Wise Choices
Acceptance and Commitment Therapy for people with 'hard life syndrome'
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Functional contextual understanding of borderline personality disorder

‘Hard life syndrome’ symptoms

People with ‘hard life syndrome’ can be very different from each other

We need:
• An understanding of this unique person
• in his/her current and historical context

Functional contextual approach:
• emphasises function over form of symptoms
• does not see diagnostic labelling as useful
We are all less flexible when we are afraid

People with ‘hard life syndrome’ ‘not broken’ .... but and

In the aftermath of trauma ...
weird stuff can happen

A graded approach to dissociation
For example, addressing dissociation triggered by anger:
Practicing mindfulness and acceptance in neutral and positive situations first. Then practicing in safe ways staying present with low levels of the emotion or trigger situation.

“I said nothing while I was inside the store even though the woman was rude to me. I walked out, I held my friend’s hand and said ‘I felt irritated and that’s OK isn’t it?’

Aftermath of (early) trauma
Brain ‘wired for danger’
Less learning via empathic attunement??

- traumatic memory
- flashbacks
- lack of chronology
- separate sensory ‘tracks’
- intense emotions & urges
- fight/flight, freeze/flop
- over-alert for danger
- under-alert for positive, neutral

- dissociation – brief/ longer, deeper/shallower, more/less elaborated (‘personalities’) more/less involuntary
- learned helplessness
- abuser/abused relationships
  - ‘it feels so right’
  - ‘identification with aggressor’, ‘flipping’

Re-traumatisation
Pacing in the treatment of trauma

Map and manage triggers

ACT view of ‘Hard life syndrome’ (1)
- difficult feelings [and difficult thoughts]
  - intense and fluctuating negative emotions
  - strong action impulses (sometimes including fears triggered by abandonment related stimuli)
  - and/or limited awareness of body sensations/emotions
  - intense negative thoughts, negative ‘self-as-content’
- problematic behaviour, problematic relationships
  - impulsive acts, unwise choices
  - angry outbursts
  - acting in potentially self-damaging ways on impulse
  - deliberate self-harm
  - clingy or changeable ways of relating to others

ACT view of ‘Hard life syndrome’ (2)
- Limited acceptance, mindfulness, present moment
  - ‘emptiness’ (limited present moment awareness?)
  - ‘fragile self’ (limited present moment awareness?)
  - ‘unstable self-image’ ([alternating] self-as-content?)
  - rigidity - including difficulty with perspective shifting, ‘black and white’ thinking (limited ‘mentalization’?)
  - problems with empathy (avoidance of ‘mirrored’ affect?)
  - dissociation, flashbacks, and other transient trauma-related symptoms
  - psychosis-like trauma-related symptoms
Wise Choices ACT for people with ‘hard life syndrome’

- Individual or group
- Adults or adolescents
- Mental health, forensic, D&A

A graded treatment approach

- Dismantling the ‘Tin Can Monster’
- A changed relationship with trauma
- New positive experiences, memories
- Small steps towards a safe, full rich & meaningful life, better relationships
- Mindfulness skills, acceptance skills
- Emotion awareness, values awareness
- Noticing choice points, wiser choices

Wise Choices groups

1. Introduction
2. My life – how do I go off track and where do I want to go?
3. Struggling with the monster
4. No need to be bossed around by difficult thoughts
5. Being present with feelings of pleasure
6-7. Emotions, sensations and urges
8. A small step in a valued direction
9. Choice points and obstacles to taking action on values
10. Review and celebration

Session 1: Accept Choose Take action

Introduction to ACT and mindfulness
Acceptance & Commitment Therapy

Accept your feelings & thoughts and be present
Choose action that is in line with your values
Take action

Remember, it’s what you do that counts!

A graded approach to mindfulness and present moment awareness

Brief mindfulness emphasising one aspect of mindfulness each session

Mindfulness and present moment awareness

Vital prerequisites for trauma work:
- ability to come into the present moment
- ability to focus attention on one thing at a time
- ability to gently return wandering attention
- ability to ‘just notice’ without judging or getting ‘hooked’

Mindfulness (‘self’)

Fully present. Aware of experience rather than ‘empty’, dissociated, acting impulsively

inner experience

awareness
● Start in the session (not at home)
● Start with conversational style - ‘just noticing’ (not a formal exercise)
● Start with low anxiety focus:
  ● External focus may be easier than internal (eg sound, an object)
  ● Body awareness, breath awareness may be difficult
  ● ‘Hard body’ may be easier than ‘soft body’
● Many will not do formal practice

Be like water ...

When a big stone is thrown into water there are big ripples.
When a small stone is thrown into water there are small ripples.
Between stones, the water returns to a state of stillness.
It doesn’t tense up waiting for the next stone
Session 2: My life – how do I go off track and where do I want to go?

Introduction to the avoidance loop and values

Values are like lighthouses in the distance ... 

... they guide us through emotional storms.

What are values?

Values are our heart’s deepest desires for the way we want to interact with and relate to the world, other people and ourselves. They can guide us and motivate us as we move through life. Values get into action make our hearts glad.

Are values and goals the same?

Goals are not the same as goals. Values are directions we keep moving in, whereas goals are the small steps we want to achieve along the way. Values can be achieved or ‘crossed off’, whereas values are directions we travel in for our whole lives and can live in small ways every day.

Are values like shoulds?

As we grow up, we collect a lot of ‘shoulds’ from others that can feel like a pressure or a burden. Acting on these doesn’t make our hearts glad in the same way acting on our own values does. ‘Shoulds’ are about what others think of us. Ask yourself, ‘Would I feel good about doing this even if no-one else ever knew?’
Eliciting values via negative examples
Can also use anger (‘fighting spirit’) sadness/loss (‘flip side of love/value’) to provide clues.

Values awareness

- Usually ‘directions’ work better than ‘destinations’
- Sometimes ‘goals’ also work – even unrealistic goals: “I want to be an astronaut”
- Go with the energy – anything large or small that gets the person moving in a helpful direction
- Use noticing feelings and choices to learn more

Address shame about not acting on values

- How are you already living this value?
- Ask about living this value in small ways every day (small steps in a valued direction).
- ‘Just notice’ difficult thoughts and ‘make space for’ difficult feelings about values.

Session 3: Struggling with the monster

The unworkability of control strategies, introduction to acceptance
Wise Choices

Change the things you can change
Accept the things you can't change
Practise being fully present so you gradually learn to know the difference

Caught in a tug-of-war with a monster?

Just drop the rope!

Baby avoidance tiger ...

If you keep feeding the baby avoidance tiger bits and pieces of your life to keep him quiet ... he will just get bigger and hungrier!

Session 4: No need to be bossed around by difficult thoughts
Mindfulness of thoughts, defusion
Mindfulness of thoughts (defusion) - a graded approach

- Start in the session (not at home)
- Start in a natural conversational style:
  - “That sounds like a very difficult thought”
  - “What thoughts did you have?”
  - “Did you notice a thought just then?”
  - “Sounds like there’s some judging and blaming going on in your head at the moment.”
- ‘Leaves on a stream’ is a good introduction to ‘just noticing’ – and ‘self-as-context’

“I notice I’m having a thought that ...”

Looking at your glasses.
Looking through your glasses.

‘Hooked’ and ‘unhooked’

Hooked  Awareness of thoughts (unhooking)  Totally unhooked

Let bad news radio be on in the background without trying to ignore it, or fight it. And get on with your life.
Noticing judgements...
“How are your judgements working for you?”

Exercise: Good cup? Bad cup?

Who is more powerful – you or your thoughts?

Think:
“I can’t raise my arm, I can’t raise my arm” as hard as you can [pause] and now do this [demonstrate raising arm].

Struggling against memories doesn’t work

Exercise:
Forget how you came here

Will giving this thought my full attention help me live a full, rich and meaningful life?

Are true thoughts always useful?
And get on with your life.

After paying attention to the thought “I’m so fat” do you:
(a) Go to the gym?
(b) Eat a block of chocolate?
Session 5: Being present
Mindfulness and acceptance of feelings of pleasure

Mindfulness of pleasurable tastes, smells, sights, sounds, sensations
May require practice.
In a hazardous context we develop the habit of maximising attention to danger and minimising attention to neutral and positive stimuli.

Sessions 6 & 7: Emotions, sensations and urges

Emotion awareness and acceptance, take action based on values, not emotions the option to do nothing

Emotions pass like a wave ...
... unless I get hooked by difficult thoughts
... or act on urges against my values
Hold your breath for as long as you can.
Notice the thoughts, emotions, sensations and urges you have.
Take particular note of the ones occurring right before you choose to breathe.

Committed action:
Choose a value you would like to act on more and take a small step.

eg. Express gratitude to a friend
- Look
- Smile
- Say or do something positive, however small, as long as it’s genuine.
- If the other person knocks your gesture back, there’s no need to take it personally.
Session 9: Choice points and obstacles

Difficult thoughts and feelings that arise when taking action on values and making wise choices

Take action guided by values not feelings

Confidence = self-fidelity
Hovering at the choice point

1. Hover at the choice point in imagination and notice your thoughts and feelings.
2. Imagine making the choice that's in line with your values and notice your thoughts and feelings.

Adapted from: Batten. (2007). ACT Conference Wollongong

The research design

- 12 weeks - Series 1 (n=20, 14 pre & post)
- 12 weeks waiting list (n=20, 14 pre & post)
- 12 week follow up
- Remaining group members combine for additional 30 sessions
- Series 2 Relationships
- Series 3 Connect/Contribute
- Series 4 Various

Change over 12 sessions

Mixed model analyses of pre and post scores
ACT + TAU (n=21) compared with TAU (n=20)

- Less BPD symptoms (BEST composite) (p=.028)*
- Less anxious (DASS) (p=.025)*
- Less hopeless (Beck Hopelessness Scale) (p=.006) **
- More psychological flexibility (AAQ2) (p=.010)**
- More able to handle difficult emotions (DERS) (p=.008)**
- More mindfulness skills (FFMQ) (p=.028) *
- Less fear of emotion (ACS) (p=.002) **
Mediation analysis

Improved BPD symptoms (Borderline Evaluation of Severity over Time)
- mediated by emotion skills (Disorders of Emotional Regulation Scale)
  particularly reduced ‘impulse dyscontrol’

Reduced hopelessness (Beck Hopelessness Scale)
- mediated by emotion skills (Disorders of Emotional Regulation Scale)
  particularly increased ‘confidence in emotion strategies’

Series 3 and 4 and beyond
Trauma work

The protective function of
negative self-as-content
and harshness towards self and others

Leaves on a stream

Imagine yourself on the banks of a fast flowing stream. As each thought feeling or sensation comes, put it on a leaf and let it go.

Self-as-context work is particularly important for people who feel they have been irreparably damaged by trauma.

No matter what the weather or how often it changes ... the sky remains the same ... unchanged, unharmed.
Negative self-as-content - a protective function

Better to be ‘a devil’ in heaven...

... than ‘an angel’ in hell

Making friends with my monster

Find the feeling. Where is it in your body?
If the sensation had a colour..., a shape ....
Put it outside you. Look into it’s eyes.
What does it want? What does it need?
Give it what it needs.
Bring it back inside”

Compassion for my younger self

Stay with a difficult feeling. Go back through the filing cabinet of memory to find a time when you were young and you felt like this. What does your younger self want? Need?
How do you feel in relation to your younger self?
Give your younger self what s/he needs.
[May need help eg. Therapist comes back in time, foster parents ...

Taking apart the Tin Can Monster

Thoughts Use mindfulness techniques to just notice each thought, one at a time.
“Leaves on a stream”, “I’m noticing that I’m having a thought that…” “Bad inner critic” “Sing the thought” “Write the thought”, “Thank you mind”

Feelings, sensations Use body awareness techniques to move towards acceptance of each sensation.
“If it had a colour, what colour would it be… Shape… Size… Texture… “Breathing with”, “Breathing into” “Making space for”, and “Working the edge”

Images Use image defusion techniques to move towards acceptance of each image.
These techniques include: “Changing the image – larger, smaller, colour black & white” “Changing the movie style– Simpsons, Bollywood, melodrama”, “Walking around the TV”
The most extreme behaviour of the borderline client is iatrogenic.

Dawson and Macmillan 1993

Problem behaviours/ avoidance loops/ coping strategies

Self-harm – look at the function and the context

“You say to me that self-harm is the problem... I say to you that self-harm is the solution.”

Mary Graham (1999) Spectrum consumer consultant

“...in working with chronically suicidal individuals, there will be times when reasonably high short term risks must be taken to produce long term benefits.”

Linehan (1993)
There are no low risk options
Balance short and long term risk

- Considering only short-term risk can dramatically increase the risk of eventual death or disability.
- Compulsion and lengthy hospitalisations often have profound negative effects.

Acute versus chronic suicidality

Acute = short-term
Chronic = long-term

Acute rare in BPD
Chronic common in BPD

Acute on chronic suicidality

Chronic pattern
Acute episode - temporary change in chronic pattern

Not one size fits all.
A functional analysis and treatment plan for each pattern of self-harm – these will be different for different people.
Short term and long term risk must be repeatedly reassessed as the context changes.
Doing what works
‘Just noticing’ and making space for our own thoughts feelings and action urges

Don’t just do something – sit there!
Accept what you can’t change

Successful treatment
• Focus on values based action at least as much as problem behaviour
• Assist with noticing choice points
• Gradually build capacity for mindfulness and acceptance of difficult thoughts and feelings
• Do not require self-harm for access to services. Give attention to distress. Do not accept self-harm as interpersonal ‘currency’.

Sitting with fear of the Coroners Court
‘Duty of care’ - case law

✔ not to do harm (safety)
✔ to do good (beneficence)
✘ to predict all suicides
✘ to prevent death in the short term at all costs

Good practice and effective risk management are the same.