fourth talk presents the findings of a pilot RCT of group mindfulness therapy for people with psychosis, and the fifth talk presents data about harm in mindfulness and acceptance based therapies for psychosis from published randomised controlled trials, and provides recommendations for improving reporting practices. Future research directions in this field will also be considered.

* Pilot Randomized Controlled Trial Testing the Implementation and Effectiveness of Acceptance and Commitment Therapy for Inpatients with Psychosis

Stacy Ellenberg, M.S., Binghampton University

Ivan W. Miller, Ph.D., Alpert Medical School of Brown University and Butler Hospital

Brandon A. Gaudiano, Ph.D., Alpert Medical School of Brown University, Butler Hospital and Providence VA Medical Center

Inpatients with psychotic disorders in an acute psychiatric hospital were randomized to treatment as usual plus Acceptance and Commitment Therapy for Inpatients (ACT-IN; n=24) vs supportive therapy (ST) (n=24). Both conditions received individual and group psychotherapy during inpatient plus follow-up phone sessions during the first month post-discharge. Patients were assessed at hospital baseline, discharge, and at 1, 2, and 4 months post-discharge. We measured treatment feasibility, acceptability, and the preliminary effectiveness of ACT-IN in preparation for a future full-scale clinical trial. Results showed that ACT-IN was feasible to deliver with fidelity by routine hospital staff. We were able to recruit patients as planned, and patients reported higher satisfaction with ACT-IN vs ST. Both groups showed significant improvements in symptoms and functioning from baseline through 4 months. Rehospitalization rates for patients receiving aftercare in the ST condition were 47% vs only 17% in the ACT-IN condition. Modifications to the ACT-IN protocol and training procedures based on lessons learned from conducting the trial will be discussed. The next step is to conduct a fully powered effectiveness-implementation trial.

* Group ACT for Recovery from Psychosis: Process of and Results from Evaluation of a Promising Psycho-social Intervention in a Public Sector Setting

Eric Morris, Ph.D., La Trobe University & NorthWestern Mental Health, The Royal Melbourne Hospital

Marilyn Cugnetto, La Trobe University & NorthWestern Mental Health, The Royal Melbourne Hospital

Eliot Goldstone, NorthWestern Mental Health, The Royal Melbourne Hospital

Jacinta Clemente, NorthWestern Mental Health, The Royal Melbourne Hospital

Jesse Gates, NorthWestern Mental Health, The Royal Melbourne Hospital

Lauren Kirkwood, La Trobe University

John Farhall, La Trobe University

Personal recovery from psychosis is a framework for mental health service delivery in several countries. Group Acceptance and Commitment Therapy (ACT) is a psycho-social intervention that shows promise in cultivating personal recovery among adults living with psychosis. We adapted and implemented the original group ACT for psychosis program to meet the needs of delivery in Australian public mental health services. This paper first describes the phases of the evaluation of the adapted 8-session group in a public sector setting as well as the multiple methods of evaluation used. We then report from each phase of our evaluation of the ‘Recovery ACT for Psychosis’ group program from an uncontrolled, mixed-methods, single-group study that assessed the feasibility, acceptability, and preliminary effectiveness of the group and the feasibility and acceptability of its evaluation, to the development and initial qualitative and quantitative data from the multi-agency controlled trial that is actively recruiting. Reflections on the conduct of evaluation of a promising contextual-behavioral intervention in public sector settings will be shared.

* Engagement with a digital therapeutic for smoking cessation designed for persons with
* psychiatric illness fully mediates smoking outcomes in a randomized controlled trial

Julia Browne, Ph.D., Geriatric Research, Education and Clinical Center, Durham VA Health Care System

Tate F. Halverson, M.AUniversity of North Carolina at Chapel Hill, Durham VA Health Care System

Roger Vilardaga, Ph.D., Duke University

Understanding the behavioral mechanisms of change of digital therapeutics is critical to optimize their development. Counts, time, and frequency of engagement with digital content is arguably a core mechanism of change of these interventions. The purpose of this study was to evaluate the mediational effect of engagement with a smoking cessation application designed for adults with psychiatric disorders. This study was a secondary analysis of an RCT of 62 adults with serious mental illness who were randomized to receive either an ACT smartphone application (Learn to Quit) or a smartphone application developed by the National Cancer Institute (QuitGuide). Engagement was captured as: (1) counts of interactions with the app content/features, (2) use duration, and (3) frequency. The main outcome was cigarette reductions over four months. Counts of application interactions but not duration or frequency fully mediated reductions in cigarettes per day in the Learn to Quit application but not in QuitGuide. Results suggest that one of the mechanisms of action of the Learn to Quit device, engagement with ACT-based content, functioned as intended.

* Group Mindfulness-based therapy for individuals experiencing persecutory delusions: a pilot randomised control trial.

Lyn Ellett, DClinPsy, Ph.D., Royal Holloway, University of London

Eryna Tarant, Surrey and Borders NHS Foundation Trust

Christos Kouimtsidis, Surrey and Borders NHS Foundation Trust

Jessica Kingston, DClinPsy, Ph.D., Royal Holloway, University of London

Laura Vivarelli, Surrey and Borders NHS Foundation Trust A Mendis, University of Surrey

Paul Chadwick, Ph.D., University of Bath

Research indicates that current psychological therapies are more effective for hallucinations than for delusions, highlighting a need to improve psychological interventions for those experiencing persecutory delusions. This presentation reports on a single-centre pilot randomised controlled trial examining the effects of group mindfulness on depression in people with persecutory delusions. 27 people with persecutory delusions were randomised to either group mindfulness therapy alongside treatment as usual (n=14) or treatment as usual alone (n=13). Participants completed measures of depression (primary outcome), delusional distress, mindfulness, worry and rumination at baseline and post intervention. The study achieved its aim to retain a minimum of 12 participants per arm and the study retention rate was high (96%). All participants attended at least 50% of therapy sessions, there were no therapy drop outs, and therapy satisfaction was high. A small effect size on the primary outcome (depression) was found. The study showed group mindfulness therapy to be feasible and acceptable, with a small effect size found on depression. A fully powered definitive RCT is now warranted.

* Are mindfulness and acceptance based therapies for psychosis harmful?

Lyn Ellett, DClinPsy, Ph.D., Royal Holloway, University of London

Paul Chadwick, Ph.D., University of Bath

There is increasing interest in the potential harmful effects of mindfulness-based interventions (MBIs). MBIs for psychosis have been slow to develop, precisely because of concerns that people with psychosis are particularly vulnerable to harmful effects that might arise from mindfulness practice. In this talk, I will present data about harm in MBIs for psychosis from published randomised controlled trials. The findings suggest that there is confusion and inconsistency in how harm is monitored and reported in MBIs for psychosis. Recommendations will be outlined to help build a firmer evidence base on potential harm in mindfulness for psychosis research.

Educational Objectives:

1. Describe the current evidence for mindfulness and acceptance based therapies for psychosis.

2. Describe key methodological issues and future research directions in this field.

3. Explain how harm has been monitored and measured in mindfulness and acceptance based therapies for psychosis

**101. Processes of Psychological Flexibility in the Development and Maintenance of Disordered Eating Symptoms**

Symposium - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Original data*

Categories: Behavioral medicine, Other, Eating disorders

*Target Audience: Beginner, Intermediate*

Chair: Guadalupe San Miguel, Utah State University

Discussant: Adrienne Juarascio, Ph.D., Drexel University

Jade Campbell, University of Louisiana at Lafayette

Maria Koushiou, Ph.D., University of Nicosia, Cyprus

Jennifer Barney, M.S., Utah State University

Ashley Moskovich, Ph.D., Duke University Medical Center

Eating disorder risk factors (e.g., body image distress) and behaviors (e.g., disordered eating) are associated with significant physical and mental health impairments and are notoriously difficult to treat. Recent theoretical conceptualizations of eating and weight related disorders as “illnesses of psychological inflexibility” have led to increased interest in the use of acceptance and mindfulness-based interventions targeting psychological flexibility for use with individuals struggling with such problems. The current symposium highlights recent research examining the role of psychological flexibility/related psychological processes (e.g. cognitive fusion) in the risk and maintenance of disordered eating within various populations. Specifically, this symposium explores the relationship between psychological flexibility processes and eating disorder risk, providing a framework for conceptualization. These relationships are then explored further over the course of two clinical interventions.

* Body Image Flexibility as a Moderator in the Relationship Between Body Image Disturbance and Instagram Exposure

Jade Campbell, University of Louisiana at Lafayette

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Body image is a multidimensional concept encompassing both body-related experiences (i.e., thoughts, feelings, perceptions) and overt body-related behaviors. Body image disturbance occurs when the body image experience elicits distress and evokes problematic behaviors. These two aspects of body image disturbance, however, do not always co-occur. Body image flexibility, or the tendency to respond with mindful acceptance and meaningful engagement to body image experiences, may serve as a buffer such that distress associated with body image does not always result in problematic behavior change. The traditional sociocultural model suggests peers, family, and media as primary influences on body image disturbance. These sociocultural factors converge on social media, the use and content of which have been implicated in modern body image disturbance. Using questionnaires and participants’ feedback regarding their Instagram feeds, this study will examine body image flexibility as a buffering moderator of the relationship between social media and body image disturbance. This talk will present the current results and data of this study as well as the need for further research will also be discussed.

* An experimental examination of the emotional experience of females at high risk for eating disorders in general and pathology-specific contexts

Maria Koushiou, Ph.D., University of Nicosia

Maria Karekla, Ph.D., University of Cyprus

Difficulties in emotional processing has long been implicated in the development of Eating Disorders (ED). However, the vast majority of the existing literature is theoretical or self-report, with only few studies investigating the somatic-affective experience of individuals at high ED risk, under experimental conditions. The aim of the present study was to examine the physiological (Heart Rate and Skin Conductance Levels) and subjective emotional experience of females aged 14 to 24 years old at ED high vs. low risk in response to unpleasant affect, induced via affective film clips with general and Eating Disorders (EDs) – specific content. High-risk participants evidenced higher Heart Rate (irrespective of their Body Mass Index) across experimental conditions. This preliminary result suggests that higher cardiac response may be a premorbid condition in individuals at risk for an ED that makes their emotions overwhelming or that creates a hyperawareness of their body. Findings point to the importance of understanding the biobehavioral mechanisms underlying the development of EDs and are further discussed in light of the psychological inflexibility framework.

* Examining the Relationship Between Body Image Related Cognitive Fusion and Eating Disorder Symptoms in a Clinical Sample

Jennifer L. Barney, M.S., Utah State University

Tyson S. Barrett, Ph.D., Utah State University

Tera Lensegrav-Benson, Ph.D., Avalon Hills Eating Disorder Specialists

Benita Quakenbush, Ph.D., Avalon Hills Eating Disorder Specialists

Michael P. Twohig, Ph.D., Utah State University

Eating disorders are illnesses characterized by persistent disturbance of eating or eating-related behaviors (e.g., rigid control of food intake) and cognitions (e.g., over-valuation of weight and shape). Individuals diagnosed with eating disorders are likely to be particularly susceptible to cognitive fusion related to body image, such that their negative thoughts about food and their body dictate their eating behaviors instead of interoceptive hunger and fullness cues. The current study examines the mediating role of body image related cognitive fusion in the relationship between intuitive eating behaviors and eating disorder symptom severity among adolescent and adult women (N&#3f175) admitting to residential eating disorder treatment. Changes in body image related fusion over the course of treatment will then be presented and examined as a predictor of eating disorder symptom severity at discharge. We will then discuss implications for treatment and methods for targeting body image related fusion utilizing an ACT-based framework with eating disorder clients.

* Exploring Illness Identity as a Unique Treatment Target for Maladaptive Eating and Weight Control Behaviors Among Individuals with Type 1 Diabetes: Preliminary findings from an open trial of iACT

Ashley Moskovich, Ph.D., Duke University Medical Center

Carly Onnink, B.S., Duke University Medical Center

Rhonda Merwin, Ph.D., Duke University Medical Center

Maladaptive eating and weight control behaviors among individuals with type 1 diabetes (T1D) increase the risk of diabetes-related complications and early death. Conventional treatments for anorexia and bulimia nervosa are largely ineffective for individuals with T1D, suggesting the need to tailor interventions to the unique context of living with diabetes. iACT is a novel ACT-based app-assisted treatment protocol designed to target the way individuals relate to T1D (e.g., reducing overattachment or aversion) to decrease aberrant eating and weight control behaviors and improve glycemic control (Merwin, Moskovich et al., 2021). The current paper describes an open trial of iACT (N&#3f20) and presents unpublished findings on changes in illness identity, or the degree to which diabetes is integrated into one’s sense of self (Illness Identity Questionnaire: Engulfment: p=.047, Acceptance: p=.009, Enrichment: p=.03, Rejection: p=.15; Cohen’s d: 0.41-0.81), and correspondence with maladaptive eating and weight control behaviors at baseline and end-of-treatment. We provide a theoretical frame for the intervention and outcomes from a Relational Frame Theory (RFT) perspective and discuss how these findings may inform additional treatment development.

Educational Objectives:

1. Describe body image and maladaptive eating behaviors within a psychological flexibility framework.

2. Explain preliminary analyses examining the role of body image inflexibility and related processes in the risk/maintenance of maladaptive eating and weight related behaviors.

3. Synthesize findings and discuss implications for future research and treatment of maladaptive eating and weight related concerns.

**102. Loneliness, Social Interactions and Couples: Empirical Investigations and Interventions**

Symposium - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Behavioral medicine, FAP, Cardiovascular health, Social anxiety, Communication anxiety, Psychological flexibility, Self-compassion, University students, Sexuality

*Target Audience: Beginner, Intermediate*

Jacob Lewis, Morehead State University

Daniel Maitland, Ph.D., Morehead State University

Simone Gorinelli, M.A., University of Jyväskylä

Olivia Gratz, M.S., Western Michigan University

Fabiana Ramos, Ph.D., Universidade Federal do Espírito Santo

Mavis Tsai, Ph.D., University of Washington; ACL Global Project

Social support is central to mental and physical health and well-being, and the inverse, loneliness and isolation is associated with negative health outcomes. Papers in this symposium report empirical studies of loneliness, social and couple interactions. The first paper examines the relationship between experiential avoidance and fear of intimacy and social interactions in daily life. The second paper presents data on the link between loneliness and biomarkers of cardiovascular disease. The third paper reports on a virtual reality intervention for social anxiety in university studies. The fourth paper reports on the use of FAP to teach social skills to adolescents with high functioning autism. A final paper reports on the outcomes of online FAP for American and Brazilian couples during the pandemic.

* Experiential avoidance and fear of intimacy in social interactions and loneliness

Jacob A. Lewis, Morehead State University

Daniel Maitland, Ph.D., Morehead State University

Loneliness has become such a problem in the United States, that even before the COVID-19 pandemic, the USA’s surgeon general had warned of the epidemic of loneliness (Murthy, 2016). Even when accounting for other health behaviors, loneliness increases the likelihood of early death by 26% (Holt-Lunstad et al., 2015). Previous research indicates that experiential avoidance and fear of intimacy are associated with loneliness and resulting psychological distress. However, little is known about how these variables impact daily social interactions and the resulting impact on loneliness and psychological well-being. This experiencing sampling study examined the extent to which social interactions were influenced by experiential avoidance and fear of intimacy, and how individuals evaluated their loneliness and well being as a function of those interactions. Participants completed 14 days of surveys that were delivered three times a day related to variables in this study and specific aspects of their social interactions. The discussion will focus on how the current study can inform understanding the development and treatment of loneliness.

* The role of contextual behavioral therapy targets in biomarkers of cardiovascular disease associated with loneliness

Daniel Maitland, Ph.D., Morehead State University

Loneliness has an impact on mortality equal to that of cigarette smoking (Holt-Lunstad et al., 2010). Despite this finding, the mechanism by which loneliness impacts mortality remains unclear. Given that researchers have found a 29% increase in the risk of cardiovascular disease (CVD) for individuals with poor relationship quality (Valtorta et al., 2016), CVD may be one of the mechanisms by which loneliness impacts health. Pathways between contextual behavioral science targets, CVD (Hildebrandt & Hayes, 2012), and loneliness (Maitland, 2020) have been suggested but never experimentally investigated. The current study presents findings from an experimental exploration of a contextual behavioral account of intimate relationships (Kanter et al., 2020) with individuals across levels of loneliness. The outcomes of interest in the current study were a biomarker of cardiovascular disease (respiratory sinus arrhythmia) and feelings of connection with the research assistant. The moderating effect of experiential avoidance and fear of intimacy will also be presented. The discussion will focus on the ramifications of the current study as it relates to psychosocial approaches to cardiovascular risk reduction.

* Psychological Processes in the Social Interaction and Communication Anxiety of University Students: The Role of Self-Compassion and Psychological Flexibility

Simone Gorinelli, M.A., University of Jyväskylä

Ana Gallego, M.A., University of Jyväskylä

Päivi Lappalainen. Ph.D., University of Jyväskylä

Raimo Lappalainen, Ph.D., University of Jyväskylä

University students often experience difficulties in social interactions. The current study aimed to examine the role of self-compassion and psychological flexibility in social interaction and communication anxiety among 46 university students. Participants took part in an intervention for communication anxiety using virtual reality. The results from the pre-measurements showed that high social interaction (SIAS) and communication anxiety (PRCA-24) was associated with low levels of self-compassion (SCS-SF, r = -0.59 and r = -0.47 respectively) and psychological flexibility (CompACT, r = -0.47 and r = -0.35 respectively). Regression analyses suggested that SCS-SF self-judgment and CompACT openness to experiences explained 14 - 45% of the anxiety, with self-judgment remaining as crucial predictor when investigating these components together. This suggests that, when training students to manage their anxiety in social situations, attention should be given to promoting self-compassion and psychological flexibility, a non-critical and accepting attitude towards one’s thoughts, emotions and negative interpretations. Preliminary results from the virtual reality intervention will also be discussed.

* Using Functional Analytic Psychotherapy to Develop Social Skills in Adolescents with High Functioning Autism

Olivia Gratz, M.S., Western Michigan University

Scott Gaynor, Ph.D., Western Michigan University

Social skill deficits are particularly prevalent in individuals diagnosed with autism spectrum disorder. Deficiencies in social skills or excess inappropriate social behaviors are associated with negative interpersonal, socioemotional, psychological, educational, and vocational outcomes. The existing social skills literature typically (a) does not identify the function for social skill deficits or excesses in inappropriate social behavior, (b) includes the nomothetic identification of target behaviors, and (c) lacks evidence for the generalization of treatment effects. The purpose of the current study was to evaluate whether concentrated Functional Analytic Psychotherapy (FAP), implemented one to two times per week for eight weeks, created demonstrable improvements in the participants’ social skills in session and their daily lives. The researchers hypothesized that the implementation of FAP would result in improvements in participants’ social skills both in the therapeutic session as well as in their daily lives. The researchers also argued that the scores on the parental and participant scales would represent social skill improvements from pre-baseline and post-baseline to post-treatment.

* Functional Analytic Psychotherapy (FAP) Brief Online Intervention with American and Brazilian Couples during COVID-19 pandemic

Fabiana Pinheiro Ramos, Ph.D., Universidade Federal do Espírito Santo

Mavis Tsai, Ph.D., University of Washington

Verônica Haydu, Universidade Estadual de Londrina

Elizeu Borloti, Universidade Federal do Espírito Santo

Savana Pires, Universidade Federal do Espírito Santo

Cristiane Gandra, Universidade Federal do Espírito Santo

Joseuda Lopes, Private Practice

Ana Paula Moraes, Instituto Brasiliense de Analise do Comportamento

The COVID-19 pandemic has adversely impacted people's lives, including their marital relationships. A brief online intervention based on the FAP Awareness, Courage and Love (ACL) Model was implemented to promote closeness between couples during the pandemic. Couples were randomized into either the experimental (ACL protocol) or control (movie) groups for a single 2-hour online group session. They completed two scales (Couple Assessment of Relationship Elements (CARE) and Inclusion of Others in Self (IOS) before and after the session and at one-week follow-up. Of 110 participants in the final sample, 61 were from USA and 49 from Brazil. Statistical analyses of the CARE and IOS scales demonstrated a significant effect of the ACL versus the movie condition post-session and at one-week follow-up. Brazilians had a significantly lower average on CARE than USA participants, but there were no differences in the IOS data. We concluded that the brief ACL intervention increased the quality of couples’ relationships and their closeness.

Educational Objectives:

1. Describe the link between loneliness and physical and emotional well-being.

2. Identify how fear of intimacy may impact social interactions in daily life.

3. Outline results of novel interventions to improve social interactions.

**103. Finding Your Home in ACBS**

Panel - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Didactic presentation, Experiential exercises*

Categories: Professional Development, Leadership, Community, DEI

*Target Audience: Beginner, Intermediate, Advanced*

Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Jill Stoddard, Licensed Psychologist, The Center for Stress and Anxiety Management

Miranda Morris, Ph.D., True North Therapy and Training

Lisa Coyne, Ph.D., Harvard Medical School

Manuela O'Connell, Lic., Private Practice, Universidad Favaloro

Rikke Kjelgaard, M.Sc., ACT Danmark / Human ACT Sweden

Ching-yee Lam, MPhil, MNurs, RN, The Hong Kong Polytechnic Univeristy; The Open University of Hong Kong

Suzy Adel, M.A., Private Practice

Dayna Lee-Baggley, Ph.D., Dalhousie University

What kind of an ACBS community would you most want to create? The goal of this panel is lofty—to help shape the entire culture of ACBS.

In this panel, individuals in various levels of ACBS leadership and service will speak of our own journey to find our place within ACBS. We will share our stories, some of the barriers we faced and what/who helped us respond to those barriers. We will also share our hopes for the future of our organization and how our plans for creating the ACBS of our dreams (hint: It involves YOU!).

If culture is created, then we all have a role to play in creating the culture of ACBS. What will your role be and how can we as a community help you step into that role? This panel will be an open exploration. Anyone who is more interested in raising others up than tearing them down, who is invested in making this community kinder, more inclusive, and more effective are welcome to join in our discussion.

**104. Increasing Cultural Responsiveness in Work with Latinx Caregivers of those with Anxiety and Autism Spectrum Disorders**

Panel - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *None of these*

Categories: Clinical Interventions and Interests, ACT with Latinx families

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Sebastian Garcia-Zambrano, M.S., BCBA, Southern Illinois University

Luisa Canon, Psy.D., BCBA-D, ACT to Thrive

Natalia Baires, Ph.D., BCBA-D, Southern Illinois University

I Patricia Guerrero-Wickham, M.Sc., M.A., BCBA, Early Interventions & Parent Support

Carlos Rivera, Ph.D., New England Center for OCD and Anxiety

Mariela Castro-Hostetler, M.S., BCBA, LBA, University of Nevada, Reno

Behavioral parent training is a fundamental aspect during treatment of children with Autism Spectrum and Anxiety disorders. However, practitioners often find that rule governed parenting represents a significant challenge to the effectiveness of the intervention. An approach to addressing this challenge and enhancing treatment outcomes is Acceptance and Commitment Therapy (ACT). ACT is a promising treatment approach for caregivers of individuals with ASD and anxiety disorders. However, the integration of ACT within behavior-analytic and psychological services may be insufficient, as values within the cultural context are seldom considered. In an effort to increase cultural responsiveness, the panel will inform on the awareness, knowledge, and experience of professionals that have primarily worked with Latinx caregivers. Specifically, the effects of ACT with Latinx caregivers will be explored from a cultural perspective. Panelists will discuss how others who work with Latinx caregivers may overcome barriers that topographically resemble non-adherence but are in fact behaviors that align with Latinx cultural values. Recommendations for adjusting treatment and methods to increase quality services for Latinx caregivers will be provided.

Educational Objectives:

1. Discuss the current state of the literature in culturally adapting behavior-analytic and psychological treatment approaches for the Latinx community.

2. Identify behaviors to assist in overcoming barriers that topographically resemble non-adherence but are in fact behaviors that align with Latinx cultural values.

3. Discuss recommendations to adjust elements of treatments to be sensitive to the work with Latinx caregivers.

**105. CBS Interventions for Underserved Populations: When Client Context Selects Novel Treatment Approaches**

Panel - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation*

Categories: Clinical Interventions and Interests,

*Target Audience: Beginner, Intermediate*

Chair: Thomas Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Giovambattista Presti, M.D., Ph.D., University of Enna "Kore"

Felicity Brown

Beate Ebert, Dipl.-Psych., Private Practice

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Hannah Bockarie, B.A., Commit and Act Foundation

Sook Huey Lee, M.A., UCSI University

CBS interventions are not one size fits all. Although we may agree on central processes, the way to generate flexibility around them will vary depending on the learning histories, cultures, and relationships shared between therapist and client. In this panel, experts on the application of CBS approaches with survivors of gender-based violence in West Africa, refugees and others living in low-resource settings, people from Asian nations living in Western nations, and children with intellectual and developmental disabilities will discuss treatments they are using and offer recommendations for practice and future research.

Educational Objectives:

1. Identify at least two population variables that lead to the need for cultural adaptation of CBS strategies when working with individuals from diverse backgrounds.

2. Describe task-sharing and train-the-trainer approaches to disseminating CBS interventions in developing nations.

3. Contrast idioms of distress that resonate with clients from one group but fall flat on those from another background.

**106. Contextual Behavioral Science and Atlas Hugged: A Meta-conversation**

Panel - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Conceptual analysis, Didactic presentation*

Categories: Evolution, Prevention and Community-Based Interventions, RFT of Storytelling

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Stuart Libman, M.D., PLEA

Discussant: David Sloan Wilson, Ph.D., Binghamton University

Steven Hayes, Ph.D., University of Nevada, Reno

Lisa Coyne, Ph.D., Harvard Medical School

Louise Hayes, Ph.D., Institute for Mindful Action

David Sloan Wilson's novel, Atlas Hugged, is an evolution science-based vision of a future analogous to what many ACBS members are working toward in the real world with ACT and RFT. Written as a sequel and antidote to Ayn Rand's "Greed is Good" novel, Atlas Shrugged, it can also be compared to B.F. Skinner's Walden Two, going beyond Skinner's utopian vision of behavior science, much as RFT and ACT go beyond Skinner's view of language to explain the nature of symbolic thought and evoked behaviors. As a symbolic meaning system in its own right, Atlas Hugged provides a vehicle for introducing the major concepts of RFT and ACT through a compelling story. Join Wilson and a panel of ACBS members for the perspectives they will bring to an entertaining, self-referential meta-conversation. Reading Atlas Hugged first is recommended but not necessary. Please note that Atlas Hugged is gifted, not sold, and available only at https://atlashugged.world/. We also recommend viewing the online conversation between David Sloan Wilson and Stuart Libman that was recorded this past February (https://thisviewoflife.com/tvol-podcast/).

Educational Objectives:

1. List the 3 main component processes of evolution science.

2. Describe how ACT can be viewed as an evolutionary model.

3. Explain what is meant by RFT as “an evolutionary symbotype”.

**107. Acceptance and Commitment Therapy for Managing Cravings and Addictive Behaviors**

Workshop - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Role play*

Categories: Behavioral medicine, Clinical Interventions and Interests, Addictions

*Target Audience: Beginner*

Megan Kelly, Ph.D., University of Massachusetts Medical School

Maria Karekla, Ph.D., University of Cyprus

The application of Acceptance and Commitment Therapy (ACT) for the treatment of many problems where craving is a core feature is growing (e.g., substance use, tobacco use, overeating). Individuals presenting with addictions often have difficulty managing cravings, although this is an inevitable aspect of addictions. Cravings are associated with substantial distress, functional impairment, and low quality of life. This workshop presents practical strategies based in ACT to help individuals to cope and manage cravings at the core of common addictions. The workshop will also present the latest research in ACT for dealing and overcoming cravings, and examine the efficacy, the mechanisms, and processes of change of ACT for the treatment of craving-related problems. Concepts will be illustrated using live demonstrations, experiential exercises, metaphors, and worksheets. This workshop is designed to teach skills needed to explore ACT as an assessment model and intervention method for addressing cravings and addictions. It will be mostly experiential and will balance an understanding of the model with a personal connection with the issues raised in ACT, and with skill development.

Educational Objectives:

1. Describe the basic tenets and core processes of ACT as they apply to cravings and addictions.

2. Utilize experiential exercises, role-plays, and a variety of hands-on techniques to cultivate a direct experience with the ACT for cravings and addictions.

3. Describe how to use mindfulness, acceptance, experiential exercises, metaphors, and defusion techniques, to improve well-being in individuals with craving-related issues.

**108. MAPping for Now: Understanding Procrastination through an ACT Lens and Using the Mindful Action Plan to Address It**

Workshop - Saturday, 26 June (2:15 PM - 3:45 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Performance-enhancing interventions, Professional Development, Procrastination and Personal Performance

*Target Audience: Beginner, Intermediate*

DJ Moran, Ph.D., BCBA-D, Long Island University

Allison Levine, M.A., Long Island University, C.W. Post

Procrastination affects many people, and most of us struggle at some point with accomplishing meaningful work while also attending to other valued areas of Life. Whether writing a dissertation or a JCBS journal submission, writing weekly case notes or establishing an ACT clinic, or waking early for a gym visit or executing 4 months of marathon training, choosing to dedicate your time and efforts to a whole variety of important projects oftentimes is met with obstacles. This workshop has two components: 1) presenting The Mindful Action Plan (The MAP; Moran, 2014), a tool for overcoming barriers to committed action which blends ACT with performance management to guide you on your journey towards what matters most, and 2) conceptualizing the problem of procrastination through an ACT lens and offering ACT-based strategies, including the MAP, to combat it. Participants will utilize the MAP on their present to-do lists while gaining a deeper understanding of why these lists can overwhelm us to the point of inaction (and how to mindfully move through tasks we are reluctant to tackle).

Educational Objectives:

1. Describe how the principles and strategies of the Mindful Action Plan help to increase psychological flexibility and facilitate values-directed committed action.

2. Explain how procrastination is conceptualized through an ACT lens.

3. Describe how to use the MAP as its elements correspond to the ACT Hexaflex and principles of performance management, particularly when dealing with an overwhelming task list

**109. Análisis funcional de los patrones problemáticos de rumia y preocupación**

Workshop - Saturday, 26 June (2:15 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Relational Frame Theory, Trastornos emocionales

*Target Audience: Beginner, Intermediate, Advanced*

Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

En los últimos años se han desarrollado intervenciones breves de ACT centradas en desmantelar patrones disfuncionales de rumia y preocupación (o pensamiento negativo repetitivo). Más de 15 estudios clínicos han mostrado la aplicabilidad y eficacia de estas intervenciones breves en distintos trastornos emocionales bajo el nombre de RNT-focused ACT. Este tipo de intervención incluye una nueva forma de realizar el análisis funcional ligada a la comprensión de la rumia y preocupación a través de la Teoría del Marco Relacional. Este taller tiene como objetivo presentar esta forma de hacer el análisis funcional. En primer lugar, se presentará la conceptualización de la rumia y preocupación a través de la RFT y el modelo RNT-focused ACT. En segundo lugar, se realizará un ejercicio experiencial con el objetivo de que los asistentes realicen el análisis funcional de su propio comportamiento de rumia y preocupación. Finalmente, se presentará el análisis funcional de un caso a través del visionado de un vídeo.

Educational Objectives:

1. Describir los comportamientos de rumia y preocupación a través de la Teoría del Marco Relacional

2. Describir una secuencia lógica para realizar el análisis funcional de los patrones disfuncionales de rumia y preocupación

3. Discriminar las claves que debe introducir el terapeuta para amplificar el coste del patrón inflexible de rumia y preocupación.

**110. Sociocultural, Diversity, and Equity Issues and ACT/CBS**

Invited - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Original data*

Categories: Clinical Interventions and Interests, Theoretical and philosophical foundations, Cultural Competence, Equity, Diversity, Inclusion, Social Justice

*Target Audience: Beginner, Intermediate, Advanced*

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Our sociocultural context invisibly influences and shapes our perception, experiences, and meaning making process. This presentation will examine ACT through a cultural lens, including its strengths and limitations. At the clinical level, this will increase our capacity to deliver ACT more effectively to diverse populations. Many of the problems that we face are beyond the scope of individual intervention. We will also explore how ACT can be used to address sociocultural issues for marginalized or vulnerable populations, advance social justice, and promote equity. This includes an example of an online pandemic intervention that builds individual resilience while integrating social justice principles and collective empowerment.

Educational Objectives:

1. Identify sociocultural elements embedded in ACT.

2. Describe how to adapt ACT for diverse populations.

3. Develop an approach towards using ACT/CBS to address social justice and equity issues.

**111. The parent trap: Psychological flexibility, mindfulness, and observable behaviors among parents and caregivers: Children, Adolescents & Families SIG Sponsored**

Symposium - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Original data*

Categories: Clinical Interventions and Interests, Psychological flexibility, Parenting, Measurement

*Target Audience: Beginner, Intermediate*

Chair: Danielle Moyer, Ph.D., Oregon Health & Science University

Discussant: Evelyn Gould, Ph.D. BCBA-D LABA, Harvard Medical School

Adrienne Garro, Ph.D., Kean University

Tiffany Rochester, B.Psych., M.App.Psych(Clin), The Same Mountain; Three Waters Psychology Clinic

Yukie Kurumiya, Ph.D., BCBA-D, The Chicago School of Professional Psychology

Lindsay Antonsen, Oregon Health & Sciences University

Psychological (in)flexibility is a transdiagnostic process that encompasses subprocesses such as acceptance and mindfulness, and it is the primary target of acceptance and commitment therapy. Psychological flexibility has been explored as a global construct (Bond et al., 2011) and more specifically in various populations and conditions, including parenting (Ong et al., 2019). Psychological inflexibility in the context of parenting has been associated with negative parenting practices, as well as with psychopathology both in caregivers and their children (Cheron et al., 2009; Moyer & Sandoz, 2014). Interventions that target psychological inflexibility in parenting have effectively improved caregiver, family, and child functioning (Byrne et al., 2020; Casselman & Pemberton, 2014; Moyer et al., 2018). Together, this symposium will explore the role of psychological flexibility and related constructs, and the utility of acceptance and commitment therapy, for parent and caregivers. Individual presentations will highlight specific populations, including but not limited to parents of gender diverse youth, Japanese parents living in the U.S., and parents involved in high-conflict divorce. Measurement issues and clinical applications will be emphasized.

* The impact of parenting avoidance (IPA): A measure of psychological inflexibility in caregivers of transgender and gender diverse youth

Lindsay Antonsen, Oregon Health & Sciences University

Danielle Moyer, Ph.D., Oregon Health & Science University

Transgender and gender diverse (TGD) youth are at high risk for negative psychosocial and mental health outcomes (Patrick, 2020). One of the most robust and well-documented protective factors is the existence of supportive and affirming caregivers (Olson et al., 2016; Pariseau et al., 2019). Psychological (in)flexibility in the context of parenting is associated with outcomes among parents as well as indirectly among youth (Brassell et al., 2016; Polusney et al., 2011). No research to date has explored parenting flexibility in caregivers of TGD youth. Among existing measures of parenting flexibility, there is both overlap and divergence with regard to item wording, aspects of psychological inflexibility being measured, and relevancy to different aspect of parenting. Evidence is limited regarding which measure is most appropriate for specific populations or child age groups. This goal of the present study is to consolidate these measures into a single, brief measure of the impact of psychological inflexibility on parenting behaviors that is appropriate for caregivers of TGD youth. Measure development methods and preliminary data will be presented.

* Online Acceptance and Commitment Training Matrix for Japanese-Speaking Parents with Distress in the U.S. - Single Subject-Design Study

Yukie Kurumiya, Ph.D., BCBA-D, The Chicago School of Professional Psychology

Yors Garcia, Ph.D., BCBA-D, The Chicago School of Professional Psychology

Annette Griffith, Ph.D., BCBA-D, The Chicago School of Professional Psychology

Thomas Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Parental distress and coercive parent-child interactions are of major issues in our society. Cultural biases, stigma, and language barriers keep Asian-American parents and children away from mental and behavioral services. Behavior parent training (BPT) as part of applied behavior analysis (ABA) services are usually available to parents and children if their child has a diagnosis, but not for parents of children without diagnoses. Research in the area of parent-child interactions suggests a combination of BPT and acceptance and commitment training (ACT) as an effective preventative intervention alleviates parental distress and fosters positive parent-child interactions. However, limited research is available that examined the effectiveness of preventative ACT-based interventions for this population. Thus, the current study evaluated the effects of the individual ACT Matrix online training for Japanese-speaking distressed parents in the U.S., using a single-subject design. Specific dependent variables measured were value-driven behaviors, parental engagement in treatment, parental distress, and psychological flexibility. The results revealed that the ACT Matrix training was effective in improving all four dependent variables. Parents reported that the training was culturally sensitive, effective, and appropriate in the social validity questionnaire. Implications for incorporating ACT in ABA services as part of BPT will be discussed.

* The role of psychological flexibility in moving separated co-parents from high conflict litigation to collaborative co-parenting - is the dream too big?

Tiffany Rochester, B.Psych., M.App.Psych(Clin), The Same Mountain; Three Waters Psychology Clinic

It is co-parent conflict, and not divorce itself, that has the greatest potential to harm children, impacting on maladjustment across educational, psychological and social contexts, and persisting into adulthood (Lam, et al, 1997; Amato & Gilbreth, 1999; Bernardini & Jenkins, 2002). High conflict cases are often referred to therapists by family courts when divorcing spouses have been unable to resolve differences. This conceptual talk will explore the characteristics of high conflict co-parents (mutual high emotional reactivity; an inability to listen and empathize with the co-parent; inability to take responsibility for their role in the conflict; triangulation of others; and difficulties in differentiating the best interests of children) through the lens of psychological inflexibility. It will include case examples of how these issues present in therapy, the challenges for a treating therapist maintaining rapport with litigating parties, and present creative ways of applying an ACT approach to improve treatment gains in these difficult-to-treat cases. Expect a compelling and irresistible call to do more research in this area!

* Assessment of Parenting Mindfulness: Current Status and Future Directions

Adrienne, Ph.D., Kean University

Giuliana Stillo, M.A., Kean University

Debbie Chung, B.A., Kean University

Vanessa Vega, M.A., OTR, Kean University

This paper will explore current research and best practices related to assessment of parenting mindfulness. Studies indicate that higher parenting mindfulness is linked to reduced parenting stress (Bögels, Hellemans, van Deursen, Römer, & van der Meulen, 2014), healthier parenting styles (Lippold, Duncan, Coatsworth, Nix & Greenbert, 2015), and more positive parent-child interactions (Parent, McKee, Rough & Forehand, 2016). It is also associated with positive child outcomes, such as self-compassion and greater well-being (Moreira, Gouveia, & Canavarro, 2018). Presently, there are two main assessment tools for parenting mindfulness: the Interpersonal Mindfulness in Parenting Scale (IEM-P) (Duncan, 2007) and the Mindfulness in Parenting Questionnaire (MIPQ) (McCaffrey, 2015). This paper will explore applications of these two measures and consider challenges in measurement of parenting mindfulness. Although parenting mindfulness has research support as an independent construct (e.g., de Bruin et al., 2017), it is important to situate its assessment in the context of related variables such as dispositional mindfulness and self-compassion. This paper will consider this contextual assessment and its implications for future research and practice, including parenting interventions.

Educational Objectives:

1. Describe the unique implications of psychological flexibility and related constructs specifically in the context of parenting.

2. Describe the relationship between psychological flexibility and other psychosocial and behavioral outcomes among parents and their children.

3. Discuss clinical applications of acceptance and commitment therapy for parents and caregivers.

**112. ACT Functional Analysis and Treatment in ABA Settings: Working with Caregivers, Employees, and Athletes**

Symposium - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Conceptual analysis, Literature review, Original data*

Categories: Clinical Interventions and Interests, Organizational behavior management, Caregivers, Employees, Athletes

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Thomas Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Discussant: Giovambattista Presti, M.D., Ph.D., University of Enna "Kore"

Desirae Wingerter, BCaBA, LaBA, Florida Institute of Technology

Brooke Leuzinger, BCBA, Florida Institute of Technology

Célie Gay, M.A., FIT

In ABA settings, ACT is often employed by administering exercises that target each of the six repertoires associated with psychological inflexibility. This ensures that all the potentially rigid indirect-acting contingencies are addressed, but it is inefficient at best and possibly unnecessary. To date, no behavior analysts using ACT have investigated FA tools for uncovering the precise indirect-acting contingencies responsible for client distress and poor performance. Since the hallmark of ABA is both effective and efficient intervention, it is incumbent upon the ABA ACT community to design and evaluate FA tools consistent with those used elsewhere in ABA. These tools should be quick to implement and lead to strong outcomes by targeting only those repertoires for which an intervention is needed. In this symposium, three studies depict the uses of novel descriptive and analogue ACT FA procedures for use in ABA settings. Presenters will discuss the current and ongoing program of this emerging area of research.

* Brief ACT Functional Analysis in ABA with Parents and Caregivers

Desirae Wingerter, Florida Institute of Technology

Larisa Sheperd, Firefly Autism

Steven Gonzalez, South Texas Behavioral Institute

Thomas G. Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Caregivers of individuals with intellectual and developmental disabilities face unique challenges with a dearth of resources for managing their own psychological needs. ABA skills training helps to offset these challenges. Changing direct-acting contingencies and systematically teaching parent skills are necessary. However, these approaches may at times be insufficient because behavior analysts do not control the reinforcers that maintain caregiver behavior and because verbally competent adults engage in interfering private behavior. Moreover, covert behavior and contingencies maintaining it interfere with attempts to manage direct contingencies. In this study, we used direct contingency management (goal setting, prompting, differential reinforcement, and stimulus fading) with caregivers of individuals with autism. We then evaluated a novel ACT FA procedure and utilized the results to program individualized Acceptance and Commitment Training interventions. The ACT FA involved a alternating treatment design to evaluate the indirect acting contingencies affecting caregiver fidelity of ABA implementation. Subsequently, we used a non-concurrent multiple baseline across participant design to measure changes in parental values-driven behavior. Results and implications for ACT-based caregiver training and future research are discussed.

* Brief ACT Functional Analysis in ABA with Rock Climbers

Brooke Leuzinger, Florida Institute of Technology

Thomas G. Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Sports and fitness coaching involve teaching athletes to use techniques effectively; however, when athletes experience fear, they may not use the skills they have been taught. Shaping and fading procedures are important for generating positive reinforcement in successive approximations toward behavior that involves risk of injury and which can produce fear. Nevertheless, at times, verbal behavior related to fear can interfere with the execution of a desired response even after effective ABA skills training. Targeting the precise class of verbal behavior that is interfering involves functional analysis of indirect-acting verbal contingencies. To date, no studies have evaluated analogue FA procedures for interfering verbal behavior targeted in Acceptance and Commitment Training interventions. In the current study, direct contingency management (goal setting, prompting, differential reinforcement, and stimulus fading in procedures) was employed with competitive rock climbers that experienced debilitating fear. We then evaluated a novel ACT FA procedure and utilized the results to program individualized Acceptance and Commitment Training interventions to increase the climbing performance of competitive rock climbers. The ACT FA involved a within-subject alternating treatment design to evaluate the indirect acting contingencies affecting participant climbing performance. Subsequently, a non-concurrent multiple baseline across participant’s design was used to measure changes in the rate of lead falls and rests during and subsequent to an individualized ACT intervention. Results and implications for sports coaching and future research are discussed.

* Brief ACT Functional Analysis and Treatment with Workers in ABA Settings

Celie Gay, Florida Institute of Technology

Thomas G. Szabo, Ph.D., BCBA-D,

Despite adequate job training, many workers engage in self-talk that makes it difficult to improve their performance at work. Identifying and manipulating direct-acting contingencies of reinforcement is necessary but at times insufficient to bring about desired change. In this study, we first evaluated and treated direct-acting contingencies using well known behavior management strategies. Subsequently, we used the ACT matrix as a descriptive assessment of indirect-acting verbal contingencies that govern covert interfering behavior. We verified hypotheses generated using a novel ACT functional analysis procedure in which establishing and abolishing conditions were rapidly alternated. Finally, we designed ACT interventions specifically targeted to the identified contingencies and measured changes in participant performance at work. In this talk, we will describe the procedures used, results obtained, and future research to be conducted.

Educational Objectives:

1. Differentiate between times when to use direct versus indirect contingency management assessment and intervention strategies.

2. Identify the basic elements of an ACT descriptive functional assessment.

3. Identify the basic elements of an ACT analogue functional analysis and function-based treatment.

**113. Interbehaviorism: Then and Now, All the Way, and In the Room**

Symposium - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Literature review*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, Interbehaviorism, Interbehavioral psychology, Kantor, Clinical Behavior Analysis, Contextualism

*Target Audience: Beginner*

Chair: Rebecca Copell, B.S., University of Louisiana at Lafayette

Discussant: Kelly Wilson, Ph.D., University of Mississippi

Linda Hayes, Ph.D., University of Nevada Reno

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Mitchell Fryling, Ph.D., California State University, Los Angeles

Interbehaviorism has a long history in behavior analysis. The developer of interbehaviorism, J.R. Kantor, advocated for a thoroughly naturalistic approach to both the philosophy of science and the science of psychology. In 1937 Kantor founded The Psychological Record, with B. F. Skinner serving as the founding editor of the journal’s experimental department. Kantor didn't conduct experimental research, but rather focused on developing the theoretical and philosophical foundation for a comprehensive natural science of psychology more broadly. While interbehavioral thinking has persisted and influenced research and scholarship around the world, Kantor’s work has at the same time remained less well-known in a discipline that values empirical research over theoretical coherence. Some researchers have even dismissed the interbehavioral perspective specifically, due to its alleged lack of utility in working towards successful action in applied/clinical areas. Interest in interbehavioral thinking continues, however, and interestingly perhaps especially among those close to applied research and practice. This presentation provides a brief overview of this history, and in particular draws attention to the current interest in interbehaviorism and its potential future.

* Something New, Something Old - Interbehaviorism in Behavior Science

Mitch Fryling, Ph.D., California State University

Interbehaviorism has a long history in behavior analysis. The developer of interbehaviorism, J.R. Kantor, advocated for a thoroughly naturalistic approach to both the philosophy of science and the science of psychology. In 1937 Kantor founded The Psychological Record, with B. F. Skinner serving as the founding editor of the journal’s experimental department. Kantor did not conduct experimental research, but rather focused on developing the theoretical and philosophical foundation for a comprehensive natural science of psychology more broadly. While interbehavioral thinking has persisted and influenced research and scholarship around the world, Kantor’s work has at the same time remained less well-known in a discipline that values empirical research over theoretical coherence. Some researchers have even dismissed the interbehavioral perspective specifically, due to its alleged lack of utility in working towards successful action in applied/clinical areas. Interest in interbehavioral thinking continues, however, and interestingly perhaps especially among those close to applied research and practice. This presentation provides a brief overview of this history, and in particular draws attention to the current interest in interbehaviorism and its potential future.

* Going All The Way

Linda J. Parrott Hayes, Ph.D., University of Nevada

Understanding the behavior of human beings in ordinary life circumstances is complicated by the plethora of substitute stimulation and responding fostered by their verbal repertoires. One approach to this understanding has been to investigate partial happenings amenable to quantitative metrics the aim being to enable subsequent operations of prediction and control. This approach to the problem is not without value. However, reference to a multitude of unrelated dependency relations is not capable of capturing the complexity of human behavior in ordinary life circumstances, and it would not be surprising if clinicians were among the first to come to this conclusion. It is argued that an integrated field foundation, as exemplified by interbehaviorism, is better suited to the work of clinicians than the more prevalent contingency approach. Complexity is a relative term. Investigations of partial happenings are also complex. The aim of this presentation to consider the benefits of going all the way.

* Implications of an Interbehavioral Perspective for Clinical Behavior Analysis

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Interbehaviorism and interbehavioral psychology have often been mischaracterized and dismissed by clinical behavior analysts as lacking practical utility. Instead, dominant clinical behavioral analytic approaches (e.g., Acceptance and Commitment Therapy and Functional Analytic Psychotherapy) have appealed to middle level terms to describe models of psychological difficulties and processes of change in therapy. This has likely increased dissemination of these approaches, but may also account for the gradual drift toward mentalism. Thus, it seems worth reconsidering the dismissal of interbehavioral psychology as a theoretical foundation for clinical behavior analysis. This paper proposes three aspects of interbehavioral psychology with clinical implications for moment to moment analysis of therapeutic process: (1) approaching the interbehavioral field as the primary unit of analysis, (2) including thoughts and feelings as observable interbehavior, and (3) including history as an aspect of the present.

Educational Objectives:

1. Define and describe interbehaviorism.

2. Describe two implications of interbehaviorism on clinical practice.

3. Describe thoughts and feelings as observable events.

**114. Advancements in the Treatment of Children and Adolescents**

Panel - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Literature review*

Categories: Clinical Interventions and Interests, Children and Adolescents

*Target Audience: Intermediate, Advanced*

Chair: Katrina Daigle, M.A., M.S., Suffolk University

Lisa Coyne, Ph.D., Harvard Medical School

Louise Hayes, Ph.D., Institute for Mindful Action

Jill Ehrenreich-May, Ph.D., University of Miami

Scott Compton, Ph.D., Duke University, Psychiatry and Behavioral Sciences

Anne Marie Albano, Ph.D., Columbia University Medical Center and Modern Minds of Charleston

Advances in CBS highlight a process-based model that employs idiographic functional analysis guided by empirically derived models such as ACT and other third-wave behavior therapies that integrate a coherent set of change processes. As such, the CBS approach focuses more broadly on the function of behaviors within a given context, specifically exploring patterns of experiential avoidance and cognitive fusion while encouraging psychological flexibility and values-based action. The current empirical literature is lacking in clarifying a process-based approach for children and adolescents. However, advances in the adult literature support this process-based approach, lending valuable insight into new directions for work with children and adolescents. In this panel, leading CBS experts will discuss advancements in the treatment of children and adolescents by exploring a process based approach to assessment and treatment, specifically adapted for working with children and adolescents.

Educational Objectives:

1. Explain how recent advances in the literature point to process-based models of assessment and treatment.

2. Describe various process-based treatment models developed for working with children and adolescents.

3. Demonstrate critical adaptations in process-based treatment specifically for working with children and adolescents.

**115. Process-Based CBT, Open Science and Other Trends**

Panel - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Process-Based CBT

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Rhonda Merwin, Ph.D., Duke University Medical Center

Steven Hayes, Ph.D., University of Nevada, Reno

Louise McHugh, Ph.D., University College Dublin

Michael Levin, Ph.D., Utah State University

Andrew Gloster, Ph.D., University of Basel

Maria Karekla, Ph.D., University of Cyprus

This panel will discuss important trends in clinical and behavioral science, including process-based CBT and open science practices. We are now in a new era of CBT integration, and the tide is shifting from protocols for syndromes to identifying a coherent set of change processes that are broadly applicable to human suffering (and flourishing) and can be reliably engaged in trainable procedures. Other trends include a shift toward open science practices, intended to increase transparency and address threats to reproducible science, include things like data, code/syntax and study material sharing, and pre-registering of analyses and clinical trials. Open science could enhance or hamper efforts of movement toward process based-CBT (or have no bearing whatsoever). The current panel will explore these movements and their implications - separately and in conjunction. Other trends may be discussed, time permitting.

Educational Objectives:

1. Situate process-based CBT within its historical context, and identify implications for research and clinical practice.

2. Outline the basic tenants of open science and consider how standards and practices may impact the field/research.

3. Discuss the potential intersection of process-based CBT and open science.

**116. Integrating CBS principles into suicide prevention and intervention**

Panel - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Conceptual analysis, Didactic presentation, Literature review*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Suicide Prevention

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Jonathan Weinstein, Ph.D., VA Hudson Valley HCS

Emily Kroska, Ph.D., University of Iowa

Sean Barnes, Ph.D., Rocky Mountain Regional VA Medical Center

Kirk Strosahl, Ph.D., HeartMatters Consulting LLC

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation

Rates of suicidal behavior are higher than ever before (CDC). Research indicates that the time elapsed between first suicidal thought and suicide attempt is most often less than 30 minutes (Desienhammer et al., 2009), indicating the dire need for psychotherapeutic promotion of alternative behavioral responses that prevent automatic or impulsive responding to suicidal thoughts. Contextual behavioral science (CBS) is particularly well-suited to help patients to alter responding to suicidal thoughts and urges. Given that suicidal behavior transcends diagnostic categories, a CBS approach considers of the context and function of suicidal behavior. CBS interventions emphasize changes in the relation between suicidal thoughts and responses, rather than attempting to alter the content of the thoughts. Panelists will discuss 1) conceptual considerations for integration of CBS principles into suicide prevention; 2) integration of deictic, hierarchical, and temporal frames into brief interventions to promote empowerment; 3) delivery of preventive care following an acute suicide attempt; 4) future directions in suicide prevention and intervention research. Theoretically congruent interventions are needed to promote continued post-discharge care following acute interventions for suicide.

Educational Objectives:

1. Discuss suicidal behavior within the context of the core ACT processes and relational frames

2. Employ deictic framing as a strategy to validate patient’s private events and connect emotions to values.

3. Explain how to hierarchically frame to transform the function of painful experiences into values-consistent action.

**117. Magic ACT: Transforming (Emotional) Pain into Purpose with Clinical RFT**

Workshop - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Relational Frame Theory, Clinical application and integration of RFT with ACT

*Target Audience: Beginner, Intermediate*

Lou Lasprugato, MFT, Sutter Health

Phillip Cha, MFT, UCSF Citywide Case Management

As a practicing clinician, you may often find yourself in therapeutic encounters where you intuitively sense a path from the client’s inflexible response to emotional pain to more flexible ways of responding that also evoke meaning and purpose. And yet, illuminating this path for the client can remain elusive, even with a foundational skill set in Acceptance and Commitment Therapy (ACT). While ACT facilitates an open and curious exploration of both painful feelings and deeply held values, Relational Frame Theory (RFT) offers a direct link among these private events, and thus, a road map from pain to purpose.

RFT, when applied clinically, advances a set of interventions (i.e. relational frames) for transforming the function of painful private events by altering their context. In this brief workshop, participants will have the opportunity to experiment with different types of relationally framed questions designed to add meaningful and/or purposeful functions to painful experiences through derived relational responding. Following a brief didactic presentation and experiential exercise, Portland-style real/role-plays will serve as the primary format for this workshop.

Educational Objectives:

1. Describe how relational frame theory (RFT) can be clinically applied to transform pain into purpose in acceptance and commitment therapy (ACT).

2. Delineate the various types of relationally framed questions for evoking a transformation of function in painful private events by altering their context.

3. Demonstrate how to therapeutically pivot from pain to purpose through timely RFT-based interventions.

**118. Truffle hunting: Bringing Values to Life in the Therapy Room**

Workshop - Saturday, 26 June (4:00 PM - 5:30 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Values

*Target Audience: Beginner, Intermediate, Advanced*

Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Values are at the heart of ACT. They are the “why” in any ACT-based treatment plan or intervention. While many clinicians are drawn to ACT because of its explicit emphasis on values, it can be difficult to know how to move beyond simply talking about values to knowing how to bring values alive in the therapy room. This brief workshop is designed to help clinicians deepen their values work with clients by shifting the focus from the content of values conversations to the quality of those conversation. By listening for and deepening the qualities of effective values conversations participants will get a taste for how more experiential and relationally-based values work can supercharge therapy. Participants will have opportunities to both observe demonstrations and practice in small groups with the benefit of feedback.

Educational Objectives:

1. Differentiate between values identification and values contact.

2. Describe the 4 qualities of effective values conversations.

3. Evoke and deepen the 4 qualities of effective values conversations in role-play practice.

**119. Using CBS to Nurture a Just and Sustainable World**

Plenary - Saturday, 26 June (5:45 PM - 6:45 PM)

Components: *Conceptual analysis, Experiential exercises, Literature review*

Categories: Evolution, Functional contextual approaches in related disciplines, Cultural evolution, Climate change, Prosociality, Public health

*Target Audience: Beginner, Intermediate, Advanced*

Lisa Coyne, Ph.D., Harvard Medical School/McLean, New England Center for Anxiety and OCD

At a population size of nearly 8 billion, humans strain the resources of our planet. Our shared climate crisis affects us all – but it affects marginalized communities vulnerable to disparities in income, health, and education most immediately and most deeply. We cannot avert these unfolding catastrophes acting alone, as individuals. We are going to need all of our community’s compassion, wisdom, and innovation. Most of all, we will need the tools conferred by contextual behavioral science (CBS). The technology for behavior change offered by CBS is essential to inform best practices for shifting to a more sustainable and just world. It is time to scale up our science and capitalize on interdisciplinary collaborations such that we can address our behavioral impact on the climate. Where there is division, we can sow nurturance and justice; where there is disconnection with the natural world, we can make committed actions that will leave our home better than we found it for generations to come.

Educational Objectives:

1. Discuss the impact of human behavior on the climate.

2. Explain the role of racism and discrimination in climate change.

3. Describe how contextual behavioral science may help to address the climate crisis.

# Sunday, 27 June (all times GMT/UTC +2)

**120. Psychological flexibility as a transdiagnostic dimension in adolescents and young people**

Symposium - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Educational settings, Young people

*Target Audience: Beginner, Intermediate, Advanced*

Chair: David Lobato, M.A., Universidad Europea de Madrid

Francisco Montesinos, Ph.D., Universidad Europea de Madrid

Marta Santacreu, Ph.D., Universidad Europea de Madrid

Ofelia Ramos, M.A., Instituto ACT and Grupo5

Javier Ibáñez-Vidal, M.A., Universidad de Zaragoza

Sonsoles Valdivia-Salas, Ph.D., Universidad de Zaragoza

The role of psychological flexibility in three different areas (teen dating violence, academic performance and public speaking anxiety) in Spanish young people will be analyzed in this symposium. In the first study, the role of sexist attitudes and psychological inflexibility in the perpetration of both physical and emotional teen dating violence are explored. In the second work, the influence of achievement emotions and academic psychological flexibility on burnout, and how these variables contribute to improve academic performance are studied. Next, the effectiveness of an intervention aimed at promoting psychological flexibility to cope with public speaking anxiety in young students will be shown. The role of an autonomic modulation and negative self-statements will be analysed in the context of a contextual intervention which is not focused on symptom reduction. The relationship between data from behavioural observation and changes in psychological flexibility will be analysed.

* The role of sexist attitudes and psychological inflexibility in the perpetration of teen dating violence.

Sonsoles Valdivia-Salas, Ph.D., Universidad de Zaragoza

A. Sebastian Lombas, Universidad de Zaragoza

Teresa I. Jiménez, Universidad de Zaragoza

Javier Ibáñez, Universidad de Zaragoza

Teen dating violence (TDV) is a growing phenomenon with short- and long-term consequences for both the aggressors and the victims. According to the literature, TDV is a multifaceted phenomenon that occurs as the result of a combination of sociodemographic and psychological variables. Despite this, prevention campaigns and treatment packages place special attention to sexist attitudes and beliefs. According to the contextual model of behavioral problems, however, more attention should be placed on behavior regulation (e.g., psychological inflexibility), instead. The purpose of the present study was to explore the role of sexist attitudes and psychological inflexibility in the perpetration of both physical and emotional TDV. A total of 1079 teens filled out measures of sexism (hostile and benevolent), psychological inflexibility, and TDV in different regions in Spain. Statistical analyses confirmed that psychological inflexibility mediated the relation between both types of sexism and both physical and emotional TDV. The cross-sectional nature of the data calls for further research to clarify the role of psychological inflexibility as a risk factor for TDV.

* I don’t enjoy, I am bored, and I am ashamed in class: The influence of achievement emotions and psychological flexibility on burnout and their relation with academic performance.

Javier Ibáñez-Vidal, Universidad de Zaragoza

Sonsoles Valdivia-Salas, Universidad de Zaragoza

Ginesa López-Crespo, Universidad de Zaragoza

Noelia Sánchez-Pérez, Universidad de Zaragoza

One of the most important challenges of Educational Psychology is to determine the predictors of better academic performance because it prevents dropout and predicts better socio-economic and employment success. With this purpose, achievement emotions (e.g., joy) and burnout (i.e., the combination of emotional exhaustion, cynicism, and inefficacy), are two of the variables that have traditionally received more attention. Little is known, however, of the role exerted by academic psychological flexibility (APF). To fill this gap, we explored: (1) the influence of achievement emotions and APF on burnout, and (2) the contribution of these three variables to improving college students’ academic performance. 147 Psychology students filled out questionnaires one month before their finals. Joy, shame and boredom had an influence on burnout, and the inefficacy component of burnout was the best predictor of academic performance. Interestingly, APF improved the predictive capacity of both linear regression models. Although further research with larger samples is recommended, these findings reveal that APF could be an important variable to consider in educational research.

* Promoting psychological flexibility to cope with public speaking anxiety: preliminary data of a randomized clinical trial

Francisco Montesinos, Ph.D., Universidad Europea de Madrid

Christian Calderón, Universidad Europea de Madrid

Alberto Bellido, Universidad Europea de Madrid

Marta Santacreu, Universidad Europea de Madrid

Public speaking anxiety is a prevalent problem in Spanish university students. This study is aimed at assessing the efficacy of an intervention focused in promoting psychological flexibility to cope with public speaking anxiety. This is a randomized clinical trial. Twenty participants with significant social and public speaking anxiety were assigned to waiting list, in vivo exposure and virtual reality. Participants in waiting list condition received the intervention six weeks later. Treatment included an ACT-based abridged protocol (five individual sessions). Efficacy was measured through standardized questionnaires (LSAS, SSPS, AAQ-II, CFQ, PRCS and CAHP-CIHP) after the intervention and at 2-month follow-up. Preliminary results show a statistically significant reduction in psychological inflexibility after intervention [Pre-test: M=27.7 (SD=9.1), Post-test M=21.6 (SD=7.9)]. Significant improvements were also found in social anxiety, fear, cognitive fusion and self-efficacy. Changes in negative self-statements were not significant. Updated results comparing both interventions in a wider sample will be presented. Our results support the usefulness of integrating a psychological flexibility approach in exposure techniques to help young students to cope with anxiety during oral presentations.

* Analysis of psychophysiological stress and behavioural anxiety responses and experiential avoidance in higher education students during a treatment of public speaking anxiety.

Marta Santacreu, Ph.D., Universidad Europea de Madrid

Francisco Montesinos, Universidad Europea de Madrid

Alberto Bellido, M.A., Universidad Europea de Madrid

Christian Calderón, M.A., Universidad Europea de Madrid

High levels of autonomic stress and behavioural anxiety responses during a public oral presentation might be related to student´s performance. The aim of this study was to analyze the effect of an ACT-based intervention focused in promoting psychological flexibility in undergraduate students with public speaking anxiety. In a randomized clinical trial, twenty participants’ heart rate variability (HRV) was registered to analyse autonomic modulation in six moments during the intervention. Several HRV parameters were analyzed using the Kubios HRV software. Participants’ behavioural anxiety response was measured through an observational register code before and after 6 session-treatment. The observational code consists of 14 categories. Psychological flexibility was evaluated through AAQ-II. Preliminary results of Wilcoxon signed-rank test showed a significant reduction in psychological inflexibility after intervention [Pre-test: M=28.35 (SD=9.75), Post-test M=21.88 (SD=8.55)]. Although decreases in the physiological stress and behavioural anxiety were measured after the intervention, these results were not statistically significant. Our results support the idea physiological component of the stress and behavioural anxiety responses are not determinant in the improvement of psychological flexibility.

* ACT increases psychological flexibility in families with children with disability: a pilot study.

David Lobato, M.A., Universidad Europea de Madrid

Francisco Montesinos, Ph.D., Universidad Europea de Madrid

Oscar García-Leal, Ph.D., Universidad Europea de Madrid

Julia Cebrián, B.A., Universidad Europea de Madrid

The objective is to evaluate the impact of an abridged intervention aimed at increasing psychological flexibility in parents of children with disability and promoting adaptive interaction repertories. The study is a pre-experimental pilot study with pre-test, post-test and follow-up measurements. An ACT-based intervention was administered to 5 parents of children with intellectual disability diagnosed for at least 6 months, by means of 3 group sessions, 3 hours each. Treatment effects were measured through standardized questionnaires (GHQ-12, PSS, 6-PAQ and WBSI) and through a behavioural self-register. These questionnaires were administered during the pre-test, post-test and the follow-up study. Results show that psychological flexibility increased [Pre-test: M=37 (SD=3.94), Post-test M=26.2 (SD=2.68), Follow-up M=27.6 (SD=1.67)], perceived stress was reduced. Pleasant interactions with children increased by 61%. Importantly, they reported general satisfaction with the intervention. These results maintained in the 2-month follow-up study. Our results support that ACT allows caregivers to learn new behavioural repertoires to cope with stress. This study has helped to improve the intervention protocol for a latter randomized clinical trial conducted in a larger sample.

Educational Objectives:

1. Revise the role of sexist attitudes and psychological inflexibility in the perpetration of teen dating violence.

2. Analyze the influence of achievement emotions and academic psychological flexibility on burnout and academic performance.

3. Assess the effectiveness of promoting psychological flexibility to cope with public speaking anxiety.

**121. Implementation and dissemination of ACT for youth around the world using DNA-V**

Symposium - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Didactic presentation, Original data*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Youth

*Target Audience: Intermediate*

Chair: Carter Davis, B.F.A., Utah State University

Discussant: Louise Hayes, Ph.D., Institute for Mindful Action

Julie Petersen, B.S., Utah State University

Duncan Gillard, D.Ed.Psych, Creative Director at Connect PSHE (connect-pshe.org)

Licia Boccaletti, M.A., ANS

Natalie Roberts, DClinPsy, NHS, Hampshire CAMHS.

Meghan Joyce

Research on acceptance and commitment therapy (ACT) for younger populations is promising for a range of conditions (Fang & Ding, 2020). However, little research examines how to successfully implement and disseminate ACT for youth. This symposium focuses on current efforts to disseminate DNA-V, a developmentally flexible model of ACT for youth, across international contexts. DNA-V is based on elements of process-based therapy and traditional adult models of ACT, with a special focus on developmental considerations that are unique to youth (e.g., navigating new friendships and romantic relationships, changing school environments; Hayes & Ciarrochi, 2015). Study protocols and outcomes from a variety of implementation efforts spanning international medical clinics, schools, and community mental health settings will be presented. The overarching goal of this symposium is to bring together knowledge and expertise on DNA-V, along with specific suggestions for implementation and dissemination to youth around the world.

* School-based Acceptance and Commitment Therapy for Adolescents with Anxiety

Julie M. Petersen, B.S., Utah State University

Carter Davis, B.F.A., Utah State University

Michael P. Twohig, Ph.D., Utah State University

Anxiety disorders are one of the most prevalent diagnoses in youth, often resulting in impaired social and school functioning. Acceptance and commitment therapy (ACT), a treatment with a large base of empirical support for adult anxiety disorders, has yet to be fully researched in adolescents. ACT, specifically the DNA-V model (Hayes & Ciarrochi, 2015), is theorized to be a developmentally flexible treatment for adolescents. The present study is a pilot trial of school-based, group DNA-V for adolescents with anxiety to test the effectiveness and acceptability of group ACT integrated into the school day. Participants (N = 26) with elevated anxiety were randomized to a 12-week waitlist or to receive school-based, group DNA-V. Participants in the active condition reported significantly decreased anxiety and class absences at posttreatment and follow-up as compared to the waitlist. Participants reported the treatment as favorable with good acceptance ratings. These findings provide preliminary support for the use of DNA-V groups within school settings. Future research may explore the effectiveness and implementation of group DNA-V in schools with larger, more diverse samples.

* Forging Brighter Futures with Young Care Leavers: The DNA-v Model in Community-Based Settings

Duncan Gillard, D Ed Psy, Connect-PSHE

Louise Hayes, Ph.D., Institute of Mindful Action

Megan Joyce, B.Sc., 1625 Independent People

Acceptance and Commitment Therapy has amassed a tentatively promising empirical base with youth populations. However, ACT was not explicitly designed to take account of important child development issues or contextual factors typically present in the lives of youth. In recognition of this, Hayes & Ciarrochi (2015) proposed a developmentally informed version of the ACT model, known as DNA-v. In this presentation, a community-based application of the DNA-v model, designed to support young care leavers, is described. The Reboot West Team are a group of 10 Education, Employment and Training (EET) coaches under the employ of the UK-base charity; 1625 Independent People. Having been trained and supervised in the DNA-v model, Reboot Coaches work directly with young care-leavers in their communities, applying DNA-v flexibly in their conversations. As well as describing how the project works, this presentation outlines the positive outcomes achieved by the 212 young care-leavers accessing a Reboot Coach, including those related to formal education and training, paid employment, sense of safety and social connectedness (Gillard et al, 2020). Implications and future research directions are discussed.

* Promoting Mental Health and Well-Being among Adolescent Young Carers in Europe

Licia Bocaletti, M.S., Anziani e Non Solo Soc. Coop. Soc

Alessandra Manattini, University of Bologna

Giulia Casu, University of Ljubljana

Valentina Hlebec, Ph.D., University of Ljubljana

Claire Cassidy, Carers Trust

Francesca Centola, Eurocarers, European Association Working for Carers

Barbara D’Amen, IRCCS INRCA - National Institute of Health and Science on Aging, Centre for Socio-Economic Research on Aging

Yvonne de Jong, The National Centre of Expertise for Long-term Care in the Netherlands

Renske Hoefman, The Netherlands institute for Social Research (SCP)

Elizabeth Hanson, Ph.D., Linnaeus University

The research project “Psychosocial support for promoting mental health and well-being among adolescent young caregivers in Europe” (ME-WE), funded by the European Union (Horizon 2020; 2018-2021), aims to develop an innovative framework of primary prevention interventions for promoting the mental health and well-being of Adolescents Young Carers (AYCs) aged 15-17, to be tested in six European countries (Italy, Slovenia, Sweden, Switzerland, the Netherlands, and United Kingdom). The ME-WE primary prevention intervention program for AYCs was developed based on the theoretical framework of the DNA-V model by Hayes and Ciarrochi (Hayes & Ciarrochi, 2015). The DNA-V model was considered to be especially relevant for the objectives of the ME-WE project, i.e., to promote the mental health and well-being of AYCs who are in transition into adulthood and in recognizing, accepting, and sharing the emotions related with their caring role which are often unspoken (Bjorgvinsdottir & Halldorsdottir, 2014). The presentation will illustrate the ME-We project and how the DNA-V model was adapted for delivery to target group, also in light of COVID-19 restrictions.

* DNA-V as a first line treatment in a Specialist UK CAMH service

Natalie Roberts, D. Clin. Psych., NHS, Hampshire CAMHS

In order to address waiting times for treatment and improve access to psychotherapy, a team in Hampshire, UK, Specialist CAMHS developed and implemented a stepped-care model of treatment. The first line treatment offered to young people over 12 (school years 7 +) was DNA-V, a transdiagnostic, skills-based group, using ACT as the foundation. 208 young people (age range 12 – 18) participated in DNA-V groups and were offered this within a school term of being seen for initial assessment (range of wait between 1 and 8 weeks). The 8-session group resulted in a discharge rate of 58% with scores improving from within clinical ranges to below clinical thresholds on the Revised Children’s Anxiety and Depression Scale. Significant improvements on a measure designed to assess every-day use of DNA-V skills were also seen. Of the 42% that remained in the CAMH service, 66% required no further psychological intervention. In the same period, waiting times reduced from 48 to 36 weeks, on a monthly downward trend and this occurred in the context of an increase in the number of initial assessments.

Educational Objectives:

1. Describe elements of the DNA-V model.

2. Discuss challenges and future directions for implementation of DNA-V for youth.

3. Describe strategies for implementation of DNA-V across a variety of settings.

**122. Evaluating Valuing Measures and Conceptualization in Research, Digital Interventions, & Clinical Conceptualizations**

Symposium - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Literature review, Original data*

Categories: Clinical Interventions and Interests, Values

*Target Audience: Beginner, Intermediate*

Chair: Kayleigh Webster, Louisiana Contextual Science Research Group

Discussant: Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Alison Stapleton, B.A., University College Dublin

Jessica Criddle, Murray State University

Olga Berkout, Ph.D., University of Texas at Tyler

Katie Barrett, Ph.D., National Rehabilitation Hospital

Repertoires shaped under appetitive control are characterized by variability, sensitivity, increasing degrees of freedom, and the capacity for appetitive learning (Wilson et al., 2009). Often this is approached in terms of values in the CBS tradition. This symposium will examine different approaches to understanding and establishing appetitive control over participant-selected, values-based behaviors in several different domains. The first paper examines the association between health-related values and behaviors. The second paper investigates the efficacy of participants building their own personal values and selecting valued actions with and without a daily mini-intervention. The third paper explores the impact of self-selected value-based behavior on experiential avoidance, depression, and anxiety. The fourth paper examines whether client and clinician’s perceptions on values are consistent with an ACT conceptualization. Discussion will focus on implications of this work for future research and values-based intervention. Attendees will be able to identify the impact of client-selected values on desired behavior change, and how practitioners can incorporate this perspective and help clients build repertoires of identifying and self-selecting values under appetitive control.

* Can a domain-specific measure of health values congruency predict engagement in health-related behaviors?

Alison Stapleton, University College Dublin

The present study examined whether a domain-specific measure of health values congruency could predict engagement in health-related behaviors above and beyond general measures of values consistent living. Participants were 111 individuals aged 18 to 49 years (M = 21.41, SD = 3.721) who completed the Values Wheel measure of health values consistent living, and self-report measures of general values consistent living and engagement in health-related behaviors. Neither dietary quality nor alcohol consumption were related to health or general values consistent living. Greater levels of physical activity were associated with greater commitment to valued action in general. Lower sleep disturbance was associated with greater commitment to valued action in general and greater health values consistent living. Health values consistent living did not predict incremental variance in sleep quality over and above commitment to valued action in general. The present findings suggest that assessing abstract values alone is not sufficient to predict specific behaviors. Findings are discussed with reference to the need to improve measures of values consistent living by increasing their specificity and emphasizing the importance of the individual's perspective.

* Freely Chosen: Trial of a Daily Values Exercise on Participant Chosen Values and Valued Behaviors.

Jessica Criddle, Murray State University

Houston Howard, Murray State University

MIchael Bordieri, Ph.D., Murray State University

Constructing values can help individuals select and implement expanding patterns of meaningful behaviors (LCSRG, 2021). However, some learning histories limit active construction of domains valued for their own sake, bringing valuing into the present, or engagement in action under appetitive control (Hayes et al., 2009). Researcher-selected valued domains and behaviors may not hold the same evocative effect for everyone (Hayes et al., 2013) and may establish narrow and rigid rule-governed behaviors (e.g., pliance, tracking; Hayes et al., 1986). In this study, participants explored valuing by constructing values statements and associated valued action in an online mini-intervention. Participants engaged in a values-contacting exercise and a SMART goal setting intervention. Utilizing an alternating treatment design, participants completed 15 days of EMA text-based surveys reporting if they engaged in their chosen behavior the day before, with or without a 2-minute values-based booster audio intervention. Frequency of valued behaviors were compared between days with and without the booster intervention. Implications for therapy adjuncts and technologically-based tools for non-clinical populations will be discussed.

* An examination of an Acceptance and Commitment Therapy informed digital health intervention among individuals at risk for struggling with emotional disorders.

Olga Berkout, Ph.D., University of Texas at Tyler

Johnathon Thomas, MA, University of Texas at Tyler

Difficulties with depression and anxiety are common and frequently cooccurring. Targeting shared processes contributing to dysfunction among at-risk individuals represents an efficient strategy for reducing associated negative outcomes. Many individuals with behavioral concerns struggle to receive interventions due to limited time and resources and brief online interventions represent a promising strategy for addressing these barriers. The current study examines a single session ACT-informed online intervention aimed at promoting engagement in values consistent behavior and reducing experiential avoidance. The intervention consists of videos presenting key concepts in an experiential fashion and exercises designed to help recipients engage with the material. Participants will be undergraduates with mild to moderate elevations on DASS-21 Depression or Anxiety scales. Participants will be randomly assigned to the intervention or no treatment control condition and complete measures of experiential avoidance, values progress, and symptoms of depression and anxiety. Those who complete the intervention will also provide feedback on treatment acceptability. Implications for treatment accessibility and digital intervention design will be discussed.

* A Qualitative Exploration of Client and Clinician Perceptions of Values: Examining Consistency with the Acceptance and Commitment Therapy (ACT) Conceptualization.

Katie Barrett, Ph.D., National Rehabilitation Hospital

Values have been conceptualized in a number of different fashions, and are generally agreed to constitute a useful component of psychological interventions. Acceptance and Commitment Therapy (ACT) proposes clear mechanisms through which values elicit change in therapy. However, it has yet to be explored whether clients’ and clinicians’ perceptions of values are consistent with the ACT conceptualization, though personal pre-conceptions may impact on their understanding of this construct. Semi-structured interviews were completed with 10 adult clients and 10 psychologists within the psychology services in Ireland. Qualitative analyses were utilized to assess the congruence of clients’ and clinicians’ responses with the ACT definition of values. While both cohorts referenced many ACT-consistent characteristics of values, some “values'' appeared more closely aligned with plys, or were described as being under aversive control. This study highlights the need for both ACT trainers and therapists to ensure that client-selected values are operating as true motivative augmentals in order to maintain fidelity with the psychological flexibility model and enable us to better monitor the utility of ACT and its constructs.

Educational Objectives:

1. Explain common pitfalls of generic measures of values congruent living. Detail common pitfalls of generic measures of values congruent living.

2. Describe the effectiveness of technological-based interventions on increasing valued living when participants are involved in personal, intrinsically augmenting reinforcer selection rather than researcher-selected valuing behaviors.

3. Describe how to prepare clients to enact personal values that are reflective of true motivative augmentals, and assess whether these are inadvertently coming under aversive control.

**123. ACT Philosophy and Empirical Investigations of the Self**

Symposium - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Theoretical and philosophical foundations, Functional contextual neuroscience and pharmacology, Functional Contextualism, Japanese philosophy, Philosophy of education, Developmental psychology, Greek philosophy, Buddhism, Rule-goverend behaviour, Truth, Hierarchical framing, Alexithymia, Self as Context, Causality, Interbehaviorism, Radical Behavior

*Target Audience: Beginner, Intermediate, Advanced*

Anton Sevilla-Liu, Ph.D., Kyushu University

Josef Mattes, Ph.D., M.Sc., University of Vienna; Private Practice

Staheli Meyer, M.A., University of Nevada, Reno

Lidia Budziszewska, M.S., European University of Madrid & University of Almería

Darren Edwards, Ph.D., Swansea University

This symposium will take a deep dive into philosophy and end with empirical studies on the self and self-awareness. We will first explore ACT through the lens of Eastern and Greek philosophies. We will consider how these frameworks may expand thinking or contribute to new explorations or applications. We will then consider inter-behaviorism, and the implication of this philosophical framework. The final 2 papers will present empirical work on self and self-awareness. The first paper will present findings from a basic behavioral study investigating the transformation of function via hierarchical framing. A final paper will present data on the ability to sense oneself and one’s emotions and outline a self-as-context process-based model of alexithymia.

* Acceptance and Commitment Therapy and the Kyoto School of Philosophy: Mori Akira and the Four Layers of Personality

Anton Sevilla-Liu, Ph.D., Kyushu University

The philosophy behind ACT is often elaborated using Anglo-American philosophy (of psychology/science). However, some (Masuda, Tirch) have also began exploring the connections to eastern philosophy, an approach that is more common in MBSR and MBCT, but these tend to miss the behaviorist side of ACT. In order to connect these two streams, I will connect ACT to the ideas of Mori Akira (1915-76), a younger member of the Kyoto School of Philosophy. Mori developmentally models the human personality as having four layers: organic (connecting to the pragmatic and behavioral side of ACT), conscious (cognitive, relational frames), self-aware (self-as-content and relations between relations), and existential (self-as-context and mindfulness). It is this last layer that connects to Mori’s pedigree as a Kyoto School thinker. In this way, one can situate ACT in connection with eastern influences (Buddhism, Yoga) while maintaining a systematic and developmentally-considered connection to behaviorism and pragmatism. One can also begin to see how ACT can come into dialogue with education as a whole, which is what Mori’s model was originally designed for.

* ACT and Greek philosophy: What if your chosen valued-direction is ataraxia (undisturbedness, equanimity)?

Josef Mattes, Ph.D., M.Sc., University of Vienna; Private Practice

Parallels between the ancient Hellenistic philosophies of the Stoics and Epicureans on the one hand, and modern cognitive psychotherapy on the other, are well known and topic of current discussion. This presentation argues that there are also important similarities between Pyrrhonism, the third of the major Hellenistic philosophies (which has important parallels with Buddhism), with 3rd wave cognitive-behavioural therapies in general, and with ACT in particular. This can illuminate the philosophical underpinnings of ACT, contribute to understanding its place in intellectual history, and contribute to the mutual understanding of present-day psychotherapies by, for example, recognizing common roots in Pyrrhonism of central ideas in ACT (defusion being a modern version of the Pyrrhonist "adoxastos") and in humanistic psychotherapies (via Pyrrhonist "epoche"). Having a larger repertoire of background ideas also broadens the vision, and it enables more flexibility in applying ACT in psychotherapeutic practice.

* Reconsidering Causal Concepts

Staheli Meyer, University of Nevada, Reno

Linda J. Parrott Hayes, University of Nevada, Reno

Contextual Behavior Science has rested squarely upon the tenets of radical behaviorism, as such it subsumes some of the conceptual issues taken with radical behaviorism. Of particular concern is the issue of causes. A cause in behaviorism would require separation between stimulation and responding and for one to be held as the cause of the other. This demarcation is abundant in the principles and concepts of radical behaviorism. Such a separation is problematic as the cause of the event is held to reside in the event itself. This concern is indicative of an inherent issue with the logical assumption of the science. It is suggested that causal constructs be rejected at the postulation level as archaic, and that ways of speaking be coherently and logically assembled within a comprehensive system. To this end, Interbehaviorism is offered as a possible philosophical system for reassembly and reconciliation.

* Analysis of relational hierarchical behavior and transformation of functions

Lidia Budziszewska, M.S., European University of Madrid & University of Almería

Carmen Luciano, Ph.D., University of Almería

Enrique Gil, Ph.D., University of Almería

Zaida Callejón, Ph.D., University of Almería

The published evidence concerning transformation of functions in accordance with the relational frame of hierarchy is still very scarce; Gil, Luciano, Ruiz and Valdivia (2011) Gil, Luciano, Ruiz, Valdivia (2014) and Slattery & Stewart (2014).The aim of this study is to advance in such a track to provide more precise learning procedures.

In this series of experiments participants were given three types of experimental histories prior to testing transformation of function according to hierarchical framing. In the first experiment (n=8) two relational cues (same and inclusion) were trained, in the second one (n=8) the cues were instructed and in the third one (n=8) only the same cue was instructed. In experiment 1 five out of eight participants responded correctly to the Final Test. In experiment 2 seven out of eight and in experiment responded correctly. In the experiment 3 two participants responded correctly to the Final Test. Implications, limitations, and further research are discussed.

* Self as Context as a mediator for the association between interoception and alexithymia: Implications for a Process Based Therapy

Darren Edwards, Ph.D., Swansea University

Background: Alexithymia is a personality trait which is characterized by an inability to identify and describe conscious emotions of oneself and others. Aim: The present study aimed to determine whether various measures of mental health, interoception, psychological flexibility, and self-as-context, predicted alexithymia as an outcome, and what the relevant mediators were. Methodology: Two hundred and thirty participants completed an online survey which included the following questionnaires: Toronto alexithymia scale; Acceptance and Action Questionnaire 2 (AQQII); Positive and Negative Affect Scale (PANAS), Depression, Anxiety and Stress Scale 21 (DAS21); Multidimensional Assessment of Interoceptive Awareness (MAIA); and the Self-as-Context (SAC) scale. A stepwise backwards linear regression and mediation analysis were performed. Results: Higher levels of alexithymia were associated with increased psychological inflexibility, lower positive affect scores, and lower interoception for the subscales of ‘not distracting’ and ‘attention regulation’. SAC mediated the relation between emotional interoception and total alexithymia. Conclusion: The findings were discussed within the context of developing a SAC processed-based therapeutic model for alexithymia, where it is suggested that alexithymia is a complex and multi-faceted condition.

Educational Objectives:

1. Discuss ACT from the framework of Eastern and Greek philosophies, and identify points of distinction and overlap.

2. Define inter-behaviorism and its implications for identifying “causes” of behavior.

3. Describe hierarchical framing and the clinical implications of self-as-context.

**124. On Becoming a Peer Reviewed Trainer: Shared Experiences and Support**

Panel - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Didactic presentation*

Categories: Supervision, Training and Dissemination, Professional Development, Peer Reviewed Trainer

*Target Audience: Beginner, Intermediate*

Chair: Victoria Follette, Ph.D., Florida Institute of Technolong

Discussant: Mônica Valentim, Ph.D., Bem Humano Des. Pessoal

Louise Shepherd, M(Psychol), The Sydney ACT Centre

Ole Taggaard Nielsen, DClinPsy, ACT Klinikken

Shamell Brandon, Psy.D., ABPP, Lehigh University Counseling and Psychological Services

Not sure “Peer Reviewed Trainer” fits with your conceptualized self? Fused with thoughts of “I’ll never pass the RFT essays?” Is your imposter passenger annoyingly loud any time you open the PRT application? You are not alone and this panel is for you! The ACBS Training Committee has organized this panel to encourage and support anyone considering becoming a Peer Reviewed Trainer (PRT). The panel consists of current PRTs as well as individuals who are earlier in their journey to becoming a PRT. They will share their experiences, including struggles they faced along the way and some of the values that led them to choose to this path of service. There will also be ample time for the audience to ask questions.

We know that becoming a PRT is a long and sometimes challenging road (and spoiler alert, that imposter syndrome thing doesn’t magically go away once you get the title of PRT!). But we hope attending this panel can support you in taking that journey if doing so is in line with your values.

**125. The Flexible Mind: Acceptance and Commitment Approaches to Athletes' Wellbeing and Performance**

Workshop - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review*

Categories: Prevention and Community-Based Interventions, Performance-enhancing interventions, Sport

*Target Audience: Beginner, Intermediate, Advanced*

Ross White, Ph.D., University of Liverpool

Stephen Leckey, Ph.D., Ayshire College, UK

Elite sport can be an unforgiving and harsh environment. Various factors operating at different levels (the athlete, their relationships with others, the organisational context/culture that the athlete operates in) can impact on the wellbeing and performance of athletes. Unfortunately, efforts to enhance performance may not always be conducive to mental health and wellbeing, and strategies used by athletes to avoid difficult thoughts and emotions may be counterproductive for performance. Jointly developed by performance psychologists, clinical psychologists and sport scientists, the 'Flexible Mind' approach draws on contemporary psychological theory and research to demonstrate how contextual behavioural science can be used to maintain an optimal balance between wellbeing and performance. The workshop will: describe the rationale for the 'Flexible Mind' approach, present the P.O.D (Present, Open and Doing what matters) approach to formulation, and provide an overview of seven sessions that can be used to deliver the ‘Flexible Mind’ approach. Case study material from various sports will be used to illustrate how the approach can help athletes to excel and stay well.

Educational Objectives:

1. Describe the rationale for the 'Flexible Mind' approach to optimising the balance between athletes' wellbeing and performance.

2. Explain how to utilise the P.O.D (Present, Open and Doing what matters) approach to formulating athletes' situations.

3. Describe how seven separate ‘Flexible Mind’ sessions could be structured to deliver the approach.

**126. Prosocial for Social Activists**

Workshop - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Didactic presentation, Experiential exercises*

Categories: Prevention and Community-Based Interventions, Evolution, Prosocial

*Target Audience: Beginner, Intermediate*

Beate Ebert, Dipl.-Psych., Private Practice

Lori Wiser, M.A.H., MBA, Prosocial World

Globally, we are facing multiple challenging social, political and environmental issues including climate change, the COVID-19 pandemic, poverty, systemic racism, a refugee crises, gender inequality and more. These issues can be considered symptomatic of a larger problem – conflict between values of prosociality and selfish interests. This workshop focuses on how to increase the number of choices for prosociality on a larger scale.

We present Prosocial as a process that supports you in developing your vision for social change; it will empower you to establish or improve your group, and you can acquire skills to better address the problems that matter to you.

We will:  provide accessible, evidence-based information about individual and group processes; use the Matrix to create a collective vision and take effective action; explore 8 core group design principles and their implementation; support you to identify concrete goals.

We welcome individuals interested in creating a group, people seeking to enhance their established group, researchers interested in investigating Prosocial, and Prosocial facilitators who are willing to supervise projects initiated within this workshop.

Educational Objectives:

1. Utilize Ostrom's design principles and the Prosocial process to their environmental, social and political challenges.

2. Explain how to build and strengthen groups for social change and how they can take efficient action.

3. Initiate concrete projects within this workshop that will be followed up and supervised on the Prosocial community website.

**127. ACT and Psychosis: Creating a context for behavior change, together!**

Workshop - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Prevention and Community-Based Interventions, Psychosis

*Target Audience: Beginner, Intermediate*

Joris Corthouts, PC St Hiëronymus

Emile Van Bellingen, PC St Hiëronymus

Recently, approaching invasive experiences from an ACT-perspective has become more known and practiced (Morris, Johns & Oliver (2013); O’Donoghue et al (2018); Goubert et al (2020)).

What we notice in the city of St Niklaas (B) is that working with these service-users is best done in different contexts and from an equal relationship (what can you learn from me? and what can I learn from you?). This was, also, translated in the BOTS-project (https://www.facebook.com/botssintniklaas/ ).

‘BOTS’ is a place where people with psychosis sensitivity have the opportunity to meet and find tools to improve their quality of life, as a visitor, volunteer, staff-member,…. Facilitators of the project are all trained in ACT. One of the ACT-based workshops is "Get more out of life". At the start, the workshop was led by a professional; now we have evolved into a collective of professionals and volunteers with lived experiences. The interaction within the collective stimulates the richness and creativity of the workshop.

In this workshop you will learn about the BOTS-project and be part of the workshop

Educational Objectives:

1. Implement flexible and outside-of-the-box-thinking to improve quality of life when working with invasive experiences

2. Explain the significant value of working alongside people with lived experience as part of your intervention team.

3. Describe how people with lived experiences train each other.

**128. Improving our Tools: The Fundamentals of Crafting and Optimizing Measures**

Workshop - Sunday, 27 June (12:00 PM - 1:30 PM)

Components: *Case presentation, Didactic presentation, Experiential exercises, Original data*

Categories: Statistics / Measure Development, Measure development

*Target Audience: Beginner, Intermediate, Advanced*

Ronald Rogge, Ph.D., University of Rochester

This workshop will cover the basics of developing, validating and optimizing a self-report measure, with a particular focus on measures of psychological flexibility. The workshop will outline the key steps in measure development and the critical decisions faced by measure developers. Within that larger structure, the workshop will briefly introduce, cover the strengths and weaknesses of, and provide concrete demonstrations of a set of common statistical techniques used in measure development, including:

* Classic test theory analyses and Cronbach alpha coefficients
* Exploratory Factor Analysis
* Generalizability of internal consistency analyses
* Techniques to validate scales (i.e., convergent, discriminant, and incremental predictive validity)
* Item Response Theory analyses

If time permits, the workshop will also briefly cover:

* Confirmatory Factor Analysis
* Measurement invariance

The demonstrations will make use of commonly used statistics packages (e.g., SPSS, Mplus) and the sample data and syntax used in the demonstrations will be provided. Through the demonstrations and associated discussions, the workshop will focus on building the practical knowledge of the attendees to help inform their own measure development.

Educational Objectives:

1. Outline a comprehensive, multistage, measure development plan tailored to their own interests and to the resources they have available.

2. Effectively integrate the findings of various statistical techniques (e.g., EFA, IRT, internal consistency) to select the most effective items from an item pool.

3. Describe the various forms of measure validity and detail the specific statistical techniques/approaches that can be used to demonstrate them for a new scale.

**129. The ACT Therapeutic Relationship: Creating Healthy Alliances and Repairing Ruptures**

Workshop - Sunday, 27 June (12:00 PM - 3:15 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Role play*

Categories: Clinical Interventions and Interests, Supervision, Training and Dissemination, Therapeutic alliance and repairing ruptures

*Target Audience: Beginner, Intermediate, Advanced*

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation

Manuela O'Connell, Lic., Private Practice, Universidad Favaloro

The ACT therapeutic relationship, or alliance, is an essential part of effective therapy. In acceptance and commitment therapy (ACT), the alliance is characterized by the client and therapist working together, using the core processes of ACT, creating a vital and moment-by-moment collaborative experience. Building healthy, supportive, and enriching relationships is necessary for integrating the six core processes of ACT in a fluid and flexible manner. As well, therapists facing a rupture in the alliance may be challenged to mend the discord in a forward-moving and effective treatment service that is ACT consistent. In ACT, processes such as defusion, perspective-taking, choice, and values play a role in restoring a cooperative, engaged alliance repair. We will explore the therapeutic relationship within the ACT model and present its perspective on rupture and repair in psychotherapy. This workshop will use didactic, experiential, and role-play exercises to convey the material.

Educational Objectives:

1. Describe the ACT therapeutic stance in creating a strong therapeutic alliance.

2. Describe what a rupture in the therapeutic relationship is from an ACT perspective.

3. Describe how to make a repair in the alliance from an ACT perspective following a rupture.

**130. IRAP can capture Japanese’s AARRs in flight: Interpreting from DAARRE model**

Symposium - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Experiential exercises, Original data*

Categories: Relational Frame Theory, Other, IRAP, DAARRE model, Japanese

*Target Audience: Beginner, Intermediate*

Chair: Shinji Tani, Ph.D., Ritsumeikan University

Discussant: Giovanni Miselli, Ph.D., Psy.D., BCBA, Fondazione Istituto Ospedaliero Sospiro Onlus

Zhang Pin, M.A., Ritsumeikan University

Kazuya Inoue, Ph.D., Waseda University

Yuki Shigemoto, Ph.D., Kyoto Bunkyo University

We have been conducting studies to capture Japanese AARRing by using an IRAP. We examined the results from DAARRE model. The symposium has consisted of three studies. Though these are post hoc analyses, we consider DAARRE model (also HDML framework) is useful to understand AARRings captured in an IRAP more. The first study investigated the effect of instruction, which is asked a participant to imagine the scenes helping others, on IRAP effect. The second study reported that the results of the unworkable change agenda IRAP (Inoue et al., 2020) will be interpreted using the DAARRE Model. The third study (Yuki Sigemoto) investigated the difference of D-scores between Depressive and non-Depressive participants. The results of ANOVA showed that D score of trial type 1 was significant higher than that of trial type 4 for highly depressive people. However, a D score difference between trial-type 1 and trial-type 4 for low depressive people was not shown.

We would like to discuss DAARRE model to understand AARRings more precisely both of experimental and clinical study.

* Verbal instruction may affect STTDE: Improving sensitivity to context affects altruistic behavior IRAP

Zhang Pin, Ritsumeikan University

Shinji Tani, Ph.D., Ritsumeikan University

We have conducted self-IRAP studies for Japanese and Chinese participants recent years. We reconsider the data of them on the basis of DAARRE model. The instruction was used for a participant to explore the sources of influence on altruistic behaviors. The experiment was conducted by using a 2 (experimental group or control group) x 2 (Pre or Post) design. The results of the DIRAP-Score in the Japanese experimental group showed a significant bias after the intervention in the trial-type 1 (I-altruism), whereas for the Chinese experimental group all of trial-types showed no significance bias. In the Japanese experimental group, the results of ANCOVA showed that the D scores of trial-type 1 changed significantly(F (1,32)= 24.00, p ＜ .01, η2 = .62). The result was considered that the instruction enhanced the STTDE (single-trial-type-dominance-effect) in Japanese participants.

* Unworkable Change Agenda IRAP: Analyzing and Interpreting Effects in DAARRE Mode

Kazuya Inoue, Ph.D., Faculty of Human Sciences, Waseda University

In this presentation, the results of the unworkable change agenda IRAP (Inoue et al., 2020) will be interpreted using the DAARRE Model. In a study published by Inoue et al. (2020), when IRAP was performed on non-ACT and ACT learners, the result was that the former had a higher change agenda IRAP score in all trial types compared to the latter. Aspects of a stimulus utilized in the procedure, such as its function and relationship with other stimuli, were confirmed using the DAARRE model, leading us to believe that it may be possible that the trial type in which the single-trial-type dominance effect is observed differs between non-ACT and ACT learners. Specifically, it was predicted that for the former, a single-trial-type dominance effect would be observed in the change agenda-positive-true trial type and for the latter, in the acceptance-positive-false trial type. We believe that this prediction is validated by the data obtained by Inoue et al. (2020). Finally, from these results we will consider how responses to IRAP change as the understanding of ACT deepens.

* The depressed people really prefer positive language; the IRAP date investigated from DAARRE model

Yuki Shigemoto, Ph.D., Kyoto Bunkyo University

Introduction: The purpose of this study was to investigate the validity of relation framing in the Kanji Maze Technique (KMT). KMT has been developed as a measure to examine relational framing, behavioral flexibility and depressive rumination. However, Shigemoto and Muto (2018) showed the KMT does not have the validity of relational framing.

Method: 49 participants responded to the KMT, IRAP, and Questionnaires. Results: Correlation results revealed no correlation between KMT and IRAP, and positive correlation between KMT and RRS. The results of ANOVA showed that D score of trial type 1 was significant higher than that of trial type 4 for highly depressive people. However, a D score difference between trial type 1 and trial type 4 for low depressive people was not showed. Conclusion: The validity of relational framing for KMT was not showed. The results showed that depressive people responded more quickly to positive words. The orienting function of positive words was stronger than that of negative words for depressive people.

Educational Objectives:

1. Describe STTDE ( a single-trial-type dominance effect) in an IRAP.

2. Describe DAARRE model (the Differential Arbitrarily Applicable Relational Responding Effects ) of IRAP.

3. Explain how to bridge a basic study with a clinical study.

**131. Investigating Acceptance and Commitment Therapy Interventions and Processes in Obsessive-Compulsive and Related Disorders**

Symposium - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Clinical Interventions and Interests, Obsessive-Compulsive and Related Disorders

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Leila Capel, B.A., Utah State University

Discussant: Michael Twohig, Ph.D., Utah State University

Julie Petersen, B.S., Utah State University

Brooke Smith, Ph.D., Western Michigan University

Clarissa Ong, M.S., McLean Hospital/Harvard Medical School

Jennifer Krafft, M.S., Utah State University

Obsessive-Compulsive Related Disorders (OCRDs) have traditionally been treated using cognitive behavioral therapies (eg. Exposure and Response Prevention and Habit Reversal Training) delivered in-person based on the availability of trained clinicians in these evidence-based practices. Recent research has found that the core processes in Acceptance and Commitment Therapy (ACT), like psychological flexibility, are associated with symptom severity in OCRDs (Krafft, Ong, Twohig, & Levin, 2018; M.P. Twohig et al., 2021; M. P. Twohig, Plumb Vilardaga, Levin, & Hayes, 2015) which has led to an expanding library of research on ACT-based interventions for both adults and adolescents. This symposium highlights recent research on ACT-based interventions of OCRDs (OCD, Hoarding Disorder, Perfectionism and Intrusive Thoughts) delivered in-person, via telehealth and in self-help formats and how the core processes of ACT impact symptom severity in clinical and non-clinical populations.

* Sexual orientation intrusive thoughts and well-being: The mediating role of psychological inflexibility

Julie M. Petersen, B.S., Utah State University

Michael P. Twohig, Ph.D., Utah State University

Sexual orientation intrusive thoughts are a debilitating form of obsessive compulsive disorder (OCD). Given how common and impairing sexual orientation intrusive thoughts are, there is a need to understand how these thoughts are maintained. The present study aimed to elucidate the respective influences of psychological inflexibility and dysfunctional beliefs on sexual orientation intrusive thoughts, obsessive-compulsive (OC) symptoms, and well-being. A total of 181 undergraduate students completed measures of sexual orientation intrusive thoughts, OC symptoms, psychological inflexibility, dysfunctional beliefs, and well-being. Psychological inflexibility acted as a mediator between sexual orientation intrusive thoughts and well-being, as well as between OC symptoms and well-being. These results suggest that psychological inflexibility may partially explain the association between OC symptoms and well-being better than dysfunctional beliefs. Both correlational and mediational results will be presented, along with future directions for research in intrusive thoughts.

* Initial efficacy and acceptability of an ACT self-help website for hoarding

Jennifer Krafft, M.S., Utah State University

Julie M. Petersen, B.S., Utah State University

Michael P. Twohig, Ph.D., Utah State University

Michael E. Levin, Ph.D., Utah State University

Hoarding affects approximately 2.5% of the population (Postlethwaite et al., 2019) and is linked to significant impairment (Ong et al., 2015). CBT for hoarding disorder is effective, but is highly resource-intensive (Tolin et al., 2015) and does not directly target several processes linked to hoarding including mindful awareness and values (Ong et al., 2018). To address these limitations, we evaluated an ACT self-help website with minimal supportive coaching for hoarding in a randomized waitlist-controlled trial. The sample comprised 73 adults with clinically significant hoarding. ACT website users significantly improved on hoarding severity (b = -0.38, p < .01), functional impairment (b = -0.39, p < .001), values progress (b = 0.44, p < .001), and self-stigma (b = -0.59, p < .001) relative to waitlist. Significant improvements over waitlist were also observed on the processes of mindful awareness (b = 0.56, p < .001) and hoarding-related psychological inflexibility (b = -0.41, p < .01). Overall, initial results suggest that an ACT self-help website is an efficacious and acceptable treatment for hoarding.

* Examining an Online Self-Help Process-Based Intervention for Clinical Perfectionsim

Clarissa W. Ong, M.S., Utah State University, McLean Hospital/Harvard Medical School

Eric B. Lee, Southern Illinois University

Michael E. Levin, Utah State University

Michael P. Twohig, Utah State University

Process-based therapy (PBT) is a model of assessment and intervention focused on the context-sensitive use of evidence-based procedures to effect change in relevant processes to ultimately improve individual wellbeing. PBT straddles theoretical orientations and therapeutic techniques, emphasizing utility of processes and procedures over their provenance. In the current study, we examined the efficacy of a PBT-based online self-help program for clinical perfectionism. In the intervention we developed, we provided several evidence-based techniques for increasing cognitive and motivational variability, including cognitive defusion, cognitive restructuring, stimulus control, and values clarification. We randomized participants to receive cognitive variation training or motivational variation training first; all participants received both trainings. Results indicated improvement in clinical perfectionism, self-compassion, quality of life, depression, anxiety, and stress, but not valued living, over time. In addition, between-condition effects were not significant, suggesting that order of delivery of trainings did not affect outcomes. These findings provide a proof of concept for process-based therapy and support teaching skills from different theoretical orientations within an explicit framework of varying responses to fit situations or context-specific responding.

* Processes of Change During Exposure for Intrusive Thoughts

Brooke M. Smith, Western Michigan University

Tyson S. Barrett, Utah State University

Michael P. Twohig, Utah State University

Despite the success of exposure-based cognitive behavioral therapies for OCD, response rates are only 43% at posttreatment and 36% at follow-up. To best serve our clients, it is essential to improve exposure treatment. One approach to improving exposure is to gain a better understanding of how exposure works (i.e., its processes of change) and use this information to optimize exposure techniques. This study investigated acceptance and regulation of distress during exposure. Participants with intrusive thoughts were randomized to Acceptance (n = 23), Regulation (n = 20), or Control (n = 21) and completed two behavioral avoidance tests (BATs) 1 week apart. Active treatment participants completed a 30-minute exposure plus 6 days of 10-minute exposures at home; Control participants watched matched duration videos. For participants in both active treatment conditions, cross-lagged multilevel models during the 30-minute exposure indicated that willingness to experience distress predicted decreased distress 5 minutes later in exposure, while distress did not significantly predict later willingness. Results suggest that willingness to experience distress may paradoxically lead to decreased distress, supporting ACT theory.

Educational Objectives:

1. Describe the role of ACT-based processes on OCRD symptom severity.

2. Describe the role of self-stigma on symptom severity of OCRDs.

3. Discuss the role of psychological inflexibility in treatment of OCRDs.

**132. ACT and Chronic Health Conditions: Opportunities, Challenges, and Future Directions**

Panel - Saturday, 26 June (1:45 PM - 3:15 PM)

Components: *None of these*

Categories: Clinical Interventions and Interests, Behavioral medicine, ACT, Chronic health conditions

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Marissa Donahue, M.A., Utah State University

Joanna Arch, Ph.D., University of Colorado Boulder

Maria Karekla, Ph.D., University of Cyprus

Dayna Lee-Baggley, Ph.D., Dalhousie University

Lilian Dindo, Ph.D., Baylor College of Medicine

Acceptance and commitment therapy (ACT) may prove to be an effective approach for individuals coping with the challenging symptoms and effects of having a chronic health condition. Prior research shows that ACT has been helpful in improving symptoms for various health conditions such as chronic pain, cancer, cardiac disease, diabetes, and multiple sclerosis. The primary goal of this roundtable is to bring together experts on ACT with people living with chronic health conditions for a nuanced discussion on the opportunities, challenges, controversies, clinical innovations and future directions for examining and implementing ACT for those living with chronic health conditions. Our diverse panel will discuss the role of ACT as a transdiagnostic treatment of those with chronic health conditions, barriers in integrating ACT with health care treatment, useful strategies in working on an interdisciplinary team, and dissemination and implementation strategies to effectively introduce ACT.

Educational Objectives:

1. Describe ACT as a transdiagnostic approach to treatment in various contexts.

2. Describe some of the barriers in integrating ACT with health care treatment.

3. List useful strategies for working on an interdisciplinary team.

**133. Validación y comunicación entre pacientes con cáncer y sus cuidadores primarios: Argentina Chapter Sponsored**

Panel - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Didactic presentation*

Categories: Clinical Interventions and Interests, Other, ACT, FAP (ACL), DBT, Compasión

*Target Audience: Beginner*

Gabriela López Elias, Centro Argentino de Psicooncología y Psicoterapias Contextuales

Sebastián Ortiz, Centro Integral de Psicologia Contextual (CIPSYC)

Ana Bautista, Ph.D(c), Asociación de Familias de Niños con Cáncer Afanion

Paula José Quintero, Fundación Foro

En el acompañamiento psicoterapéutico a pacientes con cáncer, los terapeutas nos encontramos con una problemática frecuente: la invalidación emocional y la falta de efectividad en la comunicación entre consultantes y cuidadores primarios. Las Terapias Contextuales comprenden que esta dinámica relacional lleva a la evitación experiencial, dando lugar a un sufrimiento agregado en pacientes y cuidadores (Páez et al., 2005).

El lenguaje, las creencias y los mitos acerca del cáncer, llevan a asociar dicha enfermedad con la finitud, el sufrimiento físico, mental, y a la tendencia cultural de silenciar las emociones y pensamientos (Montesinos, F., 2005; Levin et al., 2020). En este contexto, se observa en la clínica una tendencia a la evitación, en donde los pacientes no comparten con los cuidadores sus eventos privados (Pérez et al., 2016) por sentirse invalidados.

Es por esto que existe una necesidad de dar respuestas a dicha problematica desde diferentes Enfoques Contextuales, presentando aportes desde ACT, FAP (ACL), DBT y Terapias Basadas en Compasión.

Educational Objectives:

1. Describir problematicas comunes que dificultan la comunicación entre pacientes con cáncer y sus cuidadores primarios.

2. Describir y establecer elementos comunes en el abordaje de las dificultades comunicacionales desde las Terapias Contextuales.

3. Identificar y sugerir elementos clinicos a considerar a la hora de trabajar con pacientes con cancer y sus familiares.

**134. Moving from the Illusion of Equity to Meaningful Action: A Prosocial Approach to Overcoming Barriers: Women in ACBS SIG Sponsored**

Workshop - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Didactic presentation, Experiential exercises*

Categories: Diversity, equity, and inclusion, Evolution, Prosocial matrix

*Target Audience: Beginner, Intermediate, Advanced*

Natalia Baires, Ph.D., BCBA-D, Southern Illinois University

Luisa Canon, Psy.D., BCBA-D, ACT to Thrive

Vanessa del Aguila, Bachelor degree, Private practice

Lisa Fox, M.Ed., BCBA, Fox Behavior Coach

Amy House, Ph.D., Augusta University

Louise Hankinson, DClinPsy, HCP

Sandra Olarte-Hayes, LCSW, Colors of Austin Counseling

Jill Saxon, Ph.D., BCBA-D, LBA, Private Practice

Values based in Diversity, Equity and Inclusion (DEI) have grown within the ACBS community. Yet, there appears to be a disconnect between our stated values and meaningful actions, leading to slowed progress and increased conflict. This workshop will use the principles of Prosocial and ACT to functionally analyze the workability of existing efforts and identify and intervene around barriers within individuals and groups who value DEI. The Matrix will be used as a framework throughout this analysis to cultivate introspection and facilitate the establishment of behavior variability. This will provide the opportunity for the selection and retention of behaviors that generate the desired tangible changes in the context of DEI in the ACBS community. Participants will leave with: (a) a deeper awareness of their internal barriers, (b) the tools to continue to assess their behavior on an ongoing basis, and (c) a sense of belonging to a group with a shared purpose around alleviating human suffering. Our aim is to build a community that works for everybody, taking us from illusion to reality.

Educational Objectives:

1. Establish and clarify values in the context of DEI through the principles of Prosocial.

2. Identify the function of individual and group efforts, increasing awareness of current barriers towards meaningful action within DEI.

3. Explain how to develop a plan for committed action that increases the workability of DEI efforts within ACBS and beyond.

**135. ACT for Adolescents: Lessons learned in cyberspace: Children, Adolescents & Families SIG Sponsored**

Workshop - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Case presentation, Conceptual analysis, Experiential exercises, Original data*

Categories: Clinical Interventions and Interests, Functional contextual approaches in related disciplines, Adolescents, Teens, Parents, Group Therapy, Virtual Therapy, Anxiety, Depression, Disordered Eating, OCD, Gender, Substance Use, Chronic Illness, ACT, Individual therapy

*Target Audience: Intermediate*

Sheri Turrell, Ph.D., C. Psych, Life in Balance Therapy

Mary Bell, MSW RSW, Private Practice

Sara Ahola Kohut, Ph.D., C.Psych., The Hospital for Sick Children

Some clinicians, originally compelled to work in cyberspace by the pandemic, are seeing online counselling as an enduring option to reduce isolation and increase accessibility for teens. This workshop opens a forum to share and discuss the challenges and successes of facilitating teen groups online. Participants will have an opportunity to experiment with and process experiential exercises that facilitators have successfully transitioned online. These seasoned clinicians share learning from their online work with teens in hospital and community settings, adapting 10 years of in-person work to the virtual context. They bring you what worked and what flopped in translating ACT processes into cyberspace. Teens in their online groups struggled with a variety of issues, including but not limited to: developmental tasks (i.e., sexual orientation, separation and gender identity), substance use, eating disorders, anxiety, depression, suicidality, self harm, and chronic disease. Consideration of developmental ethical / legal issues will be woven throughout the workshop and quantitative / qualitative feedback from participants highlighted. Reflections on adaptations to parent groups and individual therapy are included.

Educational Objectives:

1. Describe ways to prepare and create a safe space that increases client engagement despite technological challenges of the online format.

2. Analyze the applicability of experiential exercises to your virtual practice.

3. Describe how to plan virtual groups that take into consideration developmentally informed ethical / legal concerns raised by working virtually with teens and / or parents.

**136. Lo experiencial en la psicoterapia: Los Niveles de Interacción Clínica**

***The experiential in psychotherapy: the levels of clinical interaction***

Workshop - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Conceptual analysis, Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Conductas en sesión

*Target Audience: Beginner, Intermediate*

Fabian Maero, Psy.D., University of Buenos Aires

Un desafío importante del trabajo clínico con ACT es cómo llevar a cabo sesiones experienciales, evitando interacciones clínicas excesivamente analíticas y lógicas, que si bien pueden ser conceptualmente «correctas», resultan frías y desconectadas de la experiencia de lxs consultantes.

Los Niveles de Interacción Clínica (NIC) son un marco conceptual simple que se puede utilizar para evaluar e influenciar el grado de experiencialidad de las interacciones clínicas en Terapia de Aceptación y Compromiso, especialmente las conversaciones terapéuticas. El uso de los NIC como guía clínica pueden ayudar a reconocer cuándo las interacciones están siendo experienciales y cuándo no, basándose en el nivel de abstracción de la conducta verbal que está siendo utilizada en cada momento. Asimismo, los NIC se pueden utilizar para potenciar la experiencialidad de las intervenciones clínicas, conectando conceptos abstractos con experiencias concretas.

*The levels of clinical interaction (NIC, for its acronym in Spanish) are a simple conceptual framework that can be used to assess and influence the degree of experientiality of clinical interactions in Acceptance and Commitment Therapy, especially therapeutic conversations. The use of NICs as a clinical guide can help to recognize when the interactions are being experiential and when they are not, based on the level of abstraction of the verbal behavior that is being used at each moment. Likewise, NICs can be used to enhance the experientiality of clinical interventions, connecting abstract concepts with concrete experiences.*

Educational Objectives:

1. Identificar grados de abstracción en las interacciones clínicas.

2. Identificar los usos básicos de cada nivel de interacción.

3. Explique cómo elegir deliberadamente el nivel de interacción más apropiado para los objetivos clínicos actuales.

**137. You-Here-Now: Using FAP to Respond More Effectively To Your Challenges as a Therapist**

Workshop - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Clinical Interventions and Interests, Performance-enhancing interventions, FAP

*Target Audience: Beginner, Intermediate, Advanced*

Miranda Morris, Ph.D., True North Therapy and Training

Holly Yates, M.S., LCMHC, Certified FAP Trainer, Private Practice

As a therapist, what are you afraid to say? What are you afraid to hear? What do you do that gets in the way? As human beings, we bring our own histories, our own struggles into the therapy room and - sometimes - into the therapeutic relationship. Functional Analytic Psychotherapy (FAP) is a contextual behavioral therapy that provides a framework for assessing and influencing both client and therapist behavior in session. Indeed, FAP holds that the therapeutic relationship is the agent of change and healing (Tsai. Yard & Kohlenberg, 2014). So it behooves us, as therapists, to identify and work compassionately with our own problematic behaviors, those that interfere with change and healing.

This workshop is not for the faint of heart. We will use experiential exercises to help participants identify their problematic behaviors (termed “T1s”) and to illuminate the contextual variables that evoke them. In addition we will use real and role-play interactions to evoke T1s, shape them into more workable behaviors (termed “T2s”) and reconnect with our most aware, courageous and loving selves.

Educational Objectives:

1. Identify at least one problematic behavior they struggle with in session (T1).

2. Explain how unhelpful therapist behaviors interfere with processes related to client change and healing.

3. Identify at least one strategy for responding more effectively to their T1’s

**138. Belonging As Our Birthright: Cultivating Belonging from the Inside Out**

Workshop - Sunday, 27 June (1:45 PM - 3:15 PM)

Components: *Didactic presentation, Experiential exercises*

Categories: Clinical Interventions and Interests, Professional Development, Belonging

*Target Audience: Beginner, Intermediate, Advanced*

Meg McKelvie, Ph.D., Self Employed

Debbie Sorensen, Ph.D., Private Practice

Who among us does not yearn to belong? The longing to be loved, seen, valued and included is not just a current day experience, but part of our evolutionary history and survival as a species. To be part of a group, to belong, meant our individual and collective survival (Hayes, 2019).

In our connection-starved and increasingly isolated culture, we can become entangled with the conceptualized self, attempting to gain group membership and social connection by presenting ourselves as special, smart, or in need of great care. We can become unknowingly trapped inside our mismanaged yearning to belong, making it increasingly difficult to create healthy social connection (Hayes, In Press).

Drawing from A Liberated Mind, we will use experiential exercises, expressive writing, and small group work to drop below self-story and contact a sense of belonging from the inside out. We will practice body centered mindfulness, perspective taking, being more fully ourselves in the moment, and letting go of our self-stories to cultivate a healthy sense of belonging, transcendence, and an interconnected sense of we.

Educational Objectives:

1. Explain the yearning to belong in CBS terms, including the relationship between pain and values related to our yearning to belong.

2. Identify clinical signs of a mismanaged yearning to belong and apply the psychological flexibility model to guide responding to experiential avoidance, self-stories and self-limiting content about belonging.

3. Develop compassion-based writing and experiential practices to cultivate belonging that allow us to cut through unhelpful content.

**139. Enhancing College Student Mental Healthcare with Acceptance and Commitment Therapy**

Symposium - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Original data*

Categories: Prevention and Community-Based Interventions, Educational settings, College Students

*Target Audience: Beginner, Intermediate*

Chair: Morgan Browning, B.A., B.S., University of Massachusetts, Dartmouth

Discussant: Evelyn Gould, Ph.D., BCBA-D, Harvard Medical School

Alexandra Morena, B.S., University of Massachusetts, Dartmouth

Rebecca Schneider, Ph.D., Emory University School of Medicine

Korena Klimczak, B.S., Utah State University

College students face increasing rates of mental health challenges, although a minority of students seek help (Auerbach et al., 2016). Enhancing effectiveness, efficiency, and accessibility of mental health resources in the college setting is important. Acceptance, mindfulness and values based interventions, and specifically Acceptance and Commitment Therapy (ACT) (Hayes et al., 2016) provide valuable tools to pursue delivery of services in this unique setting (Pistorello et al., 2013). The first paper will explore rates of maladaptive coping skills in a medium size public university and explore future strategies to identify at-risk students and to reach students. The second paper provides research on the role of values motivation to enhance social anxiety exposure. The third paper provides pilot data from a course-based ACT intervention which provided additional accessibility to students. The fourth paper provides data from an app-based ACT intervention to enhance the services provided by a college counseling center. The discussant has experience applying and tailoring ACT to various settings and populations and will summarize the implications of these talks for future study.

* Prevalence of NSSI utilization as a coping mechanism in university students

Alexandra Morena, B.S., University of Massachusetts Dartmouth

Paul T. Kornman, B.A., University of Massachusetts Dartmouth

Elizabeth E. Lloyd-Richardson, Ph.D., University of Massachusetts Dartmouth

Young adults transitioning to universities often encounter new challenges such as balancing personal time and academic demands (Mandracchia & Pendleton, 2015; Srivastava et al., 2009). Difficulty transitioning increases risk for adopting unhealthy coping strategies and mental health difficulties. Nonsuicidal self-injury (NSSI) is often utilized to regulate intense emotions, including stress (Taylor et al., 2018). The current study aims to understand the relationship between NSSI and other coping strategies. A broad range of university students (N = 457) participated in this cross-sectional study. Participants were tasked with answering questions of perceived stress and the How I Deal with Stress Questionnaire. 67 participants (14.6%) reported lifetime NSSI, and of those, 31.3% reported past year NSSI and 61.2% reported utilizing NSSI to cope with stress. Those who utilized NSSI to cope reported significantly higher rates of other unhealthy coping skills (e.g., illicit substance use, alcohol, and disordered eating). Results highlight NSSI as a coping mechanism is utilized substantially among students. Strategies for improving identification of at-risk students and improving interventions to reduce future NSSI will be discussed.

* Utilizing Values to Enhance an Exposure Intervention for Social Anxiety in College Students

Rebecca L. Schneider, Ph.D., Emory University School of Medicine

Joanna J. Arch, Ph.D., University of Colorado Boulder

Introduction: College students underutilize anxiety treatment. Values can enhance motivation and engagement, however few studies have examined the additive role of values in an exposure context. We investigated whether explicitly linking values to exposure enhanced effectiveness compared to an extrinsic reward. Methods: 60 college students with self-reported social anxiety were randomized to values-enhanced exposure, monetary reward-enhanced exposure, or exposure alone. They completed two laboratory sessions and a two-week online follow-up. Results: Linking exposures to one’s values decreased post-speech anxiety (p=.03), which generalized to anticipatory anxiety prior to a novel speech (p=.02). Linking exposures to money temporarily increased speech length (p=.02), particularly for those who expressed less change readiness (p<.01), but this did not generalize (p=.16). Those in the values condition with greater values clarity spoke longer during the novel speech (p=.04). Conclusion: Extrinsic motivators may help initiate behavior change in students without internal motivation, while a values intervention can enhance exposure learning and subsequently decrease subjective anxiety across feared situations, particularly for those with values clarity. This supports framing exposures from an ACT-based values perspective.

* A Short-Term ACT Intervention: Pilot Delivery to an Undergraduate Psychology Course

Morgan E. Browning, B.A., B.S., University of Massachusetts Dartmouth

Alexandra Morena, B.S., University of Massachusetts Dartmouth

Evelyn Gould, Ph.D., BCBA-D, New England Center for OCD and Anxiety

Elizabeth E. Lloyd-Richardson, Ph.D., University of Massachusetts Dartmouth

College students face significant mental health challenges, especially since the COVID-19 pandemic, and they have low rates of help-seeking (Czeisler et al., 2020 and Rasanen et al, 2016). Acceptance and Commitment Therapy (ACT) targets core processes to increase psychological flexibility and valued living (Hayes et al., 2016), and may benefit college student mental health (Regehr et al., 2012). Curriculum-based delivery of ACT may be an effective way to support college students (Mullen et al., 2021). A 4-session ACT intervention plus 1-month follow-up was delivered to an undergraduate psychology seminar over Zoom. Students’ stress levels decreased from pre-intervention to post [t(17)=2.4, p=0.028], and these changes maintained from post-intervention to follow-up. Students’ anxiety levels also decreased from pre-intervention to follow-up [t(17)=3.23, p=0.005]. There were no significant changes in ACT constructs across the time points. Qualitative analyses reflected students: found the lessons helpful (M=3.53/5, SD=0.70) and accessible (M=3.84/5, SD=0.83), moderately engaged with skills outside of class (36-59% depending on skill), and particularly enjoyed mindfulness exercises (73%). Future directions, iterations, and considerations will be discussed.

* Effectiveness and Implementation of the ACT Daily App for College Students

Korena S. Klimczak, B.S., Utah State University

Steven Lucero, Ph.D., University of Utah

Carter H. Davis, B.A., Utah State University

John J. Van Epps, Ph.D., University of Utah

Michael E. Levin, Ph.D., Utah State University

Online self-help holds high potential for addressing gaps in services and as an augmentation to already existing systems of care. Regardless, there is a paucity of research regarding the effectiveness and implementation of such apps and websites in systems of care such as college counseling centers (Lattie et al., 2019). Given the discrepancy between rates of engagement in randomized controlled trials as compared to in real world settings, further research is called for (Flemming et al. 2018). Thus, the present effectiveness trial investigated factors related to enrollment and usage of online self-help such as ideal contact points, characteristics of active student users, and potential barriers and facilitators. This was accomplished through distribution of the ACT Daily app in collaboration with a university counseling center (Haeger et al., In Press). Recruitment was promising, with 44 students enrolling to use ACT Daily over the course of a semester. Our results hold implications for best practices when implementing online self-help in systems of care such as college counseling centers in the future.

Educational Objectives:

1. Explain the need for increasing utilization of mental healthcare in college students and developing more accessible interventions.

2. Identify ways that Acceptance and Commitment Therapy (ACT) tools can enhance college student mental health care.

3. Discuss future directions in applying ACT to college student mental health.

**140. Self-as-context: Theory, evidence, and applications beyond traditional psychotherapy**

Symposium - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Clinical Interventions and Interests, Theoretical and philosophical foundations, Self-as-Context

*Target Audience: Intermediate, Advanced*

Chair: Joel Fishbein, M.A., University of Colorado Boulder

Discussant: Joanna Arch, Ph.D., University of Colorado Boulder

Luke Mather, B.A., University College Dublin

Kirk Warren Brown, Ph.D., Virginia Commonwealth University

Megan Godbee, MClinPsych, Ph.D. Candidate, Macquarie University

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Many clinicians, clients, and researchers find self-as-context to be the "trickiest, stickiest" (Harris, 2019) process in the ACT model. Perhaps for this reason, it has historically received less empirical attention than the other processes. Yet new theories, instruments, and experimental methods have emerged to better understand how self-as-context may contribute to psychological and societal well-being. This symposium will highlight exciting advances in the empirical study of self-as-context, and demonstrate their potential applications in the next decade of contextual science. Megan Godbee, MClin Psych, will describe the results of her systematic review of the experimental self-as-context literature. Joel Fishbein, MA, will examine self-as-context measurement across populations. Luke Mather will introduce a mixed-methods approach to studying self-as-context and its overlap with prosocial constructs. Jason Luoma, Ph.D., will highlight the potential mechanistic role of self-as-context in MDMA-assisted psychotherapy for social anxiety. Finally, Kirk Brown, Ph.D., will integrate self-as-context into a theory of how hypo-egoic states promote psychological and interpersonal well-being. Joanna Arch, Ph.D., will synthesize these findings in a discussion of self-as-context applications in contextual science interventions.

* The state of the literature of the self-as-context component of Acceptance and Commitment Therapy

Megan Godbee, MClin Psych, Macquarie Univeristy

Maria Kangas, Ph.D., Macquarie Univeristy

One of the core processes of Acceptance and Commitment therapy (ACT) is ‘self-as-context’ (SAC). SAC is conventionally taught as an extension of mindfulness, which enables individuals to focus on a stable, grounded and enduring sense-of self that is able to have a flexible perspective. There has been a growing number of studies that have evaluated the effects of the SAC component in improving emotional well-being in various samples, but the methodological quality has been variable. The literature reveals mixed findings in relation to SAC improving emotional well-being and there is currently limited evidence to support the use of the SAC component as a standalone process in ACT-based interventions. Research recommendations, particularly the need for accurate measurement of the SAC construct, contextualised experiments and methodological rigour are discussed. The authors currently have a laboratory-based study of SAC under journal review and are developing a SAC measure, both of which will also be discussed.

* Evidence for measurement invariance of the Questionnaire on Self-Transcendence across three non-clinical populations

Joel Fishbein, M.A., University of Colorado Boulder

Ruth Baer, Ph.D., Oxford University

Joshua Correll, Ph.D., University of Colorado Boulder

Joanna Arch, Ph.D., University of Colorado Boulder

In developing a broad scientific understanding of self-as-context, it is critical to determine whether self-as-context is represented the same way or differently across populations, and whether the same measure can be used across populations. Addressing these questions, we collected data on the Questionnaire on Self-Transcendence (QUEST) from separate samples of community adults (N = 213), undergraduates (N = 298) and experienced meditators (N = 227). The QUEST is comprised of three factors: the first factor, entitled 'Observing Self,' overlaps in its items and content with prior self-as-context measures, the second factor taps sense of inter-transcendent connection to others, and the third factor taps psychological distancing (akin to ACT's defusion). Measurement invariance analyses indicated that one common factor structure and set of loading weights applied well across all three populations, though measurement error differed between populations. These findings provide evidence for self-as-context as a robust dimension of mental processing related to self, alongside psychological distancing and inter-transcendence, and highlight the potential utility of the QUEST in several non-clinical samples.

* Qualitative and quantitative measures of self-as-context: Validity and relationships with empathy and prosociality

Luke Mather, University College Dublin

Alison Stapleton, University College Dublin

Louise McHugh, Ph.D., University College Dublin

The Acceptance and Commitment Therapy process known as ‘self-as-context’ has been posited to increase outcomes of societal importance, such as empathic responding and prosocial behaviour. However, research examining the nature of the relationship between these constructs is lacking. Further, the precision of ‘self-as-context’ measurement tools remains unclear. The present study will investigate the relationships between ‘self-as-context,’ empathy, and prosocialty in a sample of 30 college students using a mixed methods design. Quantitative measures of self-as-context (QUEST and SEQ), empathy, and prosociality will be used. Qualitative textual data obtained from responses to open-ended questions will be analysed using the Functional Self-Discrimination Measure (Atkins & Styles, 2016). Correlational analyses will be conducted to examine the relationships between quantitative measures and occurrences of FSDM ‘self-as-context’ codes. The findings will provide empirically-derived insights into the relationships between ‘self-as-context,’ empathy, and prosociality, potentially provide empirical support for the internal consistency of quantitative ‘self-as-context’ measures, and establish the precision and utility of the FSDM as a measure of ‘self-as-context.’

* Altered state or altered self? MDMA-assisted psychotherapy, self-transcendence, and self functioning in Social Anxiety Disorder

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center

The functioning of the self is considered central to most models of social anxiety disorder (SAD), with most models distinguishing between the functioning of the self-as-content and the self-as-process. People with SAD tend to have a generally negative self-concept manifesting in heightened self-criticism, beliefs relating to social inferiority, negative self-related imagery, and heightened access to negative autobiographical memories. Regarding self-as-process, people with SAD have a tendency to attend to threat-related cues and difficulty focusing attention on positive and affiliative cues. They also experience heightened self-consciousness and increased self-focused attention to interoceptive cues in social situations. This paper will review research on MDMA suggesting that it may help address some of these self-related difficulties through fostering experiences with self-transcendence. Concepts from relational frame theory and the psychological flexibility model will be used to contextualize these findings and inform psychotherapeutic components to maximize the gains from MDMA dosing sessions. Finally, we will discuss how these concepts are informing an upcoming clinical trial of MDMA-assisted psychotherapy for social anxiety.

* A novel conceptual model of hypo-egoic functioning

Kirk Warren Brown, Ph.D., Virginia Commonwealth University

Drawing upon theory and research in psychology, cognitive science, neuroscience, and philosophy, this presentation describes the nature of egoic and hypo-egoic functioning. Two widely-discussed forms of self-relevant processing – self-as-subject and self-as-object – are first identified and functionally described. I discuss how these self processes offer a mental model of ourselves, others, and the world that allows people to represent or simulate reality as they perceive it in the present, remembered past, and imagined future. Although the ability to think consciously about ourselves was a major evolutionary achievement, the conscious self model becomes a liability when people identify with its inherently self-centric functioning—that is, when they respond egoically. I conceptualize hypo-egoic functioning and discuss three interrelated cognitive processes central to hypo-egoicism: meta-awareness, defusion, and reduced reactivity to perceptions, thoughts, and emotions. Finally, I briefly discuss the effects of hypo-egoic functioning on psychological and interpersonal well-being, and how such functioning can be promoted.

Educational Objectives:

1. Describe the state of the evidence for self-as-context as an intervention process.

2. Discuss self-as-context measurement and interventions in clinical and non-clinical populations.

3. Explain how self-as-context may apply to the promotion of prosociality.

**141. Digital Interventions for Health Behavior Change: Innovations Using Acceptance & Mindfulness-Based Approaches**

Symposium - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Behavioral medicine, Clinical Interventions and Interests, Digital Interventions

*Target Audience: Beginner, Intermediate*

Chair: Megan Kelly, Ph.D., University of Massachusetts Medical School

Discussant: Andrew Gloster, Ph.D., University of Basel

Jaimee Heffner, Ph.D., Fred Hutchinson Cancer Research Center

Erin Reilly, Ph.D., University of Massachusetts Medical School

Despoina Iosif, M.A., University of Cyprus

Digital interventions are transforming health care delivery by increasing access to care, reducing costs, and improving satisfaction with health care. In this symposium, we will present on four innovative digital interventions that utilize acceptance- and mindfulness-based techniques to address health behavior change in three important areas: tobacco use, chronic pain, and eating behaviors. First, Jaimee Heffner will present on the development and evaluation of an Acceptance and Commitment Therapy (ACT) digital tobacco cessation intervention for sexual and gender minority young adults. Second, Megan Kelly will present on the development and qualitative findings of an ACT web-based intervention for U.S. veterans with mental health disorders. Third, Erin Reilly will present on the usability testing results of an acceptance-based chronic pain intervention that is delivered using a social robotics platform. Fourth, Despoina Iosif will discuss the feasibility and acceptability of a Multi-User Virtual Reality (MUVR) intervention for people at high-risk of developing eating disorders. The symposium will conclude with a discussion led by Andrew Gloster on the development, evaluation, and role of digital interventions for health behaviors.

* Avatar-led Digital Program for Sexual and Gender Minority Young Adult Smoking Cessation: Development and Results of Single-Arm Pilot Trial

Jaimee L. Heffner, Ph.D., Fred Hutchinson Cancer Research Center

Noreen L. Watson, Ph.D., Fred Hutchinson Cancer Research Center

Megan M. Kelly, Ph.D., University of Massachusetts Medical School; VA Bedford Healthcare System

Erin D. Reilly, Ph.D., University of Massachusetts Medical School; VA Bedford Healthcare System

Daniella Kim, Ph.D., University of Washington

Kelsey Baker, M.S., Fred Hutchinson Cancer Research Center

Scout NFN, Ph.D., National LGBT Cancer Network

Maria Karekla, Ph.D., University of Cyprus

Background: To address sexual and gender minority (SGM) young adults’ high prevalence of smoking, unique barriers to accessing cessation treatment, and preferences for SGM-targeted interventions, we developed the digital ACT-based Empowered, Queer, Quitting, and Living (EQQUAL) program and evaluated its acceptability and preliminary efficacy in a single-arm trial.

Methods: Participants (n=22) were young adults, aged 18-30, who identified as SGM and smoked at least one cigarette per day. EQQUAL is a 6-session, avatar-led program, with accompanying text messages for 6 weeks. Participants completed web-based surveys at baseline and 2-month follow-up. Self-reported smoking abstinence was biochemically verified via saliva cotinine.

Results: Overall, 93% of participants were satisfied with EQQUAL, 100% found it easy to use, and 100% said it helped them be more clear about how to quit. Quantitative and qualitative results suggested a positive overall response to the avatar guide. Biochemically-confirmed abstinence was 23%.

Conclusions: Treatment acceptability was promising, and smoking abstinence was 3 times higher than the only other digital program targeted for SGM young adults and 6-13 times higher than non-targeted digital interventions.

* A Web-Based Tobacco Cessation Intervention for Veterans with Mental Health Disorders: Design Considerations and Recommendations

Megan M. Kelly, Ph.D., University of Massachusetts Medical School; VA Bedford Healthcare System

Beth Ann Petrakis, MPA, VA Bedford Healthcare System

Erin D. Reilly, Ph.D., University of Massachusetts Medical School; VA Bedford Healthcare System

Karen S. Quigley, Ph.D., Northeastern University

Jonathan Bricker, Ph.D., Fred Hutchinson Cancer Research Center

Noreen L. Watson, Ph.D., Fred Hutchinson Cancer Research Center

Jaimee L. Heffner, Ph.D., Fred Hutchinson Cancer Research Center

U.S. veterans with mental health disorders have disproportionately high rates of smoking and low lifetime quit rates. To adapt an evidence-based web-based Acceptance and Commitment Therapy (ACT) tobacco cessation intervention for veterans with mental health disorders (Vet WebQuit), we conducted four focus groups (total n=20) and user-testing sessions (n=10) to identify useful elements of the intervention. Based on veteran feedback, recommendations to adapt ACT-based tobacco cessation content were: 1) include images of people engaged in physical activities, people with loved ones, and images of the American flag to represent the constructs of freedom and commitment, 2) avoid combat-related military images, 3) include more concrete behavioral coping strategies for smoking cravings, 4) include mindfulness exercises of emotional triggers for smoking, 5) highlight information on the health effects of smoking, 6) include more language on external and internal triggers, and 7) discuss common mental health challenges that are associated with smoking (i.e., nightmares, boredom, isolation, irritability). Results from this project identified important elements of ACT web-based tobacco cessation interventions for veterans with mental health disorders.

* An acceptance and mindfulness-based social robotics program for Veterans with chronic pain

Erin D. Reilly, Ph.D., University of Massachusetts Medical School; VA Bedford Healthcare System

Karen S. Quigley, Ph.D., Northeastern University

Arielle A. Scoglio, Ph.D., Northeastern University

Social robots (SR) are increasingly being investigated as tools to engage patients in at-home mental and physical interventions through personal interactions. Our study’s objective was to understand Veteran affective responses to and usability concerns for using an-home SR to manage chronic pain using acceptance and mindfulness-based interventions. After analyzing findings from a focus group (n=8) and one-on-one usability testing (n=11), the following usability changes were identified. audio changes (e.g., tone, gender), additional interactive options, (e.g., touchable icons), and data security/privacy concerns. Most participants (89%) reported highly enjoying the SR’s personality (“funny”, “friendly”, “like a person”), and reported that this helped them feel motivated and supported through management of stress, exercise, and goal-oriented living. They expressed concerns, however, with the robot itself providing some interventions, such as mindfulness meditations (e.g., leaves on a stream) over grounding exercises (e.g., deep breathing) using its own voice. These findings suggest that usability, usefulness, and “personhood” may be uniquely linked for SR interventions, and require thoughtful consideration of the therapeutic interventions most suited to robotics platforms.

* Multi-User Virtual Reality Values-Based Prevention: Feasibility, Usefulness and Acceptability in Women at High-Risk for Eating Disorders

Despoina Iosif, MA, University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Recent years have seen a growing research interest towards designing computer-assisted health interventions aiming the treatment of eating disorders. With the advent of lower-cost VR head-mounted displays (HMDs) and high internet data transfer capacity, there is a new opportunity for applying immersive VR tools to augment existing interventions. Moreover, recent evidence supports that acceptance of unwanted internal cues may be a more advantageous alternative to the change of thoughts for preventing and treating individuals at the spectrum of eating disorders. Furthermore, it is suggested that values clarification work is purported to increase the motivation of treatment-resistant clients, such as those found to be at high-risk for developing eating disorders. This study is among the first to explore the feasibility, acceptability and usefulness of a Multi-User Virtual Reality (MUVR) system as a therapeutic tool for participants at high-risk for developing eating disorders. This treatment is based on Acceptance and Commitment Therapy approach, since the values clarification, values-based living and acceptance of unwanted emotions and thoughts is of the main components of this approach.

Educational Objectives:

1. Describe data on the acceptability and feasibility of digital and mindfulness-based interventions for health behaviors.

2. Describe culturally-adapted ACT digital interventions for health behaviors.

3. Describe how to design and evaluate ACT and mindfulness-based digital interventions for health behaviors.

**142. ACT Functional Analysis and Treatment in ABA Settings: Children with ASD and Related Disorders**

Symposium - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Case presentation, Conceptual analysis, Original data*

Categories: Clinical Interventions and Interests, Functional contextual approaches in related disciplines, ACT Functional Analysis with Children

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Thomas Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Discussant: Jordan Belisle, Ph.D., Missouri State University

Amanda Chastain, M.A., BCBA, University of Southern California / FirstSteps for Kids

Ania Young, Ph.D., Montana State University, Billings

Larisa Sheperd, MA, BCBA, Firefly Autism

Psychologists using ACT conduct rapid, in the moment functional analyses (FA) to uncover indirect-acting verbal contingencies that govern unworkable behavior. In contrast, ABA practitioners use descriptive and analogue procedures to analyze direct-acting contingencies. To date, no behavior analysts using ACT have investigated FA tools for uncovering indirect-acting contingencies, the inflexible psychological repertoires treated with Acceptance and Commitment Training. Since the hallmark of ABA is both effective and efficient intervention, it is incumbent upon the ABA ACT community to design and evaluate FA tools consistent with those used elsewhere in ABA. These tools should be quick to implement and lead to strong outcomes by targeting only those repertoires for which an intervention is needed. In this symposium, three studies depict the uses of novel descriptive and analogue ACT FA procedures for use in ABA settings. Presenters will discuss the current and ongoing program of this emerging area of research.

* "Where do I start?”: A preliminary analysis of the ACT-FA to guide Acceptance and Commitment Training for children with Autism Spectrum Disorder

Amanda N. Chastain, M.A., BCBA, University of Southern California and FirstSteps for Kids

Amanda Kelly, Ph.D., BCBA-D, Firefly Autism

Thomas G. Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Jonathan Tarbox, Ph.D., BCBA-D, University of Southern California

Humans with a well-developed verbal behavior repertoire can become insensitive to direct contingencies, leaving behavior analysts uncertain with regard to how to predict and influence their behavior in a precise, effective, and conceptually systematic manner. The current presentation reviews preliminary data from a brief verbal ACT Functional Analysis (ACT-FA), which may assist practitioners in the identification of problematic verbal relations. For each participant, researchers utilized the ACT matrix to generate a hypothesis of the problematic verbal relations influencing escape and avoidance behavior according to the six ACT Hexaflex categories, tested this hypothesis with the ACT-FA, and subsequently utilized the results of the ACT-FA to guide individualized ACT treatment in a series of single-subject treatment evaluations. Data indicate that the ACT-FA accurately and reliably predicted the problematic verbal relations for children with Autism Spectrum Disorder, with ACT treatment data yielding socially significant behavior change across participants for both skill acquisition and behavior reduction.

* From Brief Verbal ACT FA to Function-Based Treatment: Thee How’s and the Why’s

Larisa Sheperd, Firefly Autism

Tori Little, Florida Institute of Technolgy

Thomas G. Szabo, Ph.D., BCBA-D, Florida Institute of Technology

Celie Gay, M.A., Florida Institute of Technology

Maria Castro, M.A., Florida Institute of Technology

Children with autism spectrum disorder may not respond to function-based interventions if they are engaging in interfering covert verbal behavior. Identifying the precise verbal exigencies involved can lead to treatment that brings behavior back under the control of direct contingencies of reinforcement. In this study, we conducted assessments of indirect-acting verbal contingencies consisting of both descriptive and analogue ACT functional analysis (ACT-FA) procedures. Subsequently, we designed an intervention that targeted these indirect governing contingencies and measured changes in overt behavior. The analogue ACT-FA procedure involved a within-subject alternating treatment design where the establishing and abolishing operations (EO and AO, respectively) were randomly interspersed. EOs were designed to evoke verbal protest when participants’ cognitions were challenged and AOs to validate participants’ cognitions about their experiences. We subsequently evaluated changes in overt behavior using a multiple baseline across participants design. Results and implications for ACTraining and future research are discussed.

* ACT FA with Children and Adults with Autism

Ania Young, Ph.D., BCBA-D, Montana State University at Billings

Jaclyn Trujillo, Florida Institute of Technology

Bradley Tiefenthaler, Montana State University at Billings

Larisa Sheperd, MA, BCBA, Firefly Autism

Functional analysis of challenging behavior typically involves conducting direct observations of behavior and subsequently contriving analogue situations from which to quantify the percentage of behavior evoked under varying circumstances. From there, function-based direct contingency management strategies are arranged. However, some behavior is either resistant or slow to respond to these environment manipulations. Identifying covert behavioral contingencies that interfere with direct contingency management may help in the design of strategies that bring behavior under the control of optimal direct contingencies. In the current study, we used the ACT matrix as a descriptive procedure for uncovering covert behavioral contingencies governing unwanted behavior in children and adults diagnosed with autism. Subsequently, we contrived analogue situations to evoke verbal protest that verified hypotheses generated during the descriptive assessment. Finally, we constructed ACT interventions to target the precise contingencies identified and measured changes in participants' challenging overt behavior. In this paper, we will describe procedures, results, and offer suggestions for further research.

Educational Objectives:

1. Differentiate between times when to use direct versus indirect contingency management assessment and intervention strategies.

2. Identify the basic elements of an ACT descriptive functional assessment.

3. Identify the basic elements of an ACT analogue functional analysis and function-based treatment.

**143. Contextual behavioral analyses of the conceptualization and intervention in worry and rumination**

Symposium - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Original data*

Categories: Clinical Interventions and Interests, Relational Frame Theory, Repetitive negative thinking

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Daniela M Salazar, Ph.D., Light House Arabia

Discussant: Louise McHugh, Ph.D., University College Dublin

Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Bruce Cuadros, M.A., Fundación Universitaria Konrad Lorenz

Caroline Leão, M.A., University College Dublin

Worry and rumination are experiential avoidance strategies that are receiving increasing attention due to their transdiagnostic nature. This symposium will present three studies that conducted contextual-behavioral analyses of these processes. The first study will present a qualitative analysis of the relational processes involved in worry and rumination from an RFT standpoint. Specifically, the study focuses on the dynamics of relational framing involved in worry and rumination. The second study will present an experiment that compared the experiences in a rumination induction for two groups: participants diagnosed with depression and/or generalized anxiety disorder and a nonclinical control group. The study analyzed the types of rules derived during the rumination inductions and other characteristics such as the abstractness-concreteness and relational flexibility of the process. Lastly, the third presentation will show the efficacy of a brief ACT protocol focused on dismantling dysfunctional patterns of worry and rumination in participants older than 65 years suffering from clinically relevant emotional symptoms.

* A qualitative analysis of the impact of repetitive negative thinking (RNT) patterns on the self

Caroline Leao, University College Dublin

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Louise McHugh, University College Dublin

We all worry and ruminate to some extent. However, for some, this can become excessive. Many of the things we worry and ruminate about are related to ourselves. The current study aims to measure self-discriminations and self-generated rules that occur in textual responses to questions on an online survey and compare these patterns of self-discrimination in those that are high versus low in worry and rumination. The research involves a cross-sectional mixed methods design, containing quantitative self-report measures and a semi-structured interview with 30 participants. The results will be discussed in terms of their implications for designing effective self interventions for individuals with excessive worry.

* Efficacy of a brief RNT-focused ACT protocol on elderly participants suffering from clinically-relevant emotional symptoms

Bruce B. Cuadros, Fundación Universitaria Konrad Lorenz

Claudia L. Valencia, Fundación Universitaria Konrad Lorenz

The elderly population globally has increased. It is expected that for 2050, it will comprise 21% rather than 10% of today´s population breakdown. Anxiety and depression are prevalent for the elderly population, and the current resources are limited for their treatment. Brief RNT-focused ACT protocols have shown to be highly efficacious in treating emotional disorders in younger participants. This study tested the efficacy of a brief RNT-focused ACT protocol adapted to the elderly population in four participants through a concurrent multiple-baseline design. The intervention obtained large effect sizes in reducing anxiety and depression symptoms and process measures such as experiential avoidance, cognitive fusion, values, and RNT. All participants showed clinically significant changes. In conclusion, RNT-focused ACT seems a promising intervention to treat emotional disorders in the elderly population.

* Characteristics of repetitive negative thinking in depression and generalized anxiety disorder: An experimental investigation

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Miguel A. Segura-Vargas, Fundación Universitaria Konrad Lorenz

Luna Bedoya-Valderrama, Fundación Universitaria Konrad Lorenz

María B. García-Martín, Universidad de la Sabana

Repetitive negative thinking (RNT) in the form of worry and rumination is one of the main characteristics of depression and generalized anxiety disorder. This study aimed to analyze the rules derived during a rumination induction, the content of the process (abstract vs. concrete), and the relational flexibility in two groups: 40 participants diagnosed with depression and/or generalized anxiety disorder (GAD) and 40 nonclinical control participants. The presence and absence of clinical diagnoses were established with Mini International Neuropsychiatric Interview. In the experimental session, participants responded first to measures of positive and negative affect, state cognitive fusion. Afterward, they underwent a 5-minute RNT-induction. Subsequently, they responded to the same questionnaires and a self-report designed to measure rules derived during the RNT induction, RNT content, and flexibility. Participants with depression and/or GAD showed a higher increase of state cognitive fusion and a deterioration of affect after the RNT induction. These participants also showed higher scores on rules about the uncontrollability of RNT and the need to control it and more abstract and repetitive content.

Educational Objectives:

1. Describe the rules usually derived during an RNT process.

2. Describe the self-rules related to worry and rumination in clinical and nonclinical participants.

3. Identify how RNT-focused ACT protocols can be adapted for the work with elderly participants.

**144. Values, Vulnerability, and Consensual Non-Monogamy**

Panel - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review*

Categories: Clinical Interventions and Interests, Professional Development, CNM, ACT, FAP

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Mathias Funke, Dipl.-Psych., Private Practice

Discussant: Mavis Tsai, Ph.D., University. of Washington; ACL Global Project

Matthew Skinta, Ph.D., ABPP, Roosevelt University

Stephanie Dreis, LPCC, Discovered Meaning, LLC ~ Private Practice

Sarah Levinson, J.D., MSW Candidate, Creative Relating

This panel explores the topic of Consensual Non-monogamy (CNM), as lived and worked with through ACT and FAP principles. As relationship style diversity has become more openly discussed outside of monogamous structure, it may be increasingly important for therapists to have a grasp on basic information about how diverse relationships function. Experiential avoidance, acceptance, and values are as central to the success of diverse relationship styles as in monogamous relationships that most therapists are trained to work with. Further, interpersonal targets of FAP such as vulnerability and courageous risk-taking are lived differently when multiple intimate relationships coexist. Navigating jealousy, as well as unique social roles that arise within CNM relationships (e.g., metamours, polycules), and other topics will be considered as they arise in the therapy room. The panel will also explore the unique ethical and practice boundaries of living and working in communities when both the therapist and client may be in CNM relationships, and social and cultural differences in both language and practice that arise when considering sexual orientation diversity.

Educational Objectives:

1. Describe common types of consensual non-monogamy.

2. List ethical considerations for therapists in CNM relationships working within the community.

3. Explain how ACT and FAP principles apply to work with CNM relationships.

**145. Philosophy Bakes Bread: Practical Implications of Interbehavioral Perspectives on Applied Work**

Panel - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Conceptual analysis*

Categories: Theoretical and philosophical foundations, Clinical Interventions and Interests, Interbehavioral psychology, supervision,

*Target Audience: Beginner, Intermediate, Advanced*

Chair: Marcel Tassara, Ph.D., ACT:Root to Fruit Podcast

Discussant: Michael May, M.A., LPCC, Compassionate Psychological Care, LLP

Karen Kellum, Ph.D. BCBA-D, University of Mississippi

Mitchell Fryling, Ph.D., California State University, Los Angeles

Linda Hayes, Ph.D., University of Nevada Reno

Emily Sandoz, Ph.D., University of Louisiana at Lafayette

Some Contextual Behaviorists have recently shown increased interest in Interbehaviorism and interbehavioral psychology, as evidenced by recent publications, presentations, and podcasts (Finn & Barnes-Holmes, 2021; Hayes & Fryling 2019; Sandoz, 2020; Tassara, 2020; 2021, Wright, 2020). Of particular utility may be the implications of Interbehavioral perspectives for intervention and supervision. For example, clinicians may find useful the distinction between constructs and events, the specific inclusion of the interventionist as part of the analyzed context, the lack of distinction between public and private behavior, and the focus on the psychological present. Panelists will discuss conceptual perspectives along with the practical implications of these perspectives for applied work and supervision. Attendees will be able to describe concepts from interbehaviorism and how they might apply them in practice.

Educational Objectives:

1. List at least at least 3 potentially concepts from of Interbehaviorism and/or Interbehavioral Psychology for applied work and supervision.

2. Describe the utility of the distinction between constructs and events for applied work and supervision.

3. Discuss implications of this perspective's focus on the psychological present and reduced distinction between public and private behavior.

**146. ACT in the Treatment of Trauma: Clinical Panel on Emotional Processing, Recovery, and Growth**

Panel - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review*

Categories: Clinical Interventions and Interests, Professional Development, PTSD

*Target Audience: Beginner, Intermediate, Advanced*

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation

Darrah Westrup, Ph.D., Private Practice

Miranda Morris, Ph.D., True North Therapy and Training

Jennifer Payne, Ph.D., LCSW, School of Behavioral and Applied Sciences Azusa Pacific University

Janina Scarlet, Ph.D., Superhero Therapy

The fallout of trauma has longstanding and significant impact on its victims. The aftermath of interpersonal violence, racial trauma, sexual assault, and other traumas can lead to PTSD and other disorders that impact functioning and overall well-being. Outcomes of trauma may include various behavioral problems such as interpersonal, daily living, and substance use difficulties. Acceptance and commitment therapy (ACT) is uniquely suited to address trauma's fallout focusing on experiential avoidance, trauma’s transdiagnostic nature, and regaining vitality through values-based living. This panel will discuss contemporary issues related to ACT and the treatment of trauma, including how to integrate ACT with other exposure therapies, impact of racial trauma, sexual assault and women's issues, clinical challenges in treating trauma, and pop culture metaphors to assist clients with post-traumatic growth. The panel will also explore the future of treatment and trauma research concerning ACT used in the service of helping those who have suffered trauma to not only recover but to thrive.

Educational Objectives:

1. Describe the current state of the research on use of ACT in treating trauma.

2. Describe how to integrate ACT into other exposure therapies.

3. Describe ways to navigate client challenges that are specific to trauma.

**147. A Zoom for Two...and Their Minds**

Workshop - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Role play*

Categories: Professional Development, Performance-enhancing interventions, Clinical Application and Analysis

*Target Audience: Beginner, Intermediate*

Allison Levine, M.A., Long Island University, C.W. Post

Sidney Perelman, B.S., Long Island University

Jesse Basson, M.S., Long Island University

Ryan Sparks, B.A., Long Island University

Rebecca Aryeh, B.A., Long Island University

Yi Liu, B.A., Long Island University

DJ Moran, Ph.D., BCBA-D, Long Island University

This workshop shows a series of four vignettes, each with five “characters:” an ACT therapist, the therapist's “mind,” a client, the client's “mind,” plus a narrator well-versed in contextual behavioral science. This structure will 1) demonstrate the ACT processes as they are used in the clinical context, 2) showcase the discrepancy between what is said out loud in session vs. what is left unsaid, and 3) eliminate perceived hierarchical dynamics between the therapist and the client by humanizing both parties. The real-time (fictional) case studies will explore how our historical and situational contexts influence the way we communicate in the therapy room. Themes include: successful introduction of the Mindful Action Plan in session, within-session mindfulness and metaphor-focused exercises, concerns of the fledgling ACT therapist, and potential client resistance to major ACT concepts. Each vignette will be about twelve minutes long, including discussion about case conceptualization and instruction on how to use the Mindful Action Plan and the Inflexahex. There will be time set aside after each vignette for questions, discussion, and feedback from workshop attendees.

Educational Objectives:

1. Explain how to develop a mindful action plan protocol with The MAP.

2. Defuse from language obstacles with your client.

3. Utilize contacting the present moment exercises and mindfulness practice in therapy.

**148. El trabajo de exposición en la persona del terapeuta: “exponerse para exponer mejor”**

***The work of the therapist: "exposing oneself to better expose"***

Workshop - Sunday, 27 June (3:30 PM - 5:00 PM)

Components: *Didactic presentation, Experiential exercises, Role play*

Categories: Professional Development, Clinical Interventions and Interests, Entrenamiento de competencias clínicas

*Target Audience: Beginner, Intermediate*

Juan Pablo Coletti, Fundación Centro Argentino de Terapias Contextuales (CATC)

El fenómeno de la inflexibilidad psicológica, propio de los humanos con lenguaje, puede limitar considerablemente la posibilidad de una vida con sentido. Cuando la rigidez psicológica se presenta en la persona del terapeuta, se limitan las posibilidades de una intervención efectiva. Esto puede ocurrir cuando el material que presenta el consultante evoca funciones aversivas. La propuesta de trabajo del taller es entrenar competencias que faciliten respuestas flexibles cuando surgen contenidos desafiantes para el terapeuta.

*The phenomenon of psychological inflexibility, typical of humans with language, can considerably limit the possibility of a life with meaning. When psychological rigidity occurs in the person of the therapist, the possibilities for effective intervention are limited. This can occur when the material presented by the consultant evokes aversive functions. The workshop's work is to train competencies that facilitate flexible responses when challenging content for the therapist arises.*

Educational Objectives:

1. Describir la importancia del trabajo con exposición en el marco de las terapias con fundamentos contextuales-conductuales.

2. Analizar los obstáculos en la persona del terapeuta a la hora de implementar técnicas de exposición.

3. Explique cómo implementar intervenciones basadas en exposición.