# The "Carpet-Matrix":

# A Tool To Facilitate Therapeutic Work With Children And Adolescents

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Phase

1

2

### **BACKGROUND**

- Generalized anxiety disorder is characterized by the presence of anxiety symptoms and a constant and excessive state of worry, disproportionate to the reality of the facts.
- Acceptance and Commitment Therapy (ACT) has been shown to be effective in treating anxiety disorders across several studies.

#### **MEASURES**

I-AFQ and I-CAMM were introduced at the beginning of treatment and retested after 12 sessions.

#### **CASE PRESENTATION**

- V. is 12 years old and attends the second year of the secondary school
- Good cognitive functioning
- She lives with her parents, her brother (14 y old) and her young sister (6 y old)
- V. experienced anxiety problems at the age of 8 after her grandfather died
- The girl had already followed a psychotherapy after the death of her grandfather
- At the age of 12 anxiety problems re-emerge following another traumatic event: grandmother's death
- The girl has a nervous cough and can not say several words related to her fears
- V. was totally absorbed by thoughts of past events and worried for the future respect to herself and her family.
- No drug treatment was prescribed

Aim

Increasing the ability to

thoughts.

flexibility

recognize emotions and

Identifying values and goals.

Developing discriminations of

avoidant behavior and

increasing psychological

#### **TREATMENT**

- In the first phase, mindfulness, physicalization and defusion exercises were carried out to allow the girl to get in touch with her fears and thoughts (fig 1 and 2). To help V. to clarify and contact values and goals, we introduced a values card (fig.3).
- During the second phase the matrix model was introduced as a "carpet" (fig. 4). It was possible to place on the "Carpet-Matrix" the works realized in the previous sessions: the vase of the fears, the "characters" of Virginia's mind., the values cards. The girl was invited to move from one quadrant to another of the "Carpet-Matrix" and post notes were placed on the various quadrants in order to facilitate the process of discrimination of her own experiences and behaviors.
- Several post-its were used:
  - The heart, to identify people and important things (values);
  - The fis, to describe fears and thoughts that often capture Virginia's mind (just like the fish that bites on the hook);
  - The feet, to highlight the behaviors implemented toward or away from.
- The Carpet-Matrix facilitated the development of experiential exercises related to self as context as a perspective that helps us to observe internal experiences and behaviors (fig. 5).







**Activities** 

mindfulness exercises

values exercises ( cards)

watching movies

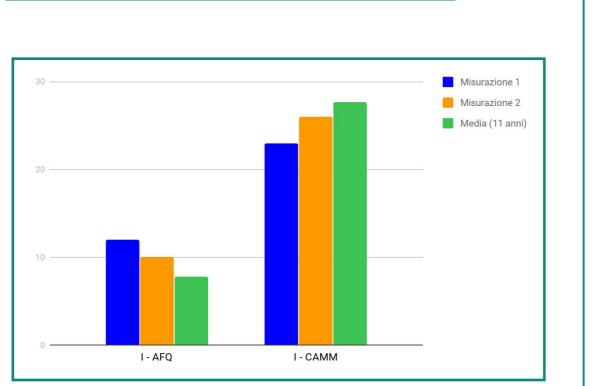
use of metaphors

identifying goals

"Carpet-Matrix"







## **RESULTS**

The results after 12 sessions show increasing psychological flexibility and mindfulness skills as shown by I-AFQ and I-CAMM scores.

### CONCLUSION

The use of the "Carpet-Matrix" allowed V. to increase the skills of discrimination and choice in a more concrete way. Currently the "Carpet-Matrix" has been used in therapy with children, adolescents and in group parent training.

What we could observe is that this tool allows us to create a physical context in which every person can stop and observe his own internal and external experience and the direction of his behavior. The "Carpet-Matrix" makes the therapeutic session more dynamic and engaging.

# REFERENCES

**Duration** 

8

4

- Eifert, G. H., & Heffner, M. (2003). *The effects of acceptance versus control contexts on avoidance of panic-related symptoms*. Journal of Behavior Therapy and Experimental Psychiatry, 34, 293–312.
- Hayes, L. & Ciarrochi, J. (2015). The Thriving Adolescent: Using Acceptance and Commitment Therapy and Positive Psychology to Help Teens Manage Emotions, Achieve Goals, and Build Connection. Context Press
- Levitt, J. T., Brown, T. A., Orsillo, S. M., & Barlow, D. H. (2004). The effects of acceptance versus suppression of emotion on subjective and psychophysiological response to carbon dioxide challenge in patients with panic disorder. Behavior Therapy, 35, 747–766.
- Montano, A., Annicchiarico, F., Misuraca, S. (2015). *Ossessioni e compulsioni nei bambini. Programma di intervento cognitivo comportamentale*. Trento: Erickson
- Polk, K. L., Schoendorff, B., Webster, M., Olaz, F. O. (2016). The essential guide to the ACT Matrix. A step-by-step approach to using ACT Matrix model in clinical practice. Context Press
- Woods, D. W. & Kanter, J. W. (2016). Disturbi psicologici e terapia cognitivo comportamentale: Modelli e interventi clinici di terza generazione. Milano: Franco Angeli.
   Ristallo, A., Schweiger M, Oppo, A, Pergolizzi F., Presti, G., Moderato M., (2016) Misurare la
- Mindfulness in età evolutiva: proprietà psicometriche e struttura fattoriale della versione italiana della I-CAMM. Psicoterapia Cognitiva e Comportamentale 22(3).
  Schweiger M., Ristallo A, Oppo, A, Pergolizzi F., Presti, G., Moderato M., (2017). Ragazzi in lotta
- Schweiger M., Ristallo A, Oppo, A, Pergolizzi F., Presti, G., Moderato M., (2017). Ragazzi in lotta con e pensieri: la validazione della versione italiana dell'Avoidance and Fusion Questionnaire for Youth (I-AFQ-Y). Psicoterapia Cognitiva e Comportamentale 23 (2)

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