The effect of ACT WS for teachers and staffs working with children having disabilities II

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Background

Teachers and staffs working with children having disabilities and the children's parents learn the skills of ACT and teach them to the children and parents. These skills could prove to be useful. Furthermore, teachers and staffs often suffer from mental health issues. Therefore, it could be beneficial for both children and the teachers and staffs to learn ACT.

Purpose

This research aims to investigate the effects of ACT WS on the acquisition of knowledge and skills of ACT. It also examines the effect of WS on the mental health of participants.

Methods

Participants Participants were recruited by a local public supporting service agency. Thirty-eight participants attended the workshop. Three participants did not agree to provide the data.

Procedure The participants of the waiting group attended the workshop a week after finishing a workshop for the experimental group. The experimental group had an experience of a longer period working with these children and parents than the WL control group (t = 2.17, df = 19, p = .043).

Participants of both the groups answered the questionnaires three/four times, and a follow-Up (Time0, Time1, Time2, Time3, and FU.) Time4 assessment was conducted only for WL.

Measures Five questionnaires (AAQ-II, BDI-II, GHQ-28, FFMQ, and CFQ) were used to assess the effectiveness of the workshop. BDI-II and GHQ-28 were conducted two or three times (T1, T2, and T3). The knowledge test was formulated and used to evaluate the knowledge of ACT (see handout). It consisted of 20 questions (yes/no/IDK format) relating to ACT.

The workshop was conducted in a group format. It continued for approximately five hours a day. The same textbook and PowerPoint slides were used by both groups. Common exercises and metaphors from ACT were used, and the participants shared their experiences with each other. See the content of the workshop in a handout.

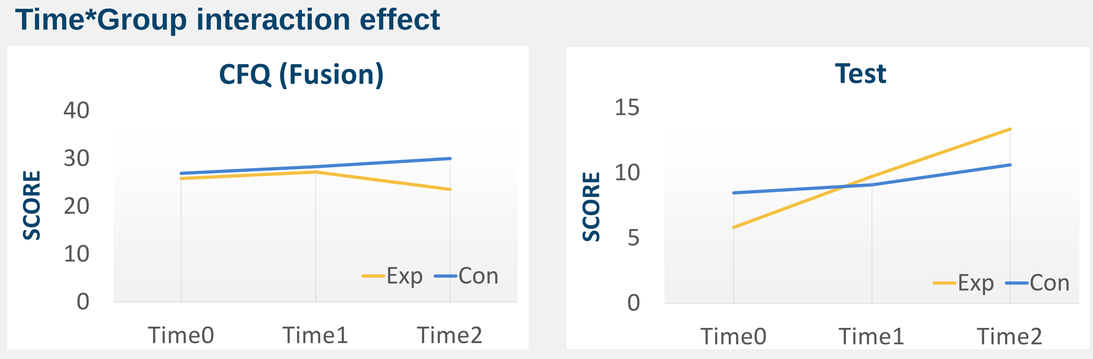
Experimental Design

Results

The data obtained from 24 participants who answered all questionnaires were analyzed. ANOVA (time*group) revealed the score of CFQ (fusion; $F(22,1) = 4.94$, $p = .037$) and knowledge test ($F(22,1) = 5.80$, $p = .011$) showed significant interaction (time*group).

The time effect was significant in AAQ-II ($F(22,1) = 3.78$, $p = .066$), FFMQ (Observing, $F(22,1) = 25.9$, $p < .01$; Nonreact, $F(22,1) = 4.82$, $p = .039$), and BDI-II ($F(22,1) = 10.40$, p = .004).

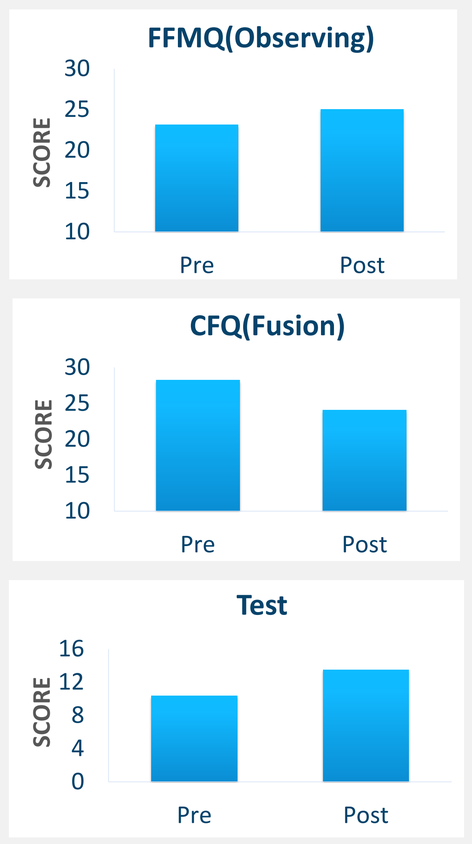
Time*Group interaction effect



A t-test was conducted by getting two group data together to assess the effect between, before, and after the workshop.

The result showed that the score of FFMQ (Observing; $t = -2.82$, $df = 20$, $p = .011$), CFQ (fusion; $t = 2.327$, $df = 20$, $p = .031$), and the knowledge test ($t = -3.63$, df=20, $p = .002$) were significantly changed after the workshop.

Significant difference between pre- and post-test scores



Conclusion

The effect of the workshop was clear only in the score of CFQ (fusion) and the knowledge test. Cognitive fusion decreased and the knowledge of ACT increased after the workshop. In general, the effects of the workshop were confused. Most variables did not show significant effects because the effect of time was large. Many participants showed better mental health conditions before the workshop. Therefore, the effect of the workshop on mental health was insignificant. Although only nine participants provided follow-up data, they continued to improve mindfulness skills and cognitive fusion after the workshop

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