

Potentially Useful Information for Attendees

ACBS 2020

Case-Conceptualization in Acceptance and Commitment Therapy

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Case conceptualization in ACT does not **standardize treatments across clients**. It also does not **ensure that ACT interventions will not be tainted by other theoretical approaches**.

In ACT, case conceptualization tends to focus primarily on **functional processes**. It links **assessment, diagnosis, and treatment** in the ACT model. Assessment and treatment in ACT **differ mainly in duration**, and a goal of case conceptualization in ACT is the ability to **provide a process account of any and all human suffering**.

At the root of good case conceptualization in ACT, you'll find **direct behavioral assessment**. If this is not so, a major risk in case conceptualization is **therapist fusion with conceptual ideas**. Even if you should be vigilant to avoid "rigid conceptualization," your client's "lay conceptualization" of their problems **can provide you with valuable information about experiential avoidance and other process issues they may be experiencing**.

The ideal case conceptualization system will **produce a stream of integrated basic and applied research, as well as a stream of research bridging basic and applied domains**.

In ACT, we are generally more concerned with the function of behavior than with its form. A technical term that describes the form of behavior is **topography**.

Some process examples:

A client tells you about a meeting she had at work during the past week. She spoke up to propose some of her ideas, but her coworkers responded negatively, criticizing her suggestions. When talking with her, she repeatedly returns to a rapidly delivered, rigid account of what happened during the meeting, even when you try to redirect her attention to how she is feeling right now. The process demonstrated BEST by this example is **present-moment**.

"I just suck at relationships," a client tells you. "I'm the kind of person who goes on a few dates and almost immediately finds faults in whomever I'm with. I guess I just have high standards. I suppose I want to be in a relationship, but I'm not the type to settle down." The process demonstrated BEST by this example is **self**.

A client with a serious drinking problem comes to you for help. After describing his collapsing career, his separation from his husband and their adopted child, and news from his doctor that he is in the early stages of heart failure and cirrhosis, he says, "I've tried to quit before and failed, but I feel like I need to do this for my husband and daughter, even if right now they don't want to be around me." The process demonstrated BEST by this example is **values**.

A client seeks your services because erectile dysfunction is disrupting his relationship with his girlfriend. After a few sessions, he admits that heavy pornography use has left him struggling to feel aroused in intimate situations with his partner. You work with him to formulate a plan to decrease his pornography use, but the next visit he tells you he called in sick to work three days in the past week and spent nearly all day looking at Internet porn. "Well, that didn't go as I had hoped, but I'm willing to try to put that plan to work next week," he says. The process demonstrated BEST by this example is **commitment**.

"She was being unfair!" Your new client came to see you because she is having trouble with her boss. "No matter what I do, she says it's not good enough. She should be more understanding of how hard it is for me to manage as a single parent. She treats me differently than everyone else. I have to keep this job, but that is just impossible when she is always presenting everything I do in the worst possible light!" The process demonstrated BEST by this example is **defusion**.

Your socially anxious client describes a party he went to. "I was sweating through my clothes, and my heart was racing the whole time. I was scared to go, and I really didn't feel great the whole time I was there. But I have to tell you, I had a couple of really meaningful conversations with some people I hadn't seen in a while, and seeing everyone all dressed up was fun. I think I can do this again. I know I can." The process demonstrated BEST by this example is **acceptance**.

Useful measures in ACT case conceptualization might include **VLQ-2, AAQ-II, and FFMQ**.

You might find lots of things in an ACT treatment plan, but you would likely not find **specific hypothesized unconscious motivations of which the client should become aware**.

Case conceptualization can be **considered completed only at discharge: Ongoing assessment, reevaluation, and conceptualization is important through the treatment process**.

Good luck on your CE objectives quiz!

