



Criticisms of Contextual Behavioral Science

Inside and Out



Panelists

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- ▶ **Jonathan B. Bricker, Ph.D.**, Fred Hutchinson Cancer Research Center
- ▶ **Steven C. Hayes, Ph.D.**, University of Nevada, Reno
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Disclosures

- **Brandon Gaudiano, Ph.D.** receives grant funding from the National Institutes of Health and royalties from Oxford University Press and Routledge on topics related to ACT.



Background on a controversy...





The efficacy of Acceptance and Commitment Therapy: An updated systematic review and meta-analysis



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ARTICLE INFO

Article history:

Received 7 March 2014

Received in revised form

3 July 2014

Accepted 28 July 2014

Available online 19 August 2014

Keywords:

ACT

Systematic review

Meta-analysis

Methodological quality

Evidence-base

ABSTRACT

Acceptance and Commitment therapy (ACT) has attracted a lot of interest during the last 10–15 years with a strong increase of the number of randomized controlled trials (RCTs). The present review and meta-analysis includes 60 RCTs (4234 participants) on psychiatric disorders, somatic disorders, and stress at work. The mean effect size across all comparisons was small (0.42). Compared to the Öst (2008) meta-analysis there was no significant improvement in methodological quality and deterioration in effect size (from 0.68). When ACT was compared to various forms of cognitive or behavioral treatments a small and non-significant effect size of 0.16 was obtained. An evidence-base evaluation showed that ACT is not yet well-established for any disorder. It is probably efficacious for chronic pain and tinnitus, possibly efficacious for depression, psychotic symptoms, OCD, mixed anxiety, drug abuse, and stress at work, and experimental for the remaining disorders.

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Öst (2014) Meta-Analysis Summary

- ▶ ACT studies of psychiatric, somatic, and stress related conditions
- ▶ N = 60 RCTs (4,234 participants)
- ▶ Overall effect size for ACT vs. comparison conditions was .42 (small to medium)
- ▶ No significant differences for ACT vs CBT
- ▶ Determination that ACT is not “well established” for any condition (APA’s criteria for defining empirically supported therapies)
- ▶ Lack of improvement in methodological quality of ACT studies since last meta-analysis in 2008



Departing from the essential features of a high quality systematic review of psychotherapy: A response to Öst (2014) and recommendations for improvement

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ARTICLE INFO

Article history:

Received 5 September 2016

Received in revised form

12 February 2017

Accepted 24 May 2017

Available online 29 May 2017

Keywords:

Treatment efficacy

Randomized clinical trials

Acceptance and commitment therapy

Cognitive behavior therapy

Research methodology

Empirically based treatments


ABSTRACT

Öst's (2014) systematic review and meta-analysis of Acceptance and Commitment Therapy (ACT) has received wide attention. On the basis of his review, Öst argued that ACT research was not increasing in its quality and that, in contradiction to the views of Division 12 of the American Psychological Association (APA), ACT is "not yet well-established for any disorder" (2014, p. 105). We conducted a careful examination of the methods, approach, and data used in the meta-analysis. Based in part on examinations by the authors of the studies involved, which were then independently checked, 91 factual or interpretive errors were documented, touching upon 80% of the studies reviewed. Comparisons of Öst's quality ratings with independent teams rating the same studies with the same scale suggest that Öst's ratings were unreliable. In all of these areas (factual errors; interpretive errors; quality ratings) mistakes and differences were not random: Öst's data were dominantly more negative toward ACT. The seriousness, range, and distribution of errors, and a wider pattern of misinterpreting the purpose of studies and ignoring positive results, suggest that Öst's review should be set aside in future considerations of the evidence base for ACT. We argue that future published reviews and meta-analyses should rely upon diverse groups of scholars rather than a single individual; that resulting raw data should be made available for inspection and independent analysis; that well-crafted committees rather than individuals should design, apply and interpret quality criteria; that the intent of transdiagnostic studies need to be more seriously considered as the field shifts away from a purely syndromal approach; and that data that demonstrate theoretically consistent mediating processes should be given greater weight in evaluating specific interventions. Finally, in order to examine substantive progress since Öst's review, recent outcome and process evidence was briefly examined.



Atkins et al. (2017) Response

- Documented 91 errors in Öst's (2014) meta-analysis involving 80% of the reviewed studies
- Öst's methodological quality ratings deemed unreliable based on comparison with ratings by independent group of scholars
- All Öst's documented errors and quality rating inconsistencies were negative toward ACT and not random
- Öst's meta-analysis should be "side aside" given these flaws
- Meta-analyses, quality ratings, and EST designations should be made by well-crafted committees and impartial groups of scholars rather than single individuals
- Öst (2017) responded that Atkins et al.'s criticisms were either irrelevant or had no merit, and that his interpretation was indeed the correct one



A-Tjak et al. (2015) Meta-Analysis

- Meta-analysis of 38 RCTs (1,821 patients) of mental disorders or somatic health problems
- ACT outperformed control conditions on primary outcomes with an effect size difference of .57 (medium)
- No significant difference between ACT vs CBT conditions
- Study quality ratings improved over time

A-Tjak JG, Davis ML, Morina N, Powers MB, Smits JA, Emmelkamp PM. A meta-analysis of the efficacy of acceptance and commitment therapy for clinically relevant mental and physical health problems. *Psychother Psychosom.* 2015;84(1):30-6.





Discussion Questions

- ▶ *What do critics have right and what is CBS going to do about it?*
- ▶ *What do critics have wrong and what is CBS going to do about it?*



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