

# Design of a Protocol for Addictions and Application of Contextual Therapy

Vallejo, M.L., Díaz, M. & Soto, P.



## Introduction

Addictive behavior results from a combination of factors that come from multiple interactions along the individual's personal history. In the realm of substance abuse, we usually find people entangled in an inflexible pattern of regulation of their own private events, based on experiential avoidance.

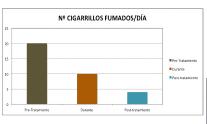
As an alternative to experiential avoidance, ACT (Acceptance and Commitment Therapy) offers **psychological acceptance**, which means being willing to notice, contact, feel and think whatever they may bring about, in every single moment, as long as doing so engages on directions that are valuable to the person.

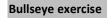
## Goals

- Facilitating contact with the consequences of following an inflexible regulation pattern.
- Promote effective discrimination of the own behavior and the contingencies that go with it.
- Help differenciate oneself from his or her private events.
- Bring appetitive functions related to what is important and promote valued actions.

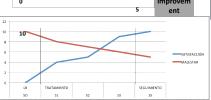


### Results









- X: 1st session
  X: 2nd session
  X: 3rd session
- Nº: valued actions

Within three sessions, the number of cigarretes a day diminished significantly. Craving for smoking diminished daily, as reported by the client. During the third session, he reported that craving had stopped being a trigger of the smoking behavior. Beside use data, actions toward values data were collected. The bullseye metaphor was used so the client could place himself on it in every session. The client reports feeling calmer and practicing sports more often, without procrastinating. The degree of satisfaction increases compared to baseline and the reported suffering decreases. During the follow-up session, he still came across barriers and sometimes he would end up acting under control of aversive private events, but he expressed his willingness to experience discomfort in order to achieve what is important for him.

#### Method

**Case study with a single participant:** male, 36 years old, tobacco smoker for the last 20 years. Fear of failure and rumination.

ASSESMENT SESSION	SESSION 1	SESSION 2	SESSION 3
Establishing the context for a brief intervention.	Presenting the working schedule	Examining the psychological barriers that have arisen when acting towards values.	Questionnaires: AAQ-II, CFQ, VQ y PSWQ-11 (post- treatment)
Questionnaires: AAQ- II, CFQ, VQ y PSWQ- 11 (pre-treatment)	Identifying the hyerarchy of substance use triggers	Training in deictic and hyerarchical framing	Starting to
Starting to work on clinical record	Analysing other strategies of avoidance and focusing on discriminating the pattern and its consequences.		Tracking of natural reinforcers
Establishing rapport	Helping the client contact with consequences (generating "creative hopelessness")	Defusion (promoting self as a context) and perspective-taking exercises	Examining barriers and defusion exercises to prevent relapsas
	Contacting with valued directions and actions	Amplifying values	Closing the protocol

#### METAPHORS AND EXERCISES

- <u>Metaphors:</u> the garden, feeding the lion, alarms, bullseye, scaping thoughts, one's book, puddle, line, boat, cascade, toll, one thousand steps.
- Exercises: the observer/ mindfulness/ defusion/ funeral.
- Homework: tracking csmoking cravings, barriers, management and limitations.

# **Conclusion**

The aim of the present study is to illustrate how ACT can be a useful treatment to achieve specific therapeutic goals and break up with the limiting avoidance cycle. Smoking was seen as an example of attempts to control aversive private events (anxiety, discomfort...). After just three sessions of individual treatment, the client started to behave in a way that's more aligned with his goals in life. Valued directions clarification was useful, and it helped him focus on new goals and actions, unrelated to quitting smoking. Significant improvements were made in that regard, although the main focus was still smoking behavior. Framing the act of quitting smoking in coordination with other situations of discomfort that are at service of something the client values might have facilitated transfer of functions. Nevertheless, and despite a larger sample is necessary, ACT strategies seem useful to disconnect private events from literal actions, promoting acceptance of the former while acting towards valued directions (Gutierrez, Luciano, Rodríguez y Fink, 2004; McMullen, et al., 2008; Páez-Blarrina et al., 2008).

#### References

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