

# Acceptance and Commitment Therapy as a clinical performance anxiety treatment and enhancement program for musicians

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# Disclosure (no support):

David Juncos, PsyD

- I have not received and will not receive any commercial support related to this presentation or the work presented in this presentation.
- All identifying client information contained herein was permitted to be shared by the clients.

# Introductions

- I investigate ACT as a clinical treatment for music performance anxiety (MPA) & performance enhancement for musicians
- Conducted 2 single-case designs and a pilot study ( $N = 7$ )
- 3 publications
  - Juncos, D.G., & de Paiva e Pona, E. (2018). Acceptance and commitment therapy as a clinical anxiety treatment and performance enhancement program for musicians: Towards an evidence-based practice model in performance psychology. *Music & Science* 1, 1-17. <https://doi.org/10.1177/2059204317748807>
  - Juncos, D.G., Heinrichs, G.A., Towle, P., Duffy, K., Grand, S., Smith, J., & Morgan, M.C. (2017). Acceptance and commitment therapy for the treatment of music performance anxiety: A pilot study with student vocalists. *Frontiers in Psychology*, 8. <https://doi.org/10.3389/fpsyg.2017.00986>
  - Juncos, D. G., & Markman, E. J. (2015). Acceptance and Commitment Therapy for the treatment of music performance anxiety: A single subject design with a university student. *Psychology of Music*, <http://dx.doi.org/0305735615596236>

# Case of “Mary”

- Pt = “Mary,” undergraduate violinist, 19-yr-old female
- Music Ed major, hx of untreated MPA, high trait anxiety/perfectionism
- MPA sx
  - Cognitive = 2-3 days prior to performances, and during performances, she would worry about making a mistake & being negatively evaluated by her professors
  - Physiological = 1-2 days prior: sleep & appetite loss. During performances: palpitations, tachycardia, cold & shaky hands, shortness of breath, difficulty concentrating, occasional nausea.

# Mary

- MPA sx (cont'd)
  - Behavioral = avoided solos in her orchestra, avoided optional performances, avoided performing more challenging pieces. She would compensate by playing very technically well, but without much emotion and was not fully present during her performances.
  - Distress/Impairment = she had great distress over having MPA, it also interfered with her artistic growth
- Performance Values = She valued being an effective music teacher & using good communication skills to “explain and demonstrate” proper technique to students



# Method

## ■ Method

- 10-session ACT treatment over 2 months
- Used Eifert & Forsyth's (2005) *ACT for Anxiety Disorders* manual
- Orientation to ACT model
- Identification of experientially avoidant behaviors
- Facilitation of Hexaflex processes
- In-session exposures (FEEL exercises)
- In-session performances to practice valued behaviors, in front of small audience (3-8 people)
- Meditations
- Homework
- Completion of self-report measures
- Video-recorded performances at pre/post therapy

# The “Teaching Technique”

- Mary’s worry interfered with attention during performances!
- “Teaching technique” = combination of Hexaflex processes to be used as actionable behavior during her performances to help self-regulate attention
- She was instructed to focus on “explaining” and “demonstrating” key techniques of each song during her performances, silently, to herself, as if she were her own student. This would frame her performances as expressions of her value of teaching music, instead of dreaded experiences.
- *Simultaneously*, she would mindfully accept and defuse from anxiety-related thoughts & sensations while they occurred. Then, she’d bring herself back to the Teaching Technique.

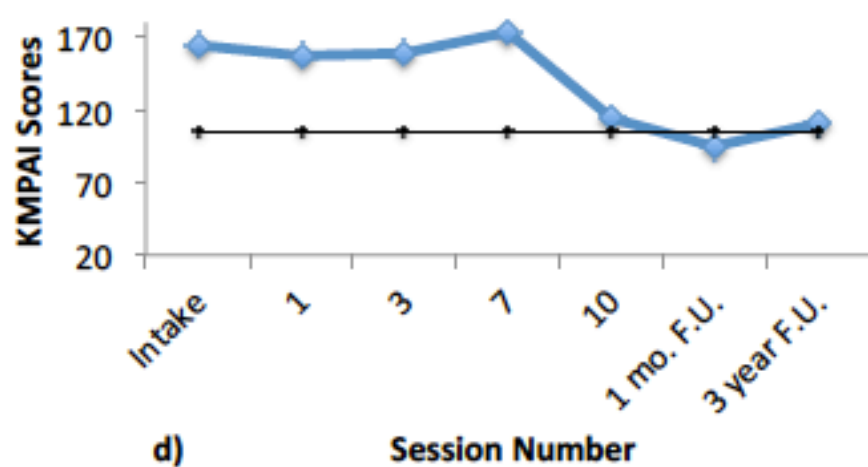
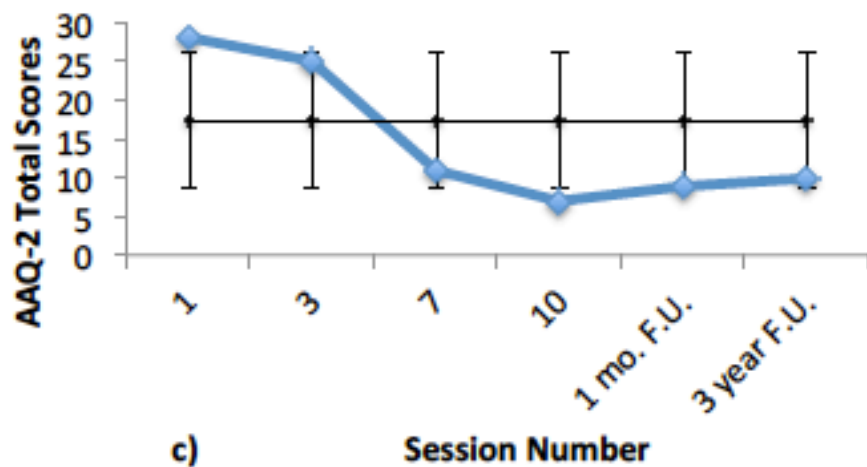
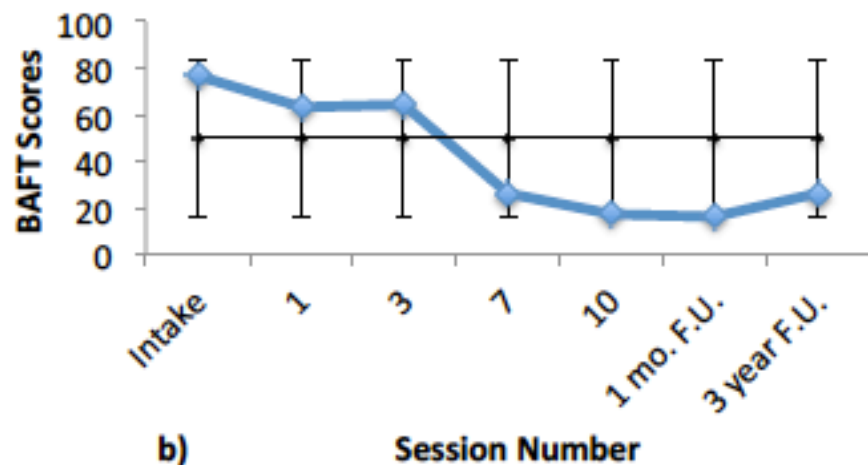
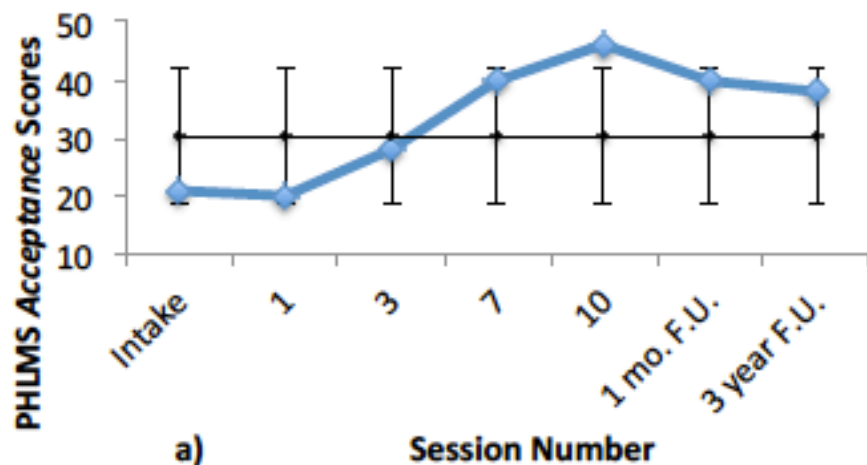
# The “Teaching Technique”



# Results

- She was significantly less fused with her MPA related thoughts at post-treatment & 1-month follow-up (and at a 3-year follow-up)
- Significantly more accepting of her MPA ( " " )
- Taking significantly more action towards values ( " " )
- Paradoxically, her MPA was significantly reduced ( " " )
- Engaging more in valued behaviors during her performances (e.g., by using the "Teaching Technique")

# Results



# Results

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- Her performance quality also improved from pre- to post-treatment, according to a professional juror

(show videos)

# Pre-Treatment



# Pre-Treatment





# Post-Treatment



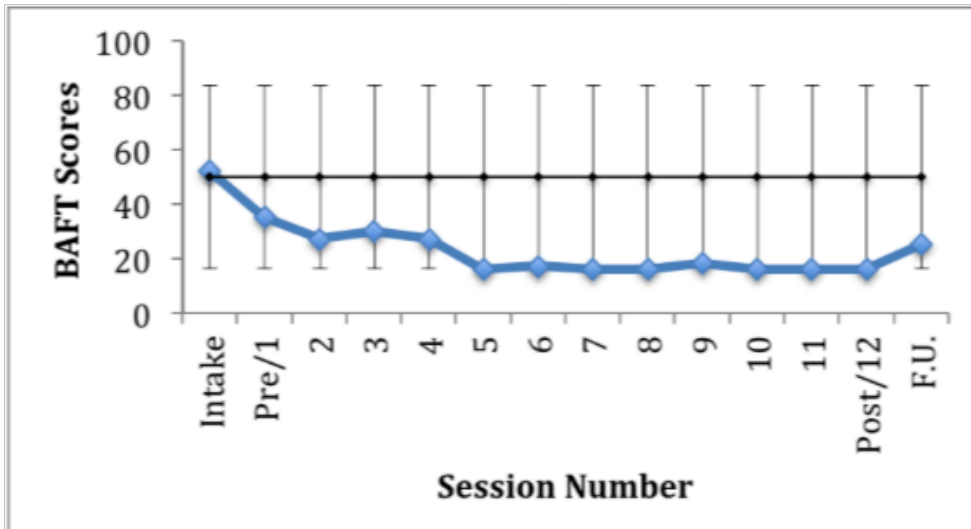
# Post-Treatment



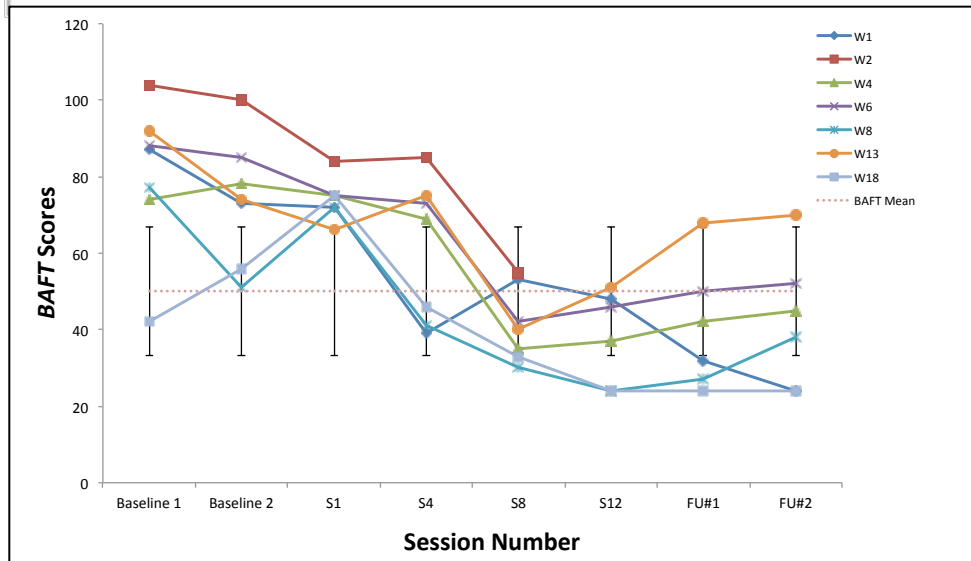
# Proposed Mechanisms of Change

- How do the results of this case, and those of the other 2 studies relate to other ACT treatment studies' results?
- The processes of acceptance of unwanted experiences and defusion from them are two proposed mechanisms by which ACT treatments increase psychological flexibility (Ciarrochi et al., 2010).

# Results of Other Studies - Defusion



2014 Case - Pro-Drummer rec'd  
12 ACT sessions



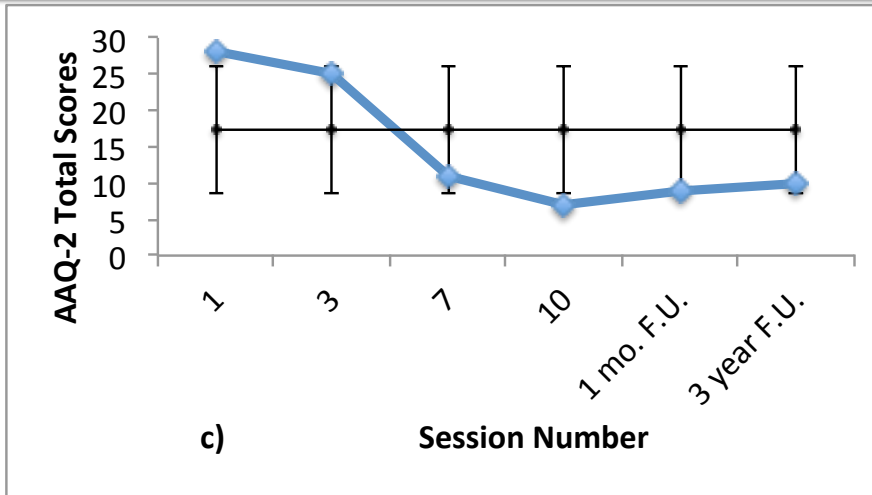
2017 Pilot Study – 7 vocal students  
rec'd 12 ACT sessions

$$t(11) = 4.74$$

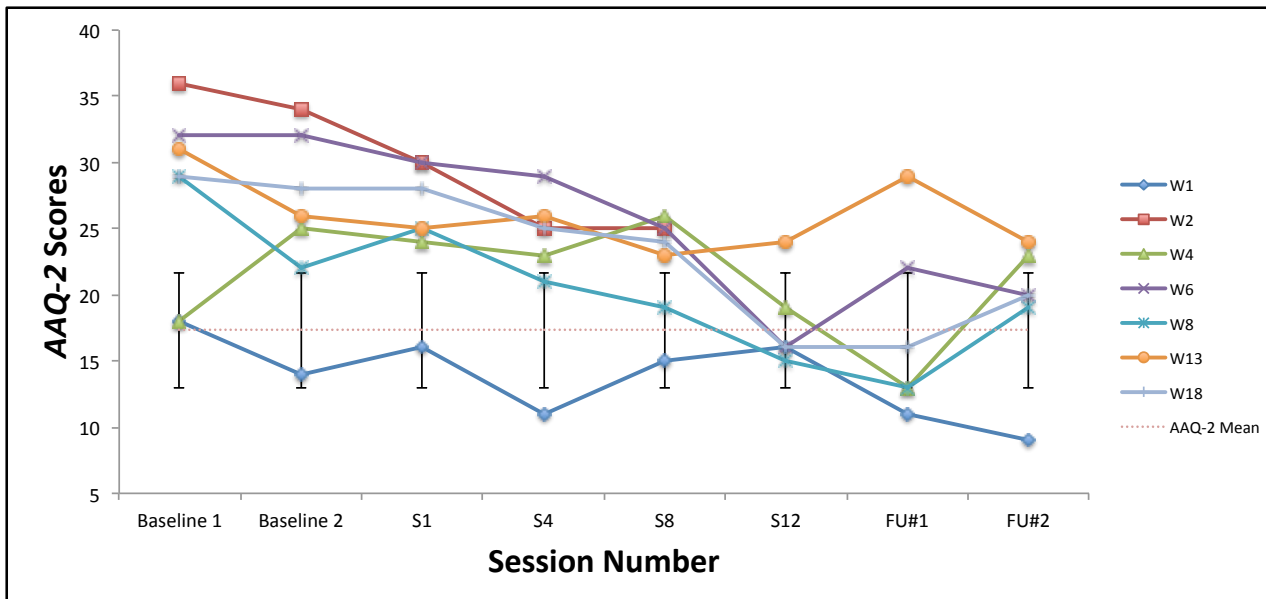
$$p < .05$$

$$\text{Hedges' } g = 2.54$$

# Results of Other Studies – Acceptance & Action



Mary's Case



2017 Pilot Study  
 $t(11) = 3.34$   
 $p < .05$   
*Hedges' g* = 1.81

# Conclusions & Future Directions

- The results of these 3 studies show ACT is a promising intervention for treating MPA and enhancing music performance quality.
- Next - ACT should be compared to CBT as an MPA treatment, because CBT = best practice.
- ACT for Musicians self-help book, due out in 2019!

**END**

