

Delivering ACT in Group Format
 - Learning how to promote mental health, resilience, and productivity using ACT
 (Acceptance and Commitment Therapy/Training, ACT)

Fredrik Livheim
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Karolinska Institutet

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Need CE credit for this session?

Please remember to scan in to have your attendance tracked.



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Disclosure:

Fredrik Livheim

Relevant Financial Relationships:

- Employed in Private Company for training in ACT
- Receives royalties from New Harbinger publications for a the book "The Mindful and Effective Employee" with Paul Flaxman and Frank Bond.
- Member of advisory board, part-owner and co-creator of two companies delivering ACT over Internet (Papilly & TIOB)


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Practicalities

- ✓ All slides from this workshop hand-outs available at www.contextualscience.com
- ✓ More information about this group format and summary of published research at: www.actorganisation.com
- ✓ My contact info can be found at the end of the hand-outs (livheim@gmail.com)
- ✓ If you are interested in working with this format or train others, stay after presentation and we'll have a short meeting around this

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I promise...



- 1) ...to do everything I can to make this into a worthwhile workshop! You are important!
- 2) ...that my professional aim is to help as many as I can, as effectively as possible. This can only be done by us together as a collaborative effort.

Aims with this workshop

1. Examples of how to apply an ACT-consistent group approach to stress and mental health problems.
2. Understand how to use the "life-compass" as a tool for values clarification.
3. Learn exercises and metaphors that are easy for you too use in your own clinical work, either individually or in group settings.

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Informed consent

- 1. Is it okay that we do experience-based exercises?**
The exercises can arouse strong feelings, and all feelings can fit in this room, crying or tears are perfectly OK.
- 2. Everything we do is completely voluntary**
and you may discontinue exercises at any time without explanation.

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Workshop overview (2.45 - 5:45)

1. Why this intervention? And are we as humans facing new kind of challenges living in an information dense society?
2. A brief walk through empirical support for ACT and the studies we have made on ACT in group format
3. How we train new group-leaders in a large scale

4:15-4:30 BREAK

4. Examples of the content of this ACT group intervention

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Acceptance
A practical exercise used in our ACT-group-interventions

"It wasn't until we could opt out of it, that the pain became unbearable."

- Karin Johannisson

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16:15-16:30 BREAK

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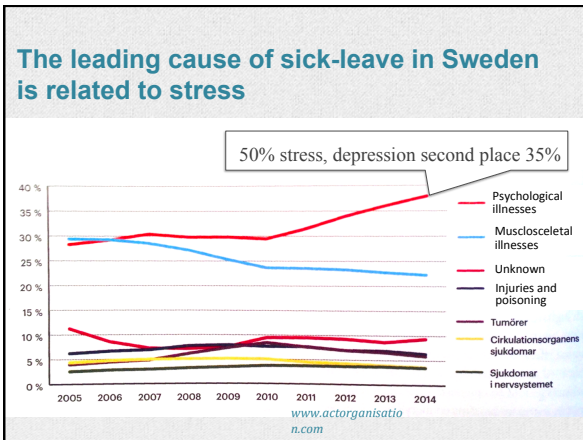
Global burden of disease attributable to mental and substance use disorders (Lancet)

- ↔ Study in 187 countries period 1980-2010. Published in the medical journal "The Lancet" in 2013
- ↔ The overall disease burden in the world of mental illness and substance abuse... are heavier than the global burden of;
 - HIV / AIDS,
 - tuberculosis,
 - diabetes and
 - traffic accidents taken together

Global burden of disease attributable to mental and substance use disorders (Lancet)

- ↔ Mental illness and addiction are by far the heaviest disease burden in the world.
- ↔ Mental illness has increased 38% between 1990-2010. More research on effective interventions are needed.

Whiteford et al (2013). Global burden of disease attributable to mental and substance use disorders: findings from the Global Burden of Disease Study 2010

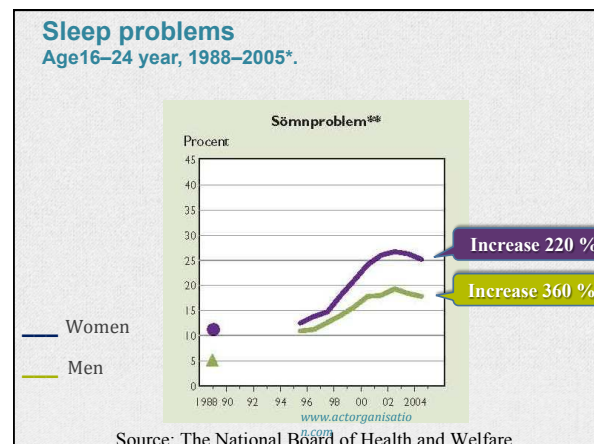
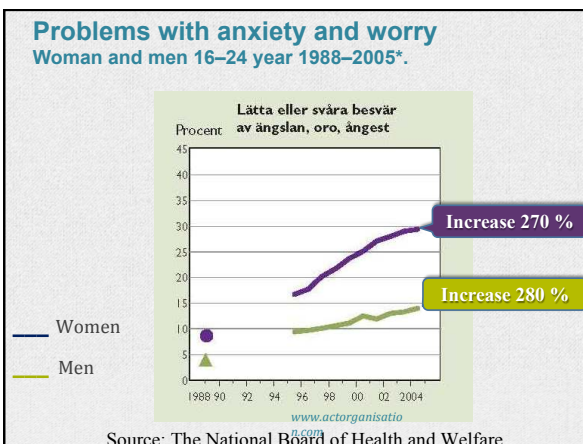


Why ACT for young adults?

Psychological health among young adults in Sweden.

Sources:
The Swedish national Council of Health
&
The National Board of Health and Welfare

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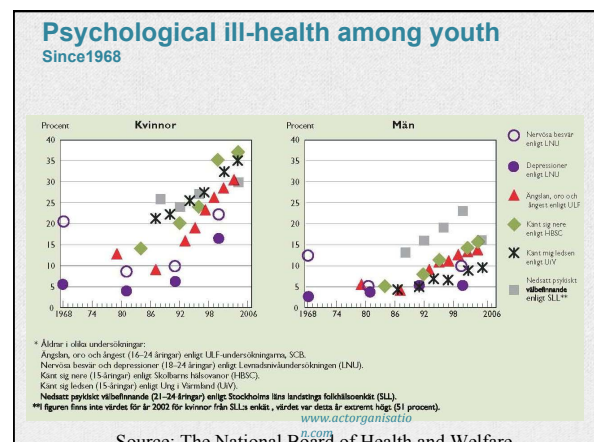
Minority groups particularly vulnerable

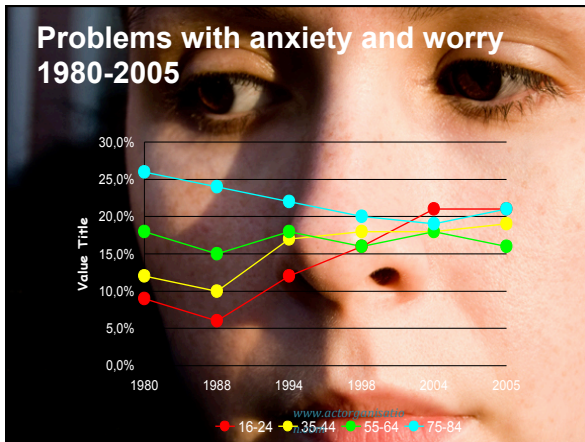
Several studies show that minority groups are at greater risk for poor mental health compared to society's majority population. These include:

- ✓ ethnic minority groups
- ✓ sexual minority groups

(tex. Halpern D. 1993, Hegna, Kristiansen & Moseng 1999, Wichstrom & Hegna 2003, King et al 2003, Winzer & Boström 2007)

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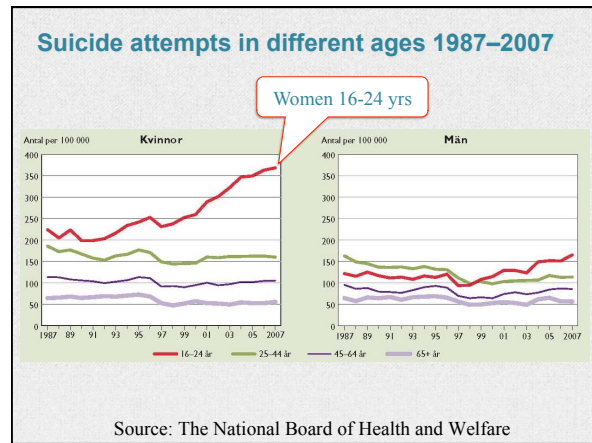
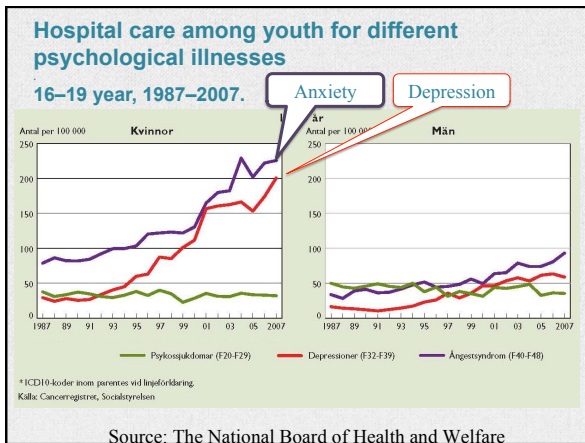




But these are "only" self reports!!!

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What are the causes of those increases?

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Why this intervention?

SVD

Young, healthy and depressed - a Swedish mystery

De allra flesta mår otämligt, men svenska barn och ungdomar skakar sig psykiska hälsa långt av alla skoleldomar i Norden och Egre. En många linder i Europa också. Detta visar

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Why this intervention?

SvD



Zero tolerance towards suffering has its price

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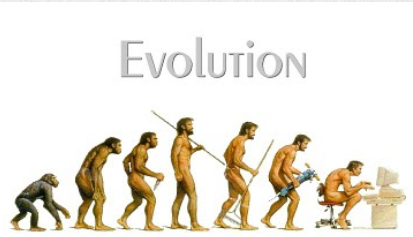
The increase are mainly due to 8 causes:

1. Increased unemployment
2. "Individualization"
 - More choices
 - Less acceptance for psychological suffering
3. More alcohol and drugs
4. Less sleep
5. Stress from IT
6. Unrealistic ideals of body
7. Young adults are not trained for challenges
- (8. We are spending more time in the language stew!?)**

Evolution in a new perspective

- We are facing new kind of threats


Evolution



(OR IS IT?)

What is stressing us human beings?

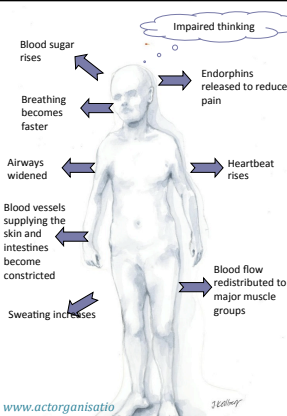
- an exercise



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The stress reaction

- ✓ "Fight-or-flight-reaction"
- ✓ Sympathetic nervous system maintain survival as the sympathetic nervous system is responsible for priming the body for action
- ✓ An effective redistribution of resources



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How thoughts may trigger the stress response – film



From the film "It's Kind of a Funny Story"

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Food for thought...

In our development we are in a head on collision with evolution, with language we can literally stress ourselves to death.

We need to learn strategies that are working so we can cope with how we are "languaging" with ourselves.

- Fredrik Livheim

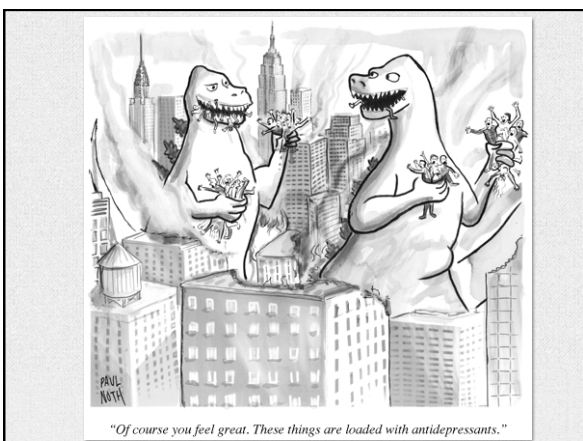
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Us humans are the only species on this planet that kills ourselves...

Also wonderful experiences may bring pain

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An observation

"My life has been full of tragedies ...
... some of them, actually happened"

- Mark Twain

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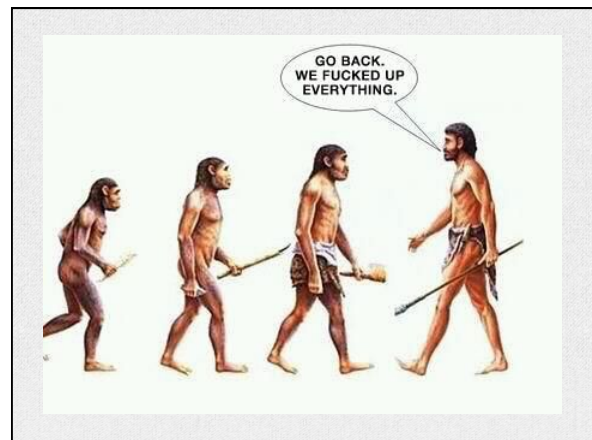
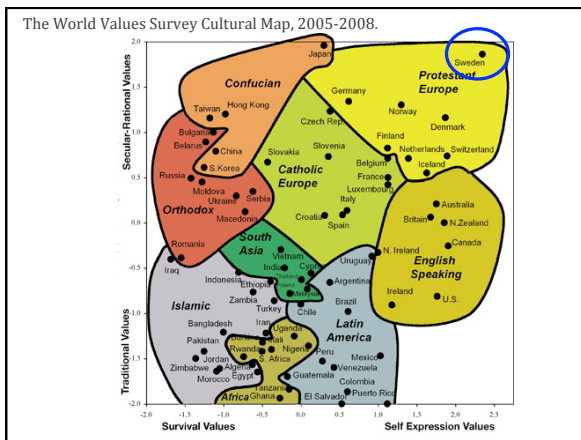
Some people are too stupid to be anxious. That's smart.

So are we...

... as humans facing new kind of challenges living in an information dense society?

- ✓ I would say that most of us are, we typically spend more time in our heads, and in the language stew.
- ✓ Hence the increased interest in mindfulness and physical activity?

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16:15-16:30 BREAK

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ACT on this format (and a similar by Bond et al)
- Published in peer-reviewed journals

- Bond, F. W., & Bunce, D. (2000). Mediators of change in emotion-focused and problem-focused worksite stress management interventions. *J Occup Health Psychol*, 5(1), 156-163.
- Flaxman, P. E., & Bond, F. W. (2010a). A randomised worksite comparison of acceptance and commitment therapy and stress inoculation training. *Behav. Res. Ther*, 48(8), 816-820.
- Flaxman, P. E., & Bond, F. W. (2010b). Worksite Stress Management Training: Moderated Effects and Clinical Significance. *J Occup Health Psychol*, 15(4), 347-358

ACT on this format (and a similar by Bond et al)
- Published in peer-reviewed journals

- Brinkborg, H., Michanek, J., Hesser, H., & Berglund, G. (2011). ACT for the treatment of stress among social workers: a randomized controlled trial. *Behav Res Ther*, 49(6-7), 389-398.
- Lloyd, J., Bond, F.W., & Flaxman, P.E. (2013). Identifying the psychological mechanisms underpinning a cognitive behavioural intervention for emotional burnout. *Work & Stress*, 27, 181-199.
- Frögéli, E., Djordjevic, A., Rudman, A., Livheim, F. & Gustavsson P. (2015). A randomized controlled pilot trial of ACT for preventing stress-related ill health among future nurses. *Anxiety Stress Coping*. 7:1-17

ACT on this format (and a similar by Bond et al)
- Published in peer-reviewed journals

- Livheim, F., Hayes, L., S., Hayes, S. C. (2015). The Effectiveness of ACT Therapy for Adolescent Mental Health: Swedish and Australian Pilot Outcomes. *Journal of Child and Family Studies*. 24(4), 1016-1030.
- Bond (in preparation)? ACT for stock brokers
- Livheim et al (in preparation) ACT in youth prisons

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Study on 106 stressed social workers - Brinkborg et al 2011

Behaviour Research and Therapy xxx (2011) 1–10

Contents lists available at ScienceDirect

Behaviour Research and Therapy

journal homepage: www.elsevier.com/locate/brat

Acceptance and commitment therapy for the treatment of stress among social workers: A randomized controlled trial

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ARTICLE INFO ABSTRACT

Chronic stress increases the risk of health problems and absenteeism, with negative consequences for individuals, organizations and society. The aim of the present study was to examine the effect of a brief

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106 social workers in Stockholm

ACT-training in group
70 social workers

Waitlist
36 social workers

Those that got ACT, afterwards reported;

- ✓ Less stress
- ✓ Less burn-out
- ✓ Better general health

(Group leaders only had 4 days training in ACT)

Brinkborg, et al. (2011), ACT for the treatment of stress among social workers: A randomized controlled trial, Behaviour Research and Therapy

ACT

- For preventing stress among future nurses

A new article on 124 student nurses

Anxiety, Stress & Coping: An International Journal

Välj språk | Translator disclaimer

CrossMark

A randomized controlled pilot trial of acceptance and commitment training (ACT) for preventing stress-related ill health among future nurses

DOI: 10.1080/10615806.2015.1025765

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Elin Frögéli^{a*}, Aleksandar Djordjevic^a, Ann Rudman^a, Fredrik Livheim^a & Petter Gustavsson^a

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124 student nurses

ACT-training in groups
69 students

"Professional Development" in groups.
44 students

The ACT group had:

- ✓ Less stress (Cohen's d=1.16*)
- ✓ More psychological flexibility (Cohen's d=1.00*)
- ✓ Less burnout (Cohen's d=0.73*)
- ✓ More mindfulness (Cohen's d=0.51*)
- ✓ Better work engagement (Cohen's d=0.72†)
- ✓ Better Self Rated Health (Cohen's d=0.39†)

Frögéli et al (2015).

Goldsmiths UNIVERSITY OF LONDON

Leadershiptraining 1-day

ACT-training 1-day

Leadershiptraining

Communication and sale-skills

Those that got ACT 8 month later;

- Leaders had better health
- Employees had better health
- They earned 4 million USD more

Bond (2013). Enhancing the effectiveness of transformational leadership with ACT. In Flaxman, Bond & Livheim 2013

ACT for the Prevention of Stress and Anxiety in High School (ages 16-19 years)

- A Randomized Trial and One- and Two Year Follow Up

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RCT in school, ages 16-19.

(Livheim 2004, Jakobsson & Wellin 2006)

- 230 students in two different secondary schools were randomized to either control- or ACT intervention group.
- 115 students got the ACT-course, 9 hrs (3 hrs x 3)
- The aim of the intervention was to increase the student's capability to cope with stress and to prevent psychological and physical illness

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Did the ACT-intervention work?

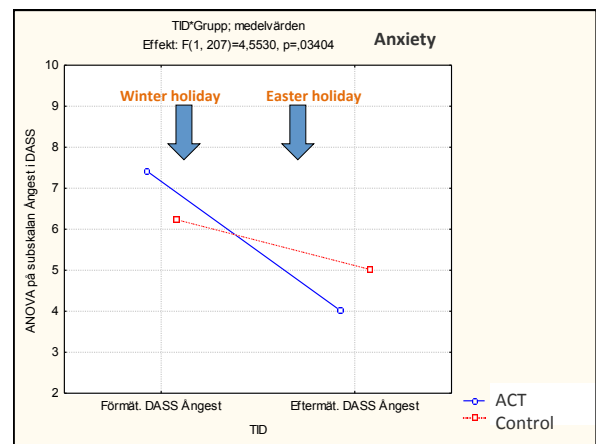
- Results two weeks after intervention:
Significant decrease of anxiety and higher levels of functioning within biggest area of problem in life.
- 88% of the students were satisfied or very satisfied with the course.

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Comments on post measure

- **Boy 17 year Intervention group**
I really dig the CD hard. Thanks for it, it has helped me tremendously. This course has thanks to the exercises given me more insight about myself, my values. Almost like seeing myself from an another perspective. I have understood the meaning of being depressed, to fall into the vicious circle and how one can get out of it. Clean versus dirty discomfort: to understand that has given me greater self control.
- **Boy 16 year Intervention group**
Excellent and extremely interesting course. I wish more of the time in school was used to necessary courses like this. That would make going to school so much more exciting and interesting.
- **Boy 16 year Intervention group**
I opened up in the beginning, did the CD a couple of days, but oh no. I do not notice any results, and believe me, if I answer more positively on this questionnaire it is not due to the course. Constructive critic? Give up, give us pills against the stress!

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Results one year after intervention

Interaction effects [group] x [time] in favour of the ACT-group. Results are based only on data from one school due to low return rates.

Significant interaction effects:

- **Better general health**
Measured by General Health Questionnaire (GHQ). Effect size , 0.14 Cohen's D
- **Less stress**
Measured by Perceived Stress Scale (PSS), Effect size 0.16 Cohen's D

Interaction effect on trend level:

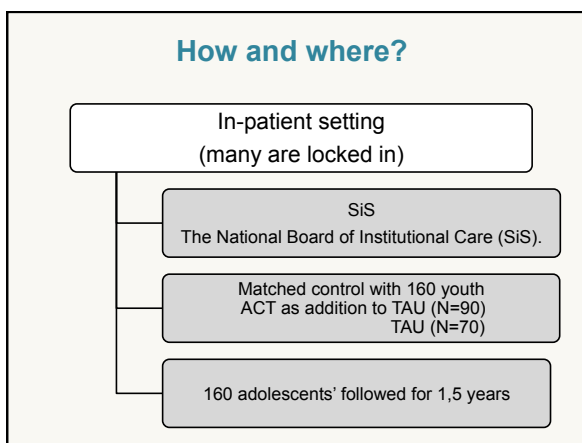
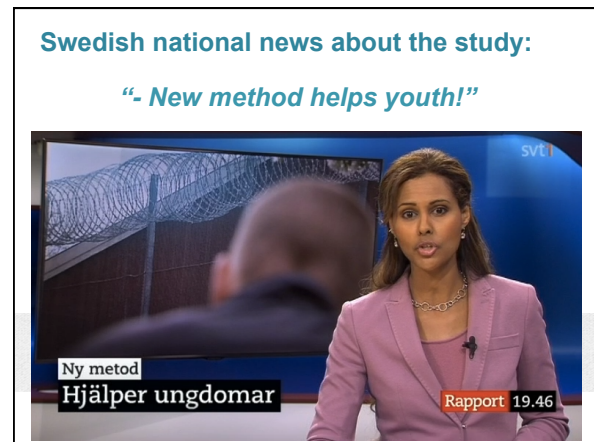
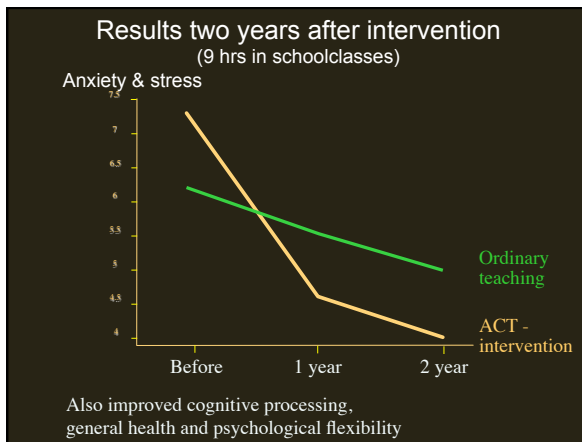
- **Improved psychological flexibility**
Measured by Acceptance and Action Questionnaire (AAQ B)

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Comments one year later

- **Boy 19 years Intervention group**
I have approximately as much to do now as when the course started, yet I fell less stressed now. I do not know if it is because I have taken part in this course or not, I believe mainly it depends on that I have started to accept things I cannot control over much more.
- **Girl 17 years Intervention group**
I have not used the CD, I don't seem to take me that time. But the course has made me realise that the world does not end if something takes too much time or if there is something I do not manage to finish. NO STRESS!
- **Boy 18 years Intervention group**
The CD is very good! I still use it. I have not become a bit better at doing homework, but due to the course I now I feel so much better. I do accept that I do not always manage everything, but do what I have time to. One thing at a time.
- **Girl 18 years Intervention group**
It has been a good and interesting experience! Still of immediate importance. I experience an improvement of myself.

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- ### A matched controlled trial in inpatient setting at 12 different treatment facilities, (SiS).
- Preparations and site:**
- ✓ The ACT-group treatment was tested at 6 different treatment facilities
 - ✓ 6 different treatment facilities were recruited for TAU.
 - ✓ Tested both for young persons with problems that are in for longer treatments (1-4 years) and for young persons that are in for assessment or acute placements (on average 8 weeks).
 - ✓ 46 group leaders and one psychologist at all sites were trained in the ACT-method (more education needed = expensive)

- ### What did the youth say?
- ✓ Youth with long sentences wanted the intervention individually or 2 at the most.
 - ✓ A 19-year old girl:
"- I think a lot about what I have learnt. Thanks ACT!"
 - ✓ It's been fairly common that:
 - youth ask for more ACT when they are done
 - youth recommends other youth to go
 - ✓ On several occasions youth have been "nagging" to get the full intervention if they moved before the end
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Outcome measures and statistically significant results in favor of ACT (in green)

Anxiety (Beck, 20)	Yes, small effect
Depression (Beck, 20)	Yes, small effect
Anger (Beck, 20)	Yes, medium effect
Antisocial behaviour (Beck, 20)	Border significant
Self-Concept (BUS-S, 20)	Yes, small effect
Alcohol (AUDIT)	Yes, small effect
Drugs (DUDIT)	Yes, medium effect

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Outcome measures and statistically significant results in favor of ACT (in green)

Psychological flexibility (AAQ-II)

Psychological flexibility (AFQ-Y) Yes, small effect

Strength and difficulties questionnaire (25itmes, youth)

- **Full scale** Yes, small effect
- Emotional symptoms
- Conduct problems
- **Hyperactivity** Yes, small effect
- Problems with friends Border significant
- Prosocial behavior

Outcome measures and statistically significant results in favor of ACT (in green)

Strength and difficulties questionnaire (25itmes, TEACHER)

- Full scale
- Emotional symptoms
- Conduct problems
- Hyperactivity
- **Problems with friends** Yes, small effect
- Prosocial behavior

Criminality, antisociality (SRD,41 fr.)
Yes, small effect

1.5 year follow up

1,5-year follow ups we have **sent:** **144**

1,5-year follow ups we have **received:** **80**

That gives 55% answers




What happens now?

Preparing the study for publication
Hopefully it will be submitted November 2016

We are implementing ACT in youth prisons
I am currently training psychologist to train this method within SiS.
I have started to train other professionals.




Youth learns how to take control over their lives

10 NYHETER

Ungdomar lär sig ta makten över sitt liv

Nya behandlingsmetoder ska hjälpa unga med allvariga problem






Workshop overview (2:45 - 5:45)

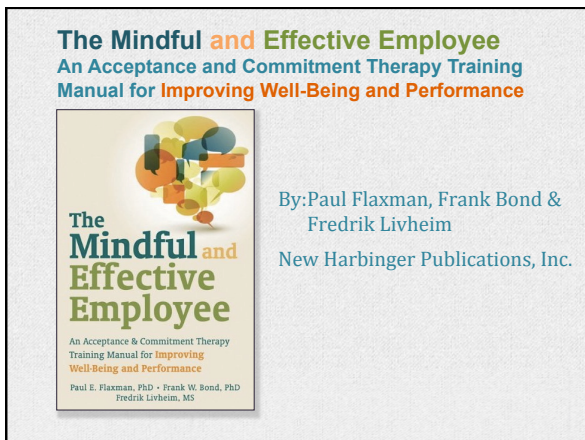
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16:15-16:30 BREAK

4. Examples of the content of this ACT group intervention



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Format of the treatment/course, 1

What:
Brief ACT treatments for mental health problems, stress and drug problems.

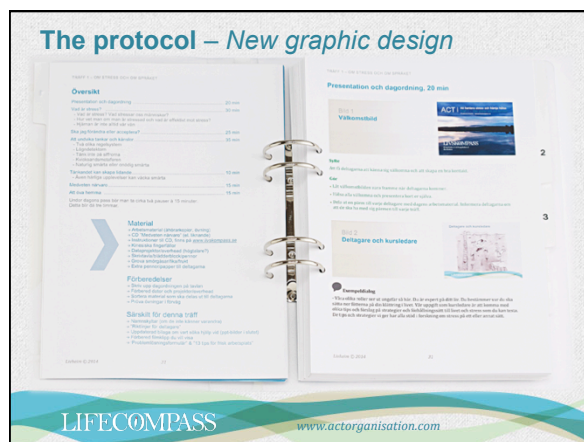
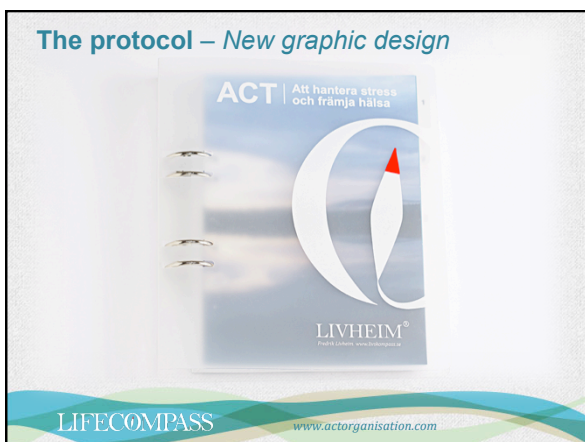
Format:
12 hours in total
(4 sessions, each 3 h, or 6 sessions, each 2 h. Or 7 sessions x 2 h).

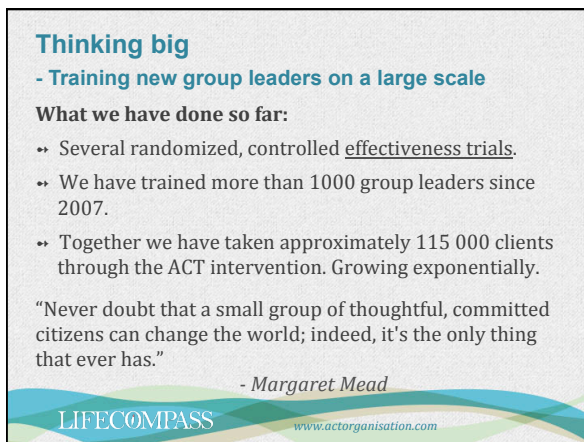
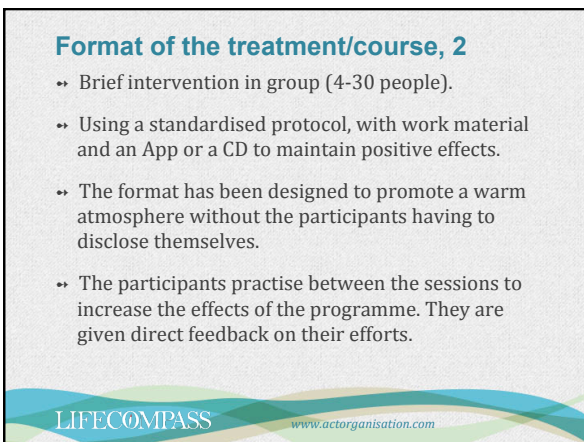
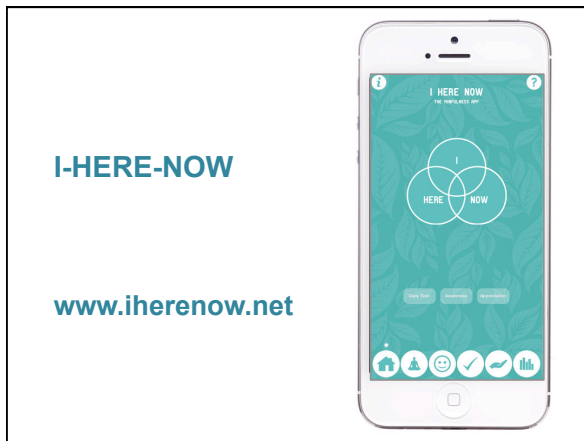
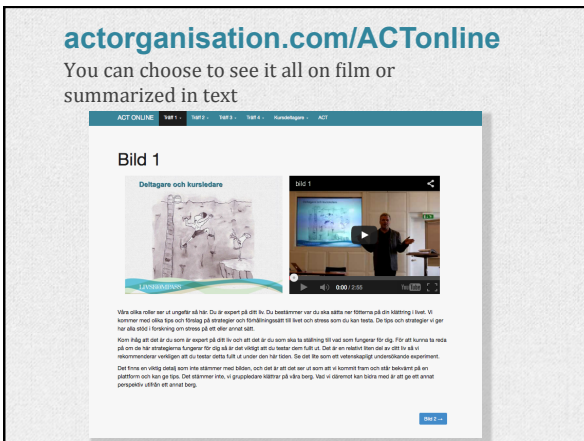
Possible course leaders:
Psychologists, medical doctors, stress consultants, school counselors, school nurses, teachers, social workers etc.
(1050 course leaders trained 2007-2016).

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... the protocol is translated into English!

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Training new group leaders on a large scale - Creating a solid base

- ↪ 1-2 persons that can work in a central position with dissemination are probably needed to “keep the ball rolling”.
- ↪ Income from training goes to research and to keeping people working with dissemination.
- ↪ Web page created (info + material).
- ↪ Appear in media (magazines, papers, TV).
- ↪ Attend conferences.

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Training new group leaders on a large scale - Creating a solid base

- ↪ We have trained 6 new trainers of group leaders. It's not a good idea to depend on a single person.
- ↪ We have developed a protocol (300 pages) and material (180 ppts + film + CDs) for the intervention.
- ↪ Take regular feedback and be prepared to revise the material several times during the first 2-3 years.
- ↪ We offer training every semester (i.e. twice a year).

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Training new group leaders on a large scale - The actual training

The education is aimed at professionals wanting to hold courses for 15-110-year-olds.

Possible group leaders include:

- ↪ Behavior analysts
- ↪ Psychologists
- ↪ School counselors
- ↪ School nurses
- ↪ Teachers
- ↪ Medical doctors
- ↪ Social workers

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Training new group leaders on a large scale - The actual training

Before the first day of training, group-leaders should:

- ↪ Have hooked up with a fellow group leader (preferably from the same workplace). This is strongly encouraged, but not compulsory. Mainly this helps with adherence to the protocol (like not mixing in aura healing :)
- ↪ Have put together their own group that they can start to train, giving the intervention. (The first group is for training purposes only. It may consist of colleagues, friends or others. It's nice if the group comprises 5-30 persons.)

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Training new group leaders on a large scale - The actual training

Day 1 & 2, training: Trainer gives background on evidence for this model, orientation in ACT (you probably are okay from the books). Trainer model session 1 & 2.

Practice: Group leaders practise session 1 & 2 sometime during the coming two weeks.

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Workshop overview

(2:45 - 5:45)

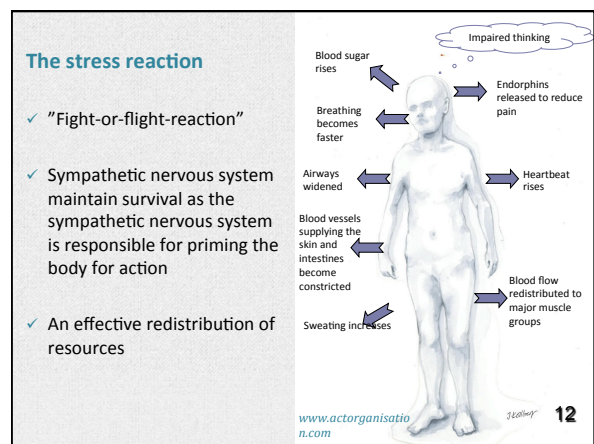
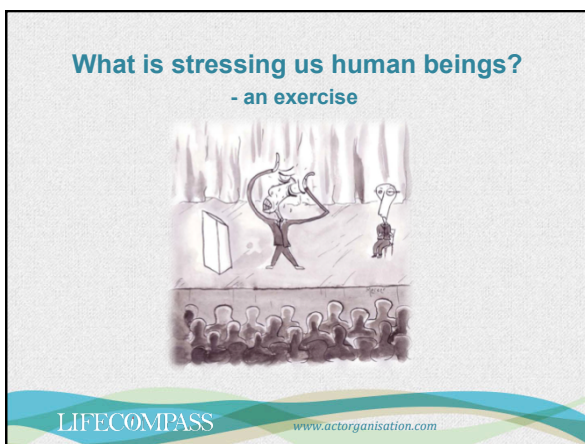
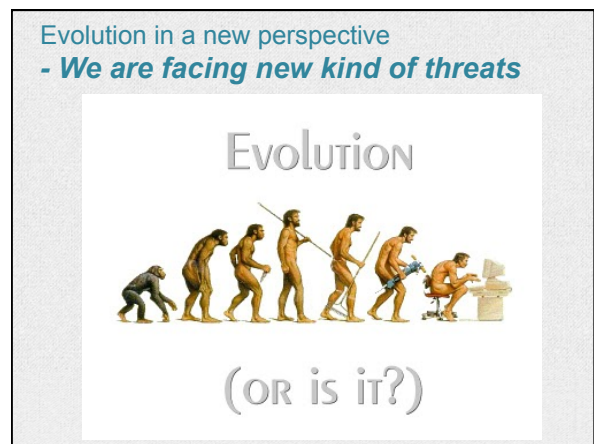
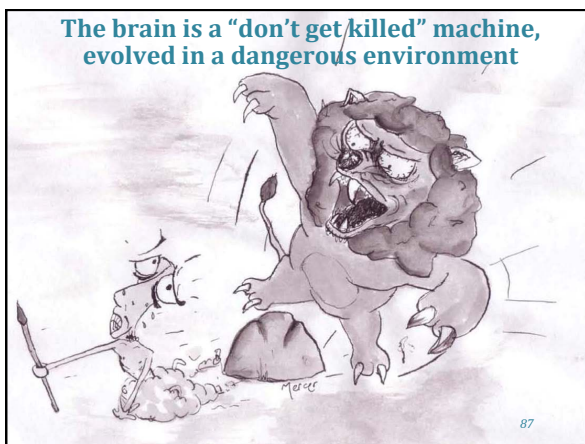
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How thoughts may trigger the stress response – film



From the film "It's Kind of a Funny Story"

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What happens when we are stressed?

Acute stress, directly;	Long term stress;
↔ Adrenaline is pumped into the blood stream	↔ Abdominal fat
↔ The immune system goes on alert	↔ Cortisol is released
	↔ The immune system is compromised

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Have you been stressed?

- ↔ What happened in the body?
- ↔ Thinking?
- ↔ Mood?
- ↔ Behaviour (things you do)?

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Signs of stress

The body, physical signs

- ↔ Sleep problems
- ↔ Headache
- ↔ Stomach pain
- ↔ Heart palpitations
- ↔ Tension in the body
- ↔ Aches and pains
- ↔ Dry mouth
- ↔ Impotence/lack of sexual desire
- ↔ Dizziness, feelings of unreality
- ↔ Shaky, clumsy

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Signs of stress

Mood

- ↔ Anxiety, worry
- ↔ Guilt, shame
- ↔ Burnout
- ↔ Sadness
- ↔ Irritability, anger
- ↔ Feelings of exhaustion
- ↔ Crying spells
- ↔ Lack of emotions

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Signs of stress

Thinking

- ↔ Fuzzy thinking
- ↔ Trouble letting go of thoughts (e.g., about work or study)
- ↔ Difficulty prioritising
- ↔ Difficulty concentrating
- ↔ Forgetfulness
- ↔ "Tunnel vision", can't see other possibilities

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When we are distressed, we tend to narrow our focus and thus see fewer options. Life is a banquet, but sometimes we only see a single bowl of cold porridge.



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Signs of stress

Things you do

- ↪ Eating too much or too little
- ↪ Eating too fast
- ↪ Numbing yourself with alcohol or drugs
- ↪ Walking around aimlessly
- ↪ Doing things twice
- ↪ Controlling, becoming pedantic
- ↪ Stop listening
- ↪ Arguing, swearing
- ↪ Streamlining

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The problem of stress is not stress it's the lack of recovery and rest



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The problem of stress is not stress itself!

- ↪ The problem of stress is the lack of recovery and rest.
- ↪ Stress is dangerous only if it goes on for a long time.
- ↪ Imagine driving at 110 km/h (65 mph) in 2nd gear for a long time ...



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**What charges you?
What gives you recovery and rest?**



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Two ways to cope with stress

1. Change: Eliminate the sources of stress

A rule of thumb may be that you can often influence things happening outside your body.

2. Acceptance: Change your attitude to stress

It is often rather difficult to influence things happening inside your body. However, you can influence the way you relate to the things that stress you.

"It's not always what happens to you, but how you cope with it that matters."

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What is effective against stress?

1. **To change** or eliminate the sources of stress
2. **Acceptance**, to change your attitude to stress
3. **Recovery**, including sleep
4. **Exercise**
5. **Mindfulness**, attitude, living in the present moment, etc.

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What is effective against stress?

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Things we need to practise accepting:

- ↔ The fact that we will all die



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Things we need to practise accepting:

- ↔ The fact that we will all die
- ↔ Our own history, our childhood
- ↔ Thoughts and uncertainties of the future
- ↔ Our body and its functions
- ↔ Pain
- ↔ Disease
- ↔ Our appearance
- ↔ Feelings – both negative and positive

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Things we need to practise accepting:

- ↔ Other people
- ↔ That we have to choose and act
- ↔ Crises
- ↔ Everyday life
- ↔ Tiredness
- ↔ Sexual orientation
- ↔ That it is sometimes difficult to accept

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External problems

If you have a problem in the world outside of you, outside of your body ...

- ↔ What can you do to solve the problem?
- ↔ Does it work in the short run?
- ↔ Does it work in the long run?

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Guide for efficient problem-solving

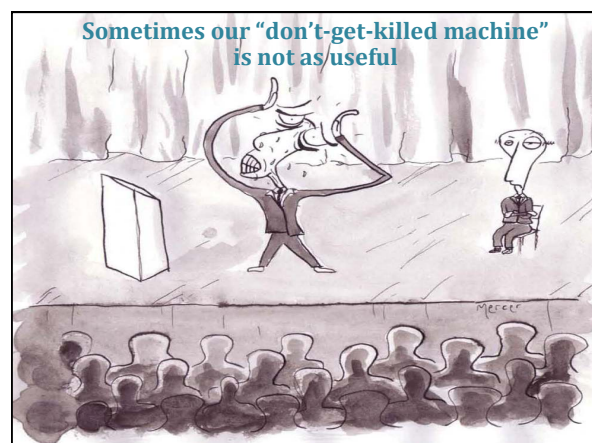
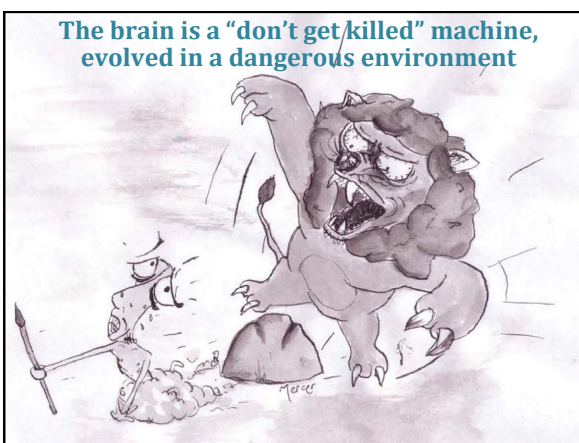
1. What is the problem?
2. How can you solve the problem? - By brainstorming?
3. Analyse – pros and cons of the different solutions?
4. Select the best solution and make an action plan
5. Evaluate the results

When to start: When to evaluate:

The difference between external and internal problems

- ↔ **External problems**
"If there is something you don't like, consider how to get rid of it and get rid of it."
- ↔ **Internal problems**
"If you are not willing to have your thoughts and feelings, you are stuck with them."

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The difference between external and internal problems

- ↔ **External problems**
"If there is something you don't like, consider how to get rid of it and get rid of it."
- ↔ **Internal problems**
"If you are not willing to have your thoughts and feelings, you are stuck with them."

Why is it so?

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The difference between external and internal problems

- External problems
"If there is something you don't like, consider how to get rid of it and get rid of it."
- Internal problems
"If you are not willing to have your thoughts and feelings, you are stuck with them."

Why is it so?

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Don't think ...

... about the numbers

1
4
7

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On control

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Us humans are the only species on this planet that kills ourselves...

Also wonderful experiences may bring pain

Natural pain or unnecessary pain?

Natural pain, natural discomfort

- We will experience pain and discomfort during our lifetime.
- The pain and discomfort vary in strength.
- The pain is natural, as life sometimes hurts.

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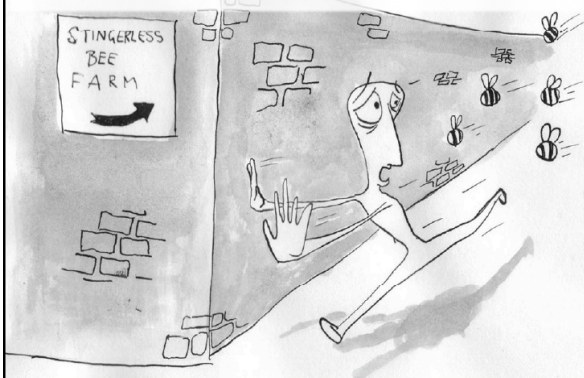
Natural pain or unnecessary pain?

Unnecessary pain, unnecessary discomfort

- "Unnecessary pain" is created when we don't want to feel the natural pain.
- By acting wisely when in "natural pain", we can avoid creating more pain for ourselves, for example by not becoming so stressed about being stressed.
- Remember the example of the broken arm. The arm is broken (natural pain), but by reacting to this, you may create more (unnecessary) pain.

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Negative thoughts and feelings are like wasps without stingers. They seem scary, but do we really have to run away from them?



What do I need to accept?
And how can I do that?



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An observation

"My life has been filled with terrible misfortunes ...
... some of which actually happened."
Mark Twain

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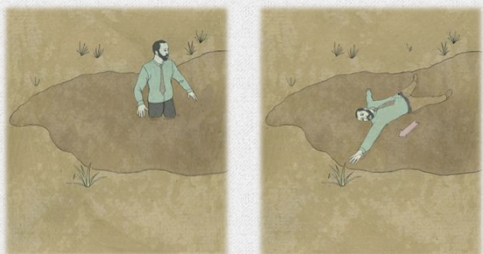
Acceptance and willingness as an
alternative

- A practical exercise

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To fall into quicksand



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53

The Chinese finger cuffs



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Why is it so hard to accept?

- External problems can usually be controlled, and therefore we try to use the same strategy for internal problems
- Control sometimes works in the short run
- Happiness = absence of pain (the medical model)

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Happiness = absence of pain (the medical model)

Swedish physicians: A cure for your worries and anxiety. New method this autumn.

Svenska läkare: BOTA DIN ORO OCH ÅNGEST ny metod i höst

SIDAN 20

Life is really heavy ... (sometimes)

"Wonderful"

"Terribly hard"

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About life

DORIS AV SUSANNE FREDÉLII - FÖRSTU DN FÖR ALLA BARN

Sometimes it's uphill. Sometimes it's downhill. Sometimes everything is upside down. Sometimes you sail on a shrimp sandwich (have an easy time). Sometimes it's uphill.

"There's as much life in a moment of sorrow as in a moment of joy."

Steven C. Hayes



Why mindfulness?

Medveten Närvaro

CD or app with exercises, available in English actorganisation.com

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Why learn mindfulness?

At work After work With partner

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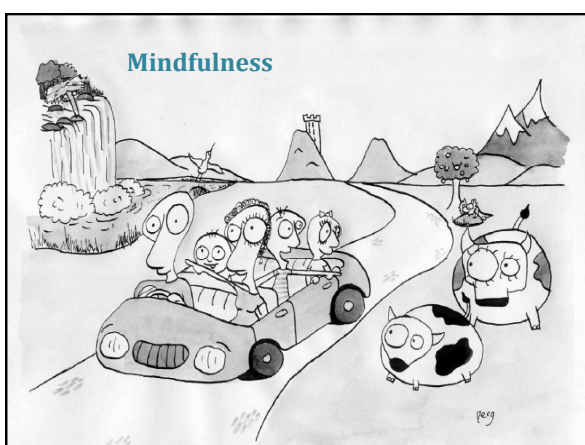


What is mindfulness?

Mindfulness involves paying attention in a particular way:
 on purpose,
 in the present moment,
 and notice when we judge.

– JON KABAT-ZINN (revised)

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According to research, regular mindfulness practice has several positive effects, e.g.;

- Reduces stress
- Can prevent depression and relapse of depression
- Reduces anxiety and stress, improves mental health and thinking skills and promotes psychological flexibility
- Improves the immune system and increases the body's self-healing capacity
- Improves sleep
- You cope better with pain
- You become smarter
- You develop a more helpful attitude towards your thoughts and feelings. You learn to observe them, to experience them and to choose how you respond to them. In this way, you will have more freedom to create the life you choose, the life you want to live.

“What are we going to do now?”
When we are not in the here and now, in the present moment (mindfully aware), we often miss obvious solutions.

ACT | Promoting Mental Health and Resilience
 Session 2 – The Life Compass
 Fredrik Livheim www.actorganisation.com

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 Course leader 1 & Course leader 2
 Course leaders

How much have you practised?

1. Mindfulness Max 8 + 5 points
 a) Exercise 1 or 2 at least four times a week.
Max 8 points (4 points a week)
 b) Choose something you do every day and try to be extremely mindful.
Max 5 points (if 5 days a week, 4 points if 4 days a week, etc.)

2. Acceptance Max 4 points
 What happens when you struggle? What happens when you accept?
Max 4 points (2 points a week)

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How much have you practised?

3. Change Max 4 points
 Is there something you want to change? Workload? Overview? Relationships?
Max 4 points (decide for yourself: 4 = great changes, etc.)

4. Exercise Max 4 points
 Preferably at least 30 minutes of brisk walking twice a week.
Max 4 points (2 points a week)

Total max 25 points

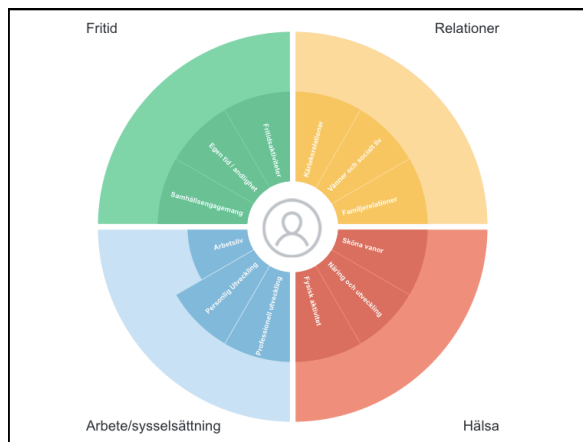
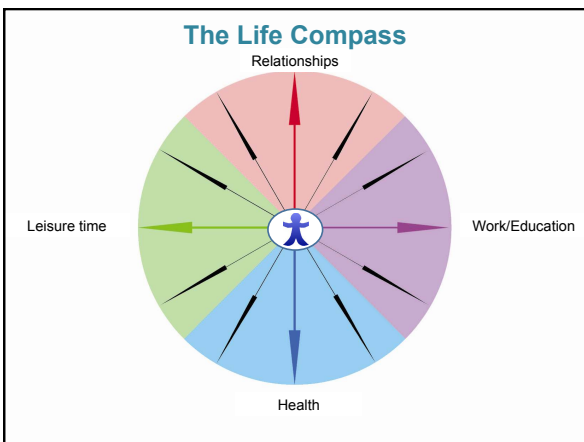
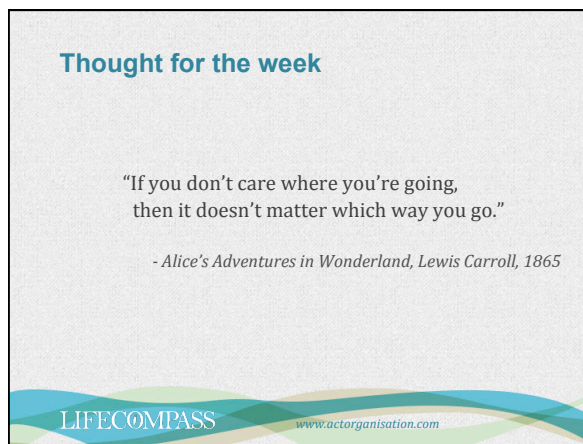
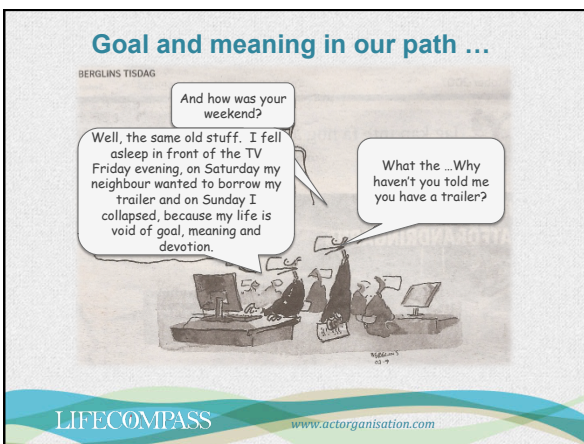
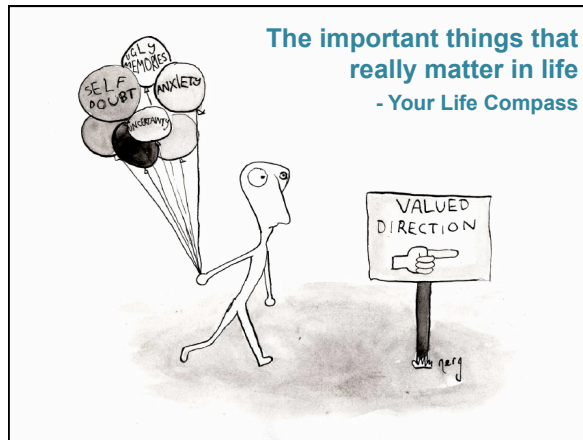
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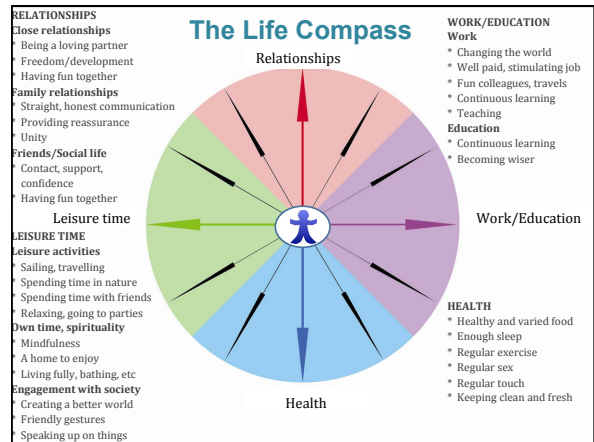
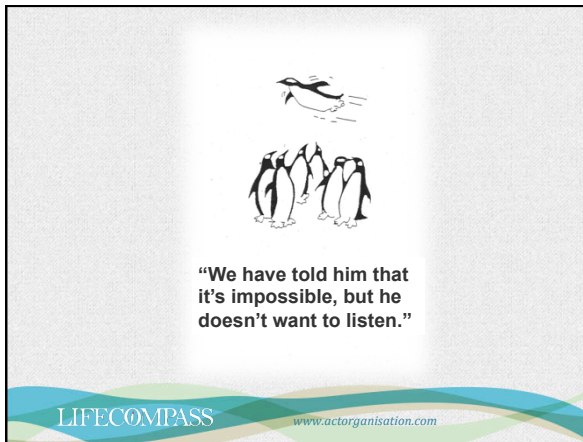
What thoughts is your “chattering monkey” giving you?

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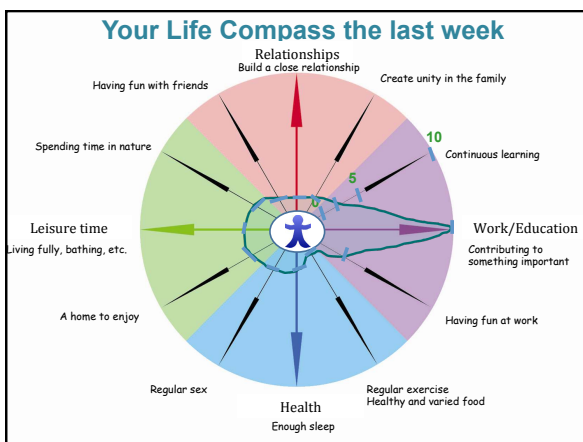
Practised at home

Name	CD (max 8 p)	Mindfulness (max 5 p)	Acceptance (max 4 p)	Change (max 4 p)	Exercise (max 4 p)	Total (max 25 p)
Participant 1						





- ### The five animals – A Qi Gong exercise
- Start with your feet together. Move your left foot to the side until you are standing with your feet shoulder width apart.
- The deer** – lean forward, look up to the mountains far away.
 - The bear** – bend your upper body forward to waist height, let your head hang down.
 - The monkey** – cup your hands, bend down and scoop up a handful of energy from the ground behind your feet, raise it close to your body, to your heart, stretch out your hands, as if handing over a gift, then lower your hands.
 - The crane** – lift your hands up over your head and stretch up high, stand on your toes.
 - The eagle** – arc your raised arms, your wings, out and down, lean backwards, lower your wings behind your back, let them keep on in a circle, raise them in front of you to heart height, fold them by lowering them to your body.
 Move your left foot until you are standing with your feet together.



What has your life been like during the last week?

Consider both

Quantity & Quality (vitality/strength)

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What has your life been like during the last week?

On www.stressklubben.se, you get an idea of your balance and life space on your computer, smartphone or tablet, for free.

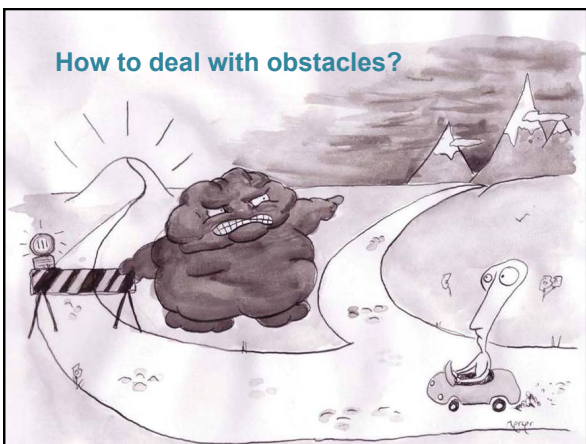
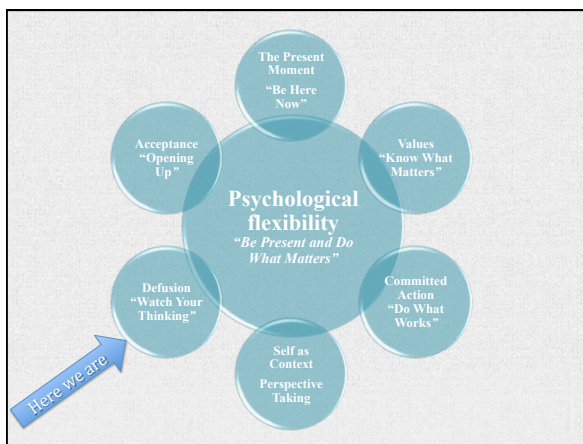
24:1



What is hindering me?

Relationships	
Leisure time	
Work/ Education	
Health	

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"No arms, no legs ... no worries"




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You are perfect as you are
Stop comparing yourself to others.



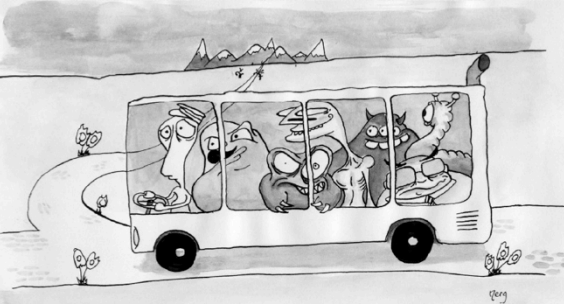
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Relationships
- What does it feel like to be in love?



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Life is like a bus with scary passengers ...



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Relationships

Different ways to deal with obstacles:

1. Compromise with your thoughts
2. Convince your thoughts
3. Accept your thoughts
4. Accept your thoughts and act



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What am I in control of?


The important life

I'm in FULL control of my actions
- That is, what steps I take with my feet.

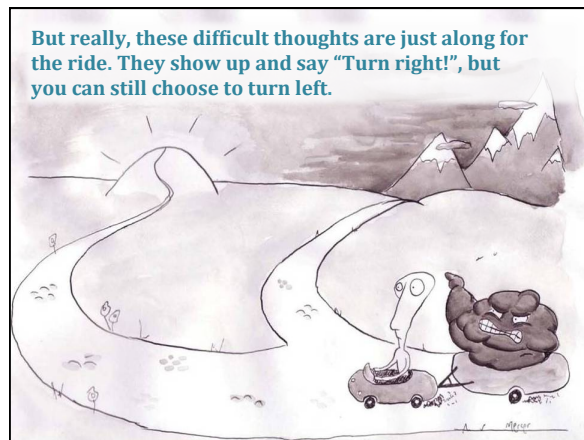
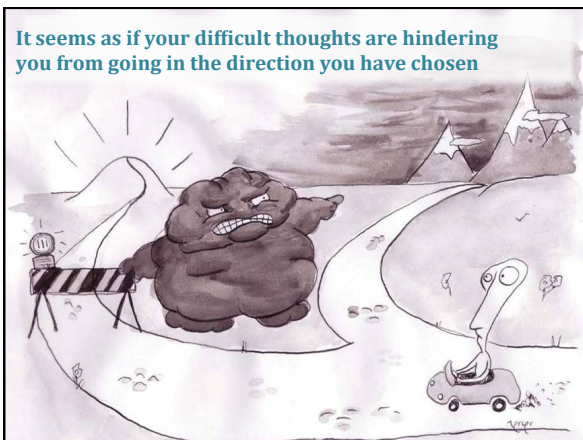
I'm in NOT in full control of what life presents
- But I can increase the chances of getting what I want, by the steps I take with my feet.

Thoughts and feelings:

- Difficult thoughts
- Sorrow!
- Anger!
- Anxiety!
- Insecurity!



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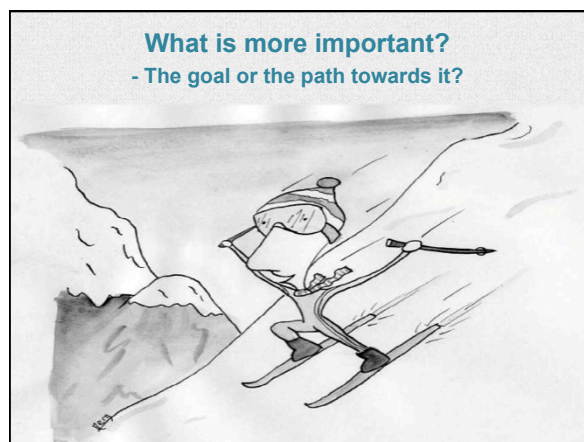
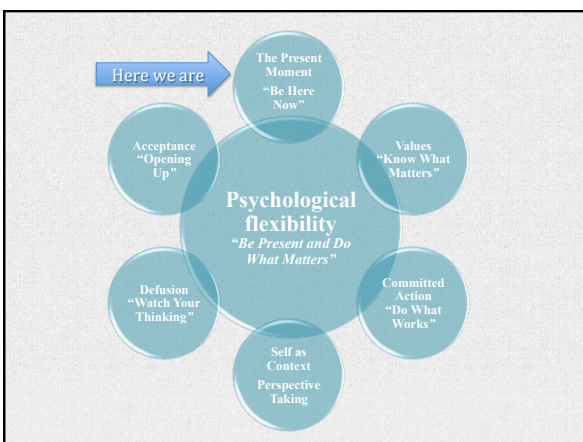
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 Course leaders

Thoughts for the week

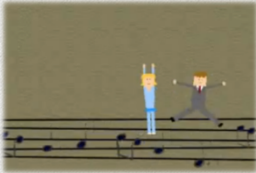
“Even those who are afraid of living will die one day.”
 - Thomas DiLeva

“The big question isn’t: Is there life after death?;
 the big question is: Is there life BEFORE death?”
 - Unknown

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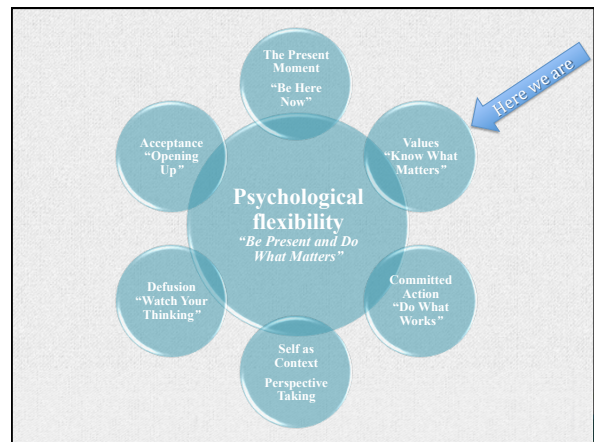


Beware of the hoax that might cost you your life!

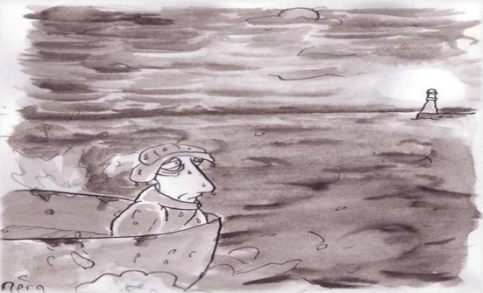


- ↔ If I just ... xxx, then I'll ... xxx
- ↔ Solution: You are already there! Enjoy yourself, dance and experience ...

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A life direction is like a distant beacon. It guides you through the storm.



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Life directions are like a house ... What kind of house do you want?

- ↔ There are no life directions (values) that are right or wrong.
- ↔ It's not about finding "what you really want, deep down inside", it's about choosing freely what you want to strive towards. It's a bit like choosing what you want your own "life direction house" to look like.
- ↔ You can always change your mind and choose a completely different "life direction house", or rebuild it, or add new rooms, on the basis of your current needs.

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Life directions are like a house ... What kind of house do you choose?



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What's the difference between Life Directions & Goals?

- ↔ A life direction (a value) is like a beacon, something you can strive towards, something that cannot be completed.
- ↔ A goal is something you can achieve and that you can tick off on a list.
- ↔ Now we are going to do a little quiz.

Life Direction	Goal
Go east	✓ Go to London
Be a loving partner	✓ Getting married
Take care of nature	✓ Get your neighbours to recycle
Be a good friend	✓ Have seven friends
Take good care of myself	✓ Go away on Christmas holiday
Challenge myself to grow	✓ Do a parachute jump

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The smart thing about life directions and actions

I'm in FULL control of my actions
 - That is, what steps I take with my feet. It's smart to put my energy into changing the things I'm in control of.

I'm NOT in full control of what life presents
 - But I can increase the chances of getting what I want, by the steps I take with my feet.

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My Life Directions

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<p>Valuing ourselves (blue)</p> <ol style="list-style-type: none"> 1. seeing possibilities 2. moving 3. feeling pleasure 4. giving thanks 5. finding peace 6. asking for help 7. understanding 8. accepting yourself 	<p>Valuing living (green)</p> <ol style="list-style-type: none"> 17. creating 18. dancing with joy 19. achieving 20. daring to dream 21. seeking knowledge 22. seeking freedom 23. embracing the moment 24. imagining
<p>Valuing relationships (white)</p> <ol style="list-style-type: none"> 9. being compassionate 10. trusting 11. belonging 12. being truthful 13. loving and being loved 14. connecting 15. admiring 16. appreciating 	<p>Valuing in the presence of difficulty (charcoal)</p> <ol style="list-style-type: none"> 25. letting it be 26. seeking wisdom 27. staying with uncertainty 28. struggling 29. saying goodbye 30. feeling secure 31. feeling different 32. forgiving

RELATIONSHIPS

[Life Direction Step I want to take](#)

WORK/EDUCATION

[Life Direction Step I want to take](#)

LEISURE TIME

[Life Direction Step I want to take](#)

HEALTH

[Life Direction Step I want to take](#)

Selecting cards for Life Directions

1. Choose which area in your Life Compass to start with.
2. Select two cards that you like per area. Place them on your Life Compass. You can use a card that you like for more than one area.
3. Take a blank Life Direction Card and write something on it yourself. Place a self written card on each of the four areas in your Life Compass.
4. When you have finished, there are 3 cards on each of the four areas in your Life Compass.

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Telling each other about your Life Directions

Talking

1. Select a card that you like.
2. Tell the listener:
 - a) "This is important to me because ..."
 - b) Give a specific example of how you have expressed this in your life in the past.
 - c) Give an example of how you would like to express this concretely in your life in the future.
3. Repeat with one card per area. Continue with more cards per area if you have time.


Listening

1. Maintain eye contact.
2. Be mindful, listen with your ears and eyes wide open.
3. If the speaker is abstract, ask for concrete examples.
4. No further questions or comments.
5. Thank the speaker when (s)he has finished talking about a card.

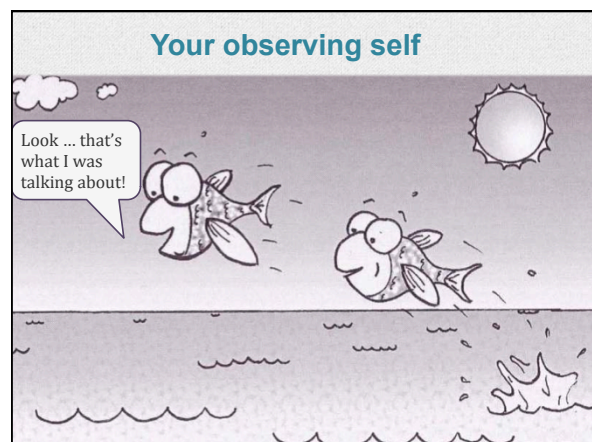
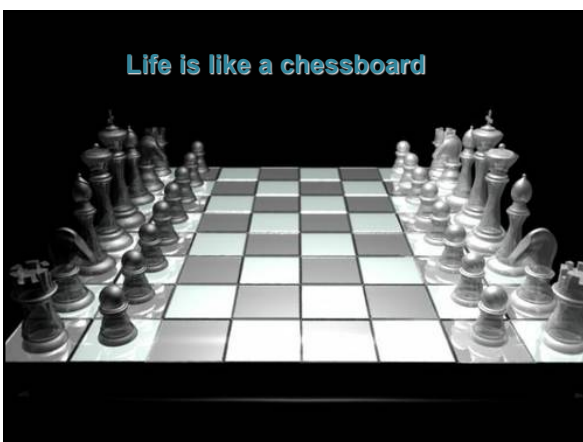
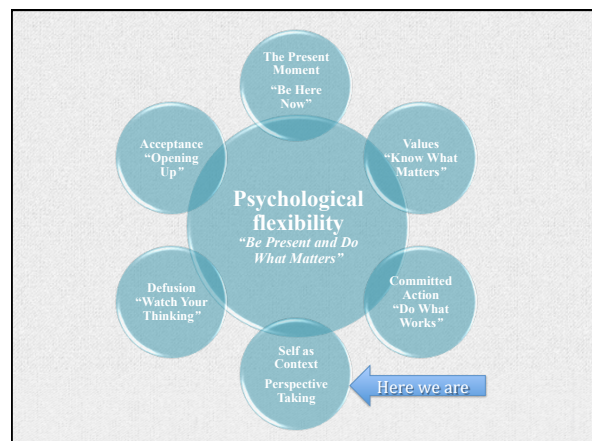
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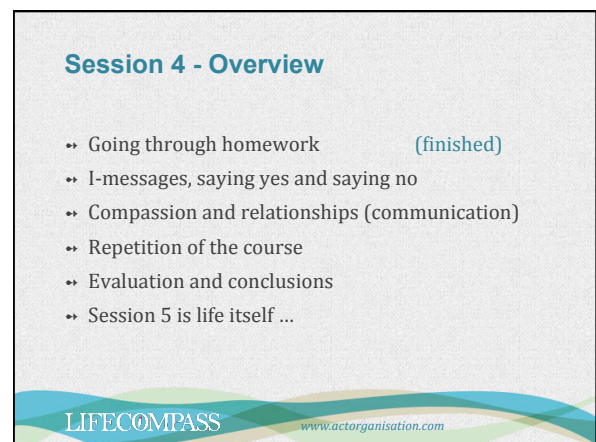
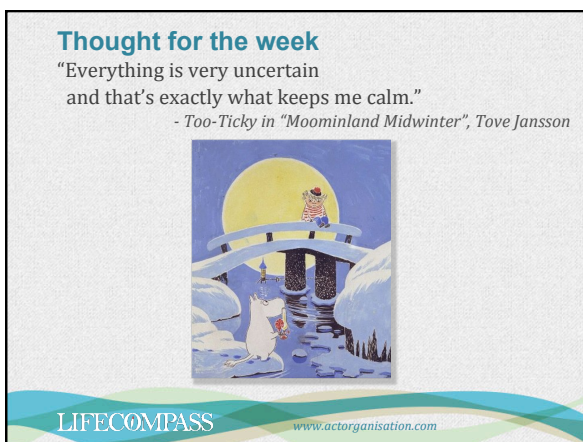
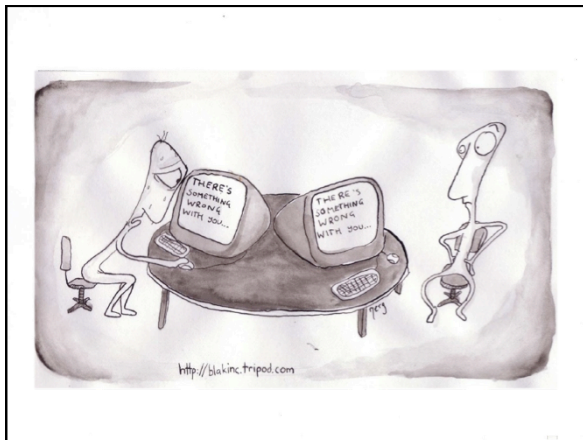
Card	Example of how I have expressed it	Example of how I'd like to express it
Work/Education 1. 2. 3.		
Health 1. 2. 3.		
Leisure time 1. 2. 3.		
Relationships 1. 2. 3.		

My Life Direction until the next session



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Session 4 - Overview

- ↪ Going through homework (finished)
- ↪ I-messages, saying yes and saying no
- ↪ Compassion and relationships (communication)
- ↪ Repetition of the course
- ↪ Evaluation and conclusions
- ↪ Session 5 is life itself ...


Standing up for yourself - how to say no



NOOO!!!

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Dare to choose Dare to say no and dare to say yes



- Make your own choices and follow them through.
- Say yes without hesitation and mean it. It will give you a lot to do and also many different experiences.
- When we often say yes, we usually learn a lot. Check with yourself whether it is a step towards what is important in your life.

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Compassion and relationships



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Why expose yourself to the risk of being hurt?

An important relationship in your life & a wonderful moment.



Something sweet.

My wonderful moment

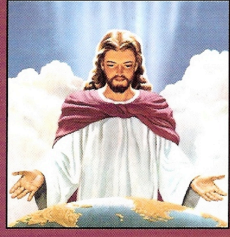
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An exercise in compassion



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He is watching.

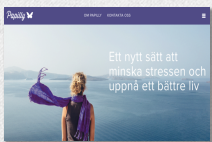


**Give Him
a good show.**

LIFECOMPASS www.actorganisation.com



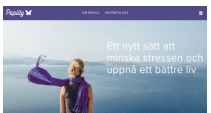
Future directions
- Internet self-help




- 1) Launch of self-help program for stress 2015
- 2) Development of more self-help programs
- 3) Development screening tools and assessment
- 4) Constant updates with input from experts and users

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What we are building:



1. An attractive web page
2. The Life Compass
3. Screening for problems
4. Self-help tips on problems
5. Structured self-help programmes on problems



3. Screening for problems

4. Self-help tips on problems

5. Self-help programmes

Stress Sleep Relations Weight Finances Depression

Stress Sleep Relations Weight Finances Depression

Stress Sleep Relations Weight Finances Depression

What we are building - What I want in life

6. The Life Compass is a tool for identifying what you consider important in life.
7. When you have examined your Life Compass, you get an idea of your balance and life space and of your life situation in percentage.

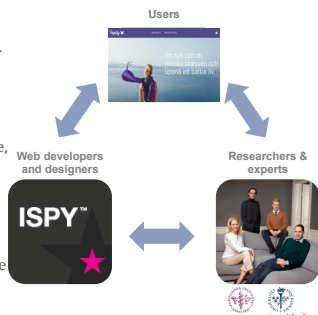
Relations: 55% Well-being: 76% Health: 58% Finances: 73%

Together, we can build this Service:

Users
The users control how the Service is developing, based on how they use it.

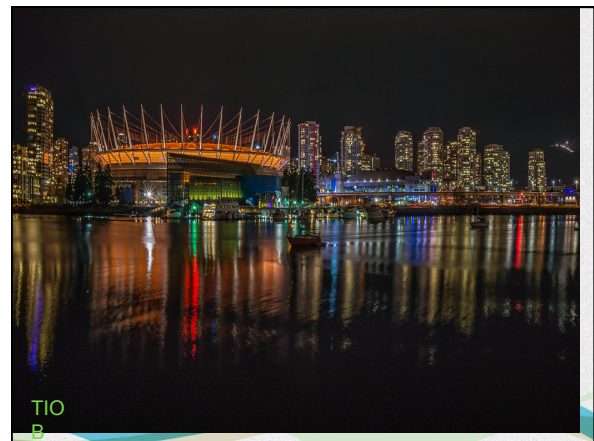
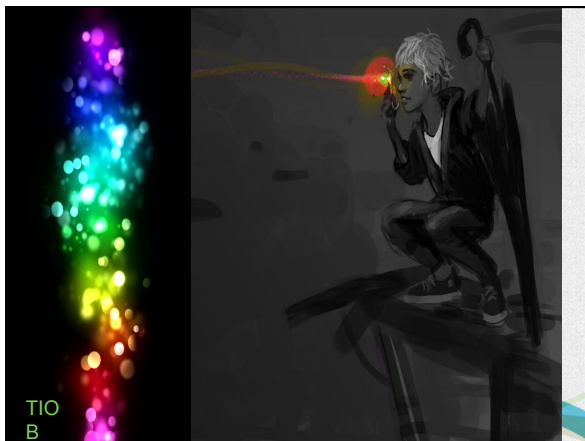
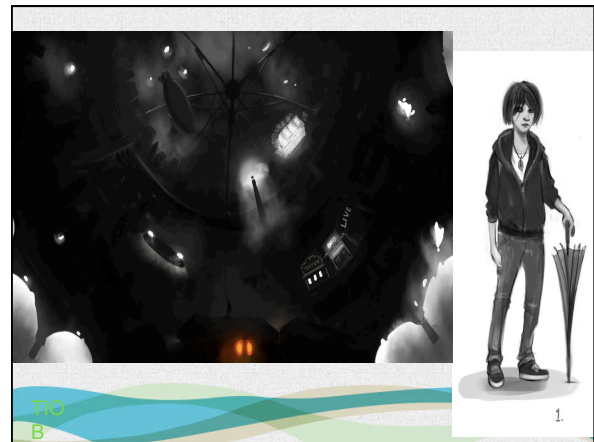
Researchers & experts
Experts in the different areas are summoned to work on the basis of the most efficient methods available, and to study how the Web Service functions.

Web developers & designers
Leading web developers turn the Web Service into a high class service and make it fun to use.



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Future directions

- ACT group interventions



1) Training of trainers in different countries;

- Sweden (ongoing)
- England (ongoing)
- Denmark
- Finland (ongoing)
- USA (ongoing, more to start?)
- Cyprus, Norway, Poland (being discussed)

2) Small adaptations for different populations, like;

- a) For clients with diabetes
- b) For stressed parents with children ASD
- c) For clients with suicidal ideations lost someone to suicide
- d) For top athletes

Did we succeed? You got an idea about?;



1. Why this intervention? And are we as humans facing new kind of challenges living in an information dense society?
2. A brief walk through empirical support for ACT and the studies we have made on ACT in group format
3. How we train new group-leaders in a large scale
4. Examples of the content of this ACT group intervention

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Please remember to scan out.

What did you think?....
complete the 3 question quickeval for this session at <https://contextualscience.org/quickeval>

This was presentation was session # 113



Thank you!



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