# Acceptance and Commitment Training for Employees' Wellbeing: Results From a Randomized Controlled Trial

## CONTEXT

- The healthcare sector is a stressful work environment where m Williams, 2003; Walsh & Walsh, 2001).
- The prevalence of depression among nurses is 9% while it varies 20% of nurses reported that their mental health condition had imp 2006).
- These problems have individual and organizational consequences. the quality of care provided, they contribute to increase absen (ASSTSAS, 2009).
- Recently, interventions have been offered within workplaces to h These interventions include Acceptance and Commitment Therapy being by helping people develop their psychological flexibility.
- Studies on ACT interventions offered at work show that they see burnout and improve satisfaction and psychological flexibility (ex.: been conducted with healthcare professionals and the contribution
- The objective of this project is to evaluate the effectiveness of an cope with work-related stress. It also aims at exploring participants'

### **RESEARCH QUESTIONS AND HYPOTH**

Do participants randomly assigned to the ACT workshops show (H2) and lower psychological distress (H3) at post-program than t

#### **METHOD**

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- Participants: Twenty-three (N=23) employees drawn from 2 put
- Intervention: Four 2 hours long workshops based on ACT workshops were invited to :
  - Explore what really matters to them, the goals and values that give meaning to their lives;
  - $\checkmark$  Engage in actions allowing them to achieve their goals and live their values more fully;
  - Identify pitfalls that increase their stress and anxiety and implement effective strategies to sidestep these pitfalls;
  - ✓ Cultivate mindfulness.
- Research design: A randomized controlled study design was used with a wait-list control group. Two focus groups were held 2 weeks after the workshops.
- Measures:
  - (MPQ) (Erisman & Roemer, 2012) & Cognitive Fusion Questionnaire (CFQ) (Dionne & al., 2014)
  - 2011)

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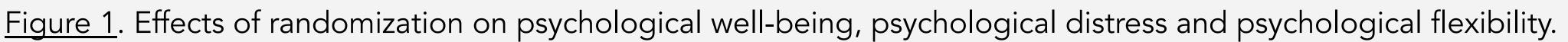
ore professionals suffer from mental health problems (Miche &	•
between 4 and 7% within the general population. In 2005, nearly baired their ability to perform their job normally (Shields & Wilkins,	
s. In addition to decreasing the quality of life of professionals and nteeism, turnover rates, workplace accidents and medical errors	
elp employees develop different abilities related to mindfulness. / (ACT) (Hayes, Strosahl, & Wilson, 2012), which aims increase well-	
eem to help reduce symptoms of stress, anxiety, depression and Flaxman, Bond & Livheim, 2013). However, very few studies have of the different ACT processes is still unclear.	
ACT-based intervention designed to help healthcare professionals ' experience and satisfaction level with focus groups.	No
ESES	
greater psychological flexibility (H1), psychological well-being hose in a wait-list-control group?	
blic healthcare organizations in Quebec, Canada.	
were offered to employees. Participants taking part in the	
ues that give meaning to their lives:	

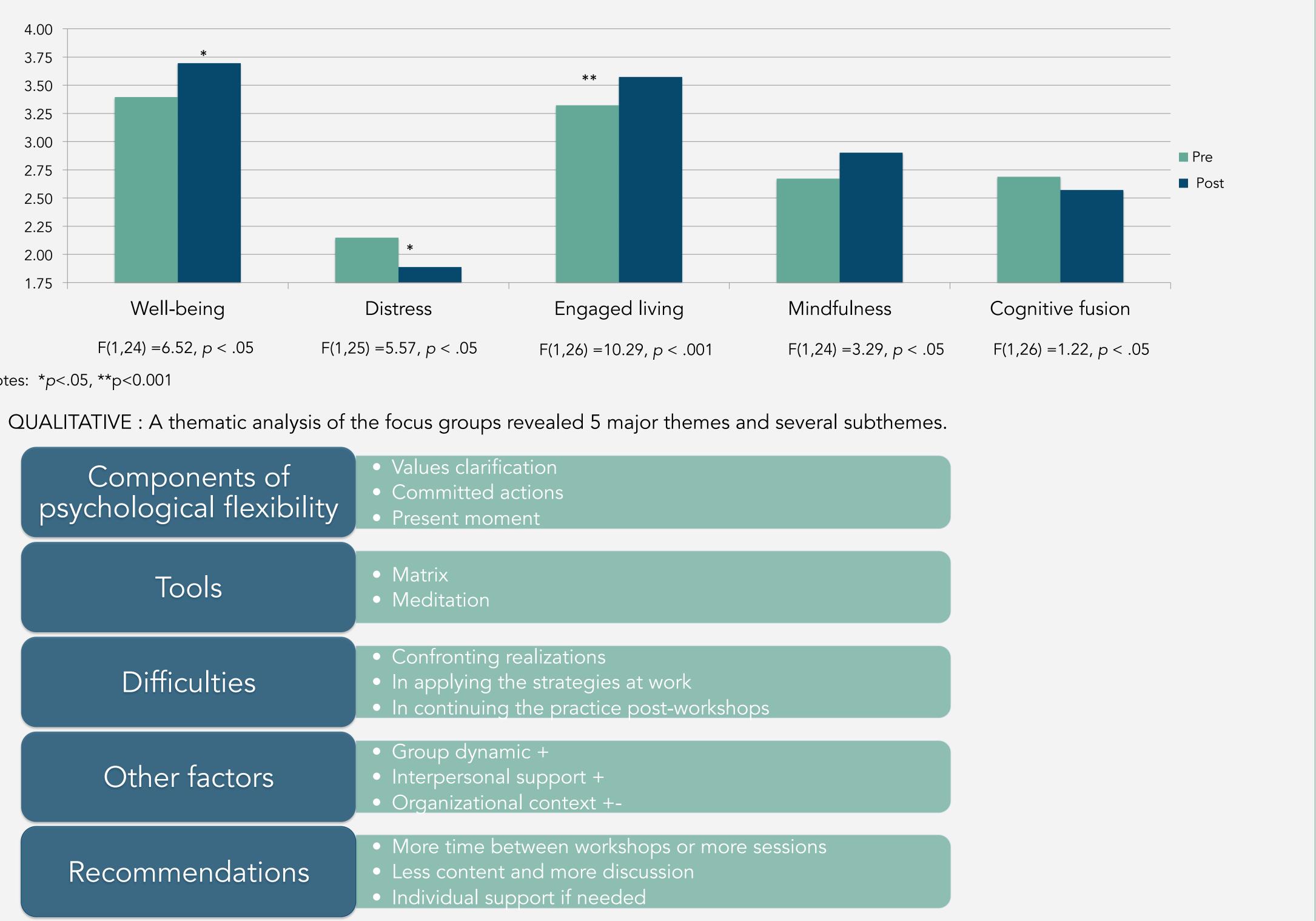
Psychological flexibility: Engaged Living Scale (ELS) (Trompetter & al., 2013), Mindfulness Process Questionnaire Psychological well-being: Échelle de bien-être psychologique au travail (Gilbert, Dagenais-Desmarais & Savoie,

Psychological distress: Échelle de détresse psychologique au travail (Gilbert, Dagenais-Desmarais & Savoie, 2011)

### RESULTS

QUANTITATIVE: In order to test hypotheses <u>1,2 and 3</u>, we ran analysis of variance (ANOVA) in which we examined the effect of randomization on mean levels of psychological well-being, psychological distress and psychological flexibility, controlling for baseline measures of each indicator.





otes: \**p*<.05, \*\*p<0.001

Components of psychological flexibility	<ul> <li>Values clarification</li> <li>Committed actions</li> <li>Present moment</li> </ul>
Tools	<ul><li>Matrix</li><li>Meditation</li></ul>
Difficulties	<ul> <li>Confronting realizations</li> <li>In applying the strategies at work</li> <li>In continuing the practice post-worksh</li> </ul>
Other factors	<ul> <li>Group dynamic +</li> <li>Interpersonal support +</li> <li>Organizational context +-</li> </ul>
Recommendations	<ul> <li>More time between workshops or more</li> <li>Less content and more discussion</li> <li>Individual support if needed</li> </ul>

### DISCUSSION

#### Conclusions :

• Employees randomized to the intervention group reported greater psychological flexibility, well-being, and lower distress at post-program compared to the control condition. • Zero-order correlations based on gain scores suggested that the changes in psychological well-being and distress were

associated with changes in psychological flexibility.

#### Limits :

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- Small sample size
- Organizational context
- Self-reported measures
- Psychological flexibility measure

