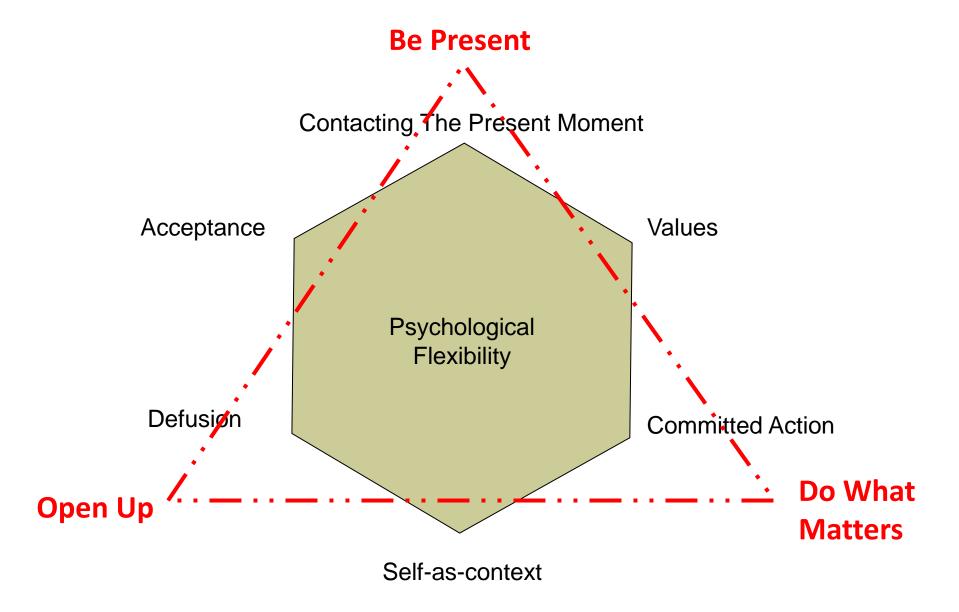
Live Demonstrations With Difficult Cases - Russ Harris - World Con 2017

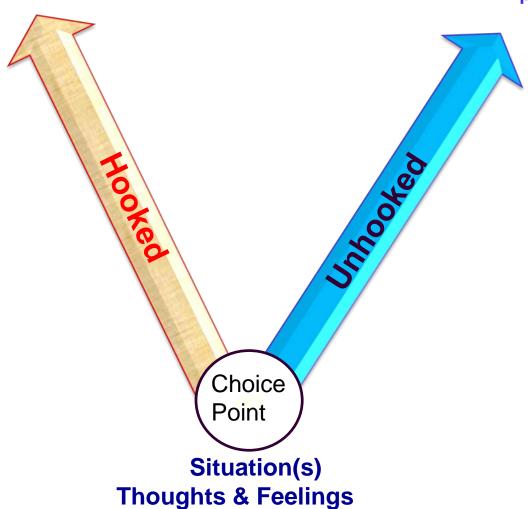


AWAY

What I do that's ineffective, behaving unlike the person I want to be

TOWARDS

What I do (or want to do) that's effective, behaving like the person I want to be

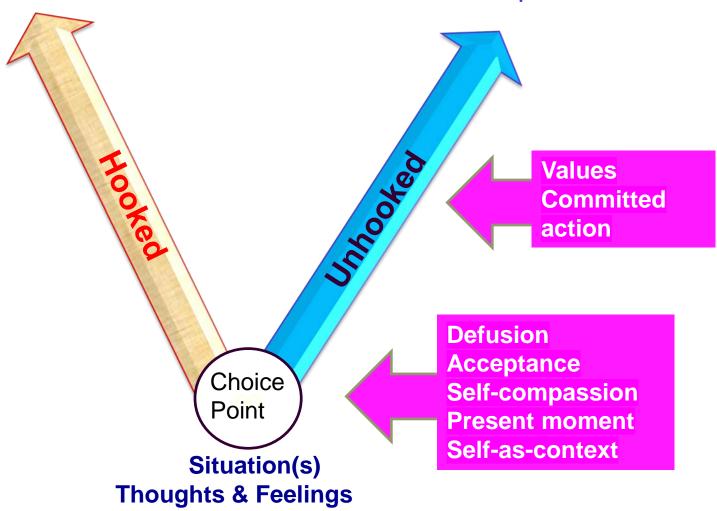


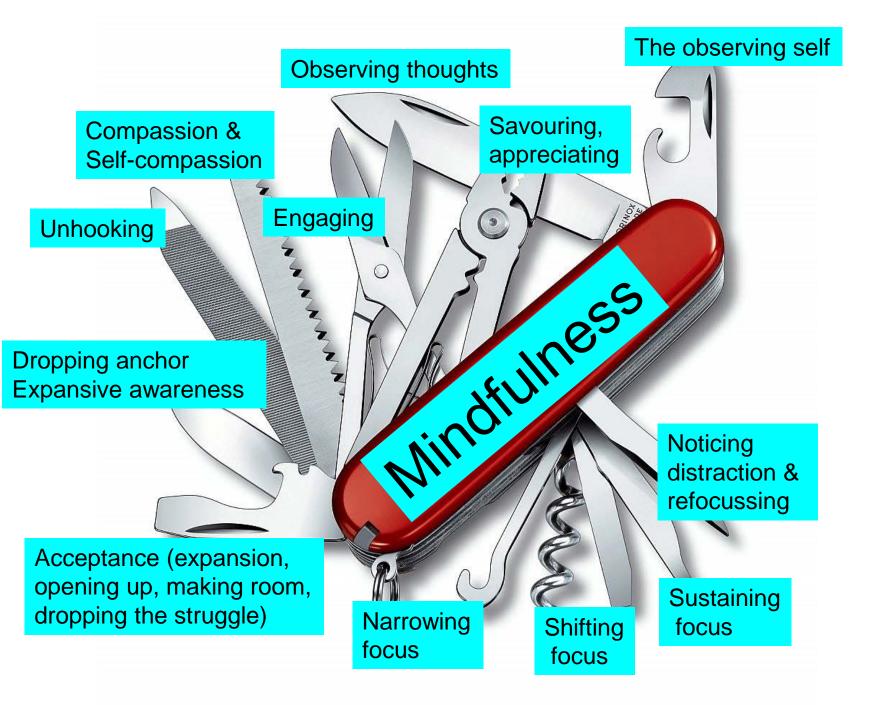
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"Difficult" Client Behaviour

- High Fusion, High Experiential Avoidance
- Remoteness from values
- Self-defeating
- Often distressing
- Pervasive & persistent
- Reframe: it's not "Therapy-Interfering Behaviour" it's

Golden Material

Look At Yourself First

- What unhelpful thoughts & feelings do you get hooked by?
- What away moves do you make?

How do you see your client?



Common Therapist Problems

- Talking about ACT, instead of doing it
- Inconsistencies & mixed messages
- Being Mr Fix-it
- Being Mrs Good-listener
- Being Mr Nice Guy
- Convincing/debating
- Dr Phil impersonations
- Intellectualising: 'Insight'
- Lack of behavioural goals

S.L.O.W.

- a) Slow down
- b) Lean in
- c) Open up
- d) Warmly illuminate

Resistance To Change: 7 Factors

- Treatment mismatch
- Discordant Therapeutic Relationship
- Secondary Gains

FEAR:

- Fusion
- Excessive goals
- Avoidance of discomfort
- Remoteness from values

Resistance To Change: 7 Factors

- Informed consent
- Embody ACT in session
- Workability: Payoffs Vs Costs

DARE

- Defusion
- Acceptance of discomfort
- Realistic goals
- Embracing Values

<u>INFORMED CONSENT – Modify & Adapt!!!</u>

- ACT is a very active form of therapy/coaching not just talking about problems.
- Learning skills to handle difficult thoughts and feelings more effectively, so they have less impact and influence over you
- Clarifying your 'values': what kind of person you want to be, how you want to treat yourself and others, what you want to stand for in life, what gives you a sense of meaning or purpose
- Taking action: to solve problems, and do things that make life better
- I want you to leave here at the end of each session with a plan of action – something you can take home and do between sessions that will make a positive difference

Establishing behavioural goals:

Emotional Goals => What I want to *feel*Behavioural goals => What I want to *do*

Emotional goals are problematic:

```
'reduce depression'
'reduce anxiety'
'increase self-worth or build self-esteem'
'recover from DSM disorder X'
'get over what happened'
'get my old self back'
'feel happy', 'feel good', 'feel normal'
'have more confidence/ regain my confidence/ stop
doubting myself'
'feel calmer'
'be normal', 'be like everyone else'
'stop feeling like shit'
```

To turn emotional goals into behavioral goals....

If I could wave a magic wand so all these difficult thoughts and feelings are no longer an issue – they're like water off a duck's back.....

What would you stop or start doing, do more or less of? How would you treat yourself, your body, other people, your work, the world, differently?

What goals would you pursue?

What activities would you start or resume?

What people, places, events, activities, challenges, would you approach, start, resume, contact, engage in - rather than avoid or withdraw or disengage?

How would you interact differently with the people you care about?

Establishing Behavioural Goals

- What will you be doing differently, that will show therapy has helped you?
- What will you start/stop, do more/less?
- How will you treat yourself, others, the world differently?
- What areas of life do you want to work on improving?
- What relationships would you like to improve?

"I wouldn't do anything differently, I'd just feel better"

- What difficult thoughts and feelings are you currently experiencing?
- So one of our main aims here is to learn new skills to handle those difficult thoughts and feelings more effectively, so they have less impact and influence over you.
- And another aim is to learn new skills that can help you appreciate and get more out of the things you are already doing, so you can get more satisfaction, pleasure and fulfilment from them

Setting Up #1 – Press Pause

Can I have permission to press pause from time to time - so if I see you doing something that looks like it that looks like it might be really helpful or useful, in terms of dealing with your problems and improving your life, I can ask you to just slow down, notice what you're thinking and feeling and saying and doing - so you can reflect on it, and we can look at how to do more of it?

And can I also press pause if I see you doing something that looks like it might be contributing to your problems or making life harder? So we can address it and see if there's something more helpful you can do instead??

And please feel free to do the same to me.

Setting Up #2 – We Are A Team

The idea is that you and I are a team; that we are working together, with the same aim, to help you (repeat the agreed goals of therapy)

If no specific goals at this point, then:

... to help you build a better life and handle these difficult thoughts and feelings more effectively

Setting Up #3 – Trying New Things

Part of this approach includes learning new skills to handle thoughts and feelings more effectively. Is it okay if at times ask you to try some of these things in session?

At times I might ask you to do an exercise that seems a bit awkward or uncomfortable, and you are always free to say no. I'm only going to suggest these things if I think they'll be helpful to you, but you certainly don't have to do them.

.

Setting Up Sessions #4 – Setting An Agenda

- Are you okay if we take a few minutes at the start of each session to establish a focus or an agenda for the session?
- Can we pick one important problem or area of life that we can make the main focus of the session, in order to improve it?
- The reason for this, is it makes our work much more efficient. If we are trying to deal with several different problems at once, it's very hard to deal effectively with any of them

Setting Up Sessions #4 – Setting An Agenda – Tools

- Once client agrees, set an agenda.
- Can use the 'bull's eye' or 'choice point' or other tools
- Or simply ask the client to nominate a single problem, goal, relationship, or aspect of life.
- Agree to work on a specific unhooking skill or other relevant skill, and/or to work on an action plan to deal with a specific issue

Prioritising Issues For The Agenda

- Suicidality
- 2. Barriers to in-session therapy
- 3. Barriers to between-session change
- 4. Main topic for today
- 5. Additional topics if time

Setting Up Sessions #5 – Team Building

Optional: Bring it in if:

- a) the session becomes about relationship issues;
- b) there is interpersonal conflict or tension between therapist and client
- c) problematic client behaviour in session makes it hard to work together

Setting Up #5 – Team Building

Is it okay if I press pause at times and get us to look at what's happening here in the room, in the way that you and I are interacting with each other?

Especially, to highlight things that seem helpful in terms of us building a strong team? And also – and of course, I hope this won't happen, just want to be sure that if it does we're prepared for it - can we look at anything that seems to be getting in the way of us working together?

And of course, you can do the same.

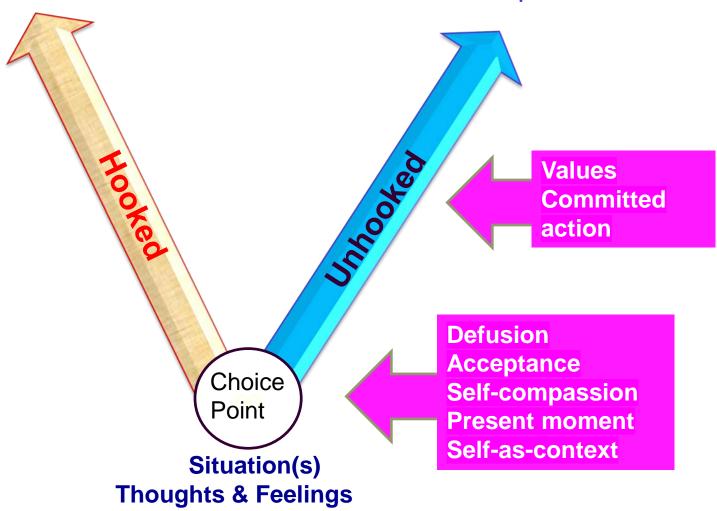
Why Do Therapists So Often Fail To Address In-Session Problematic Behaviour?

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Contact With The Present Moment

Can I *press pause*, please. I'm willing to be wrong but I think something is going on here that might be a bit problematic.

Acceptance

I'm feeling pretty anxious about it. My heart's racing.

Defusion

My mind's telling me you'll be upset or angry, or think I'm rude, or make a complaint about me, or this will damage our relationship.

Psychological Flexibility

Self-as-context

Values

But my aim in here is to help people live better lives – so if I ignore this, I'm not being true to myself and I'm doing you a disservice.

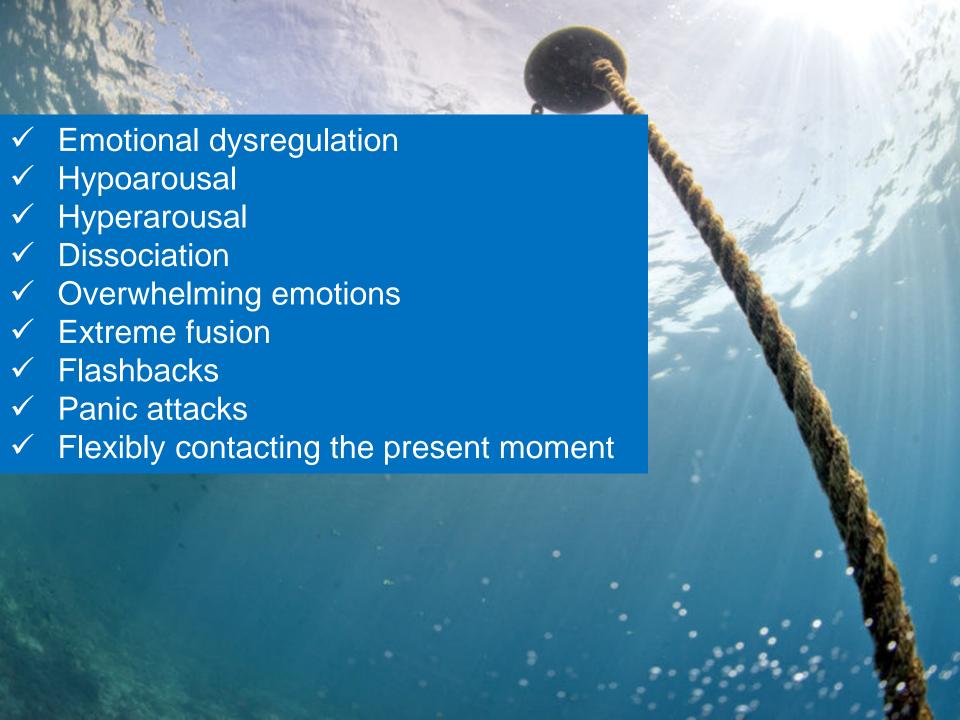
Committed Action

So even though I'm feeling really nervous, I'm going to tell you what I've noticed.

Non-judgmentally describe the specific behaviour. Then compassionately and respectfully validate the client's reaction and explore alternative behavior

Top-Down ⇔ Bottom-Up

- In Flop/Drop or Fight/Flight mode ...
- Bottom-up => more 'body-based'
- Movement, posture, breath, touch
- E.g. Dropping anchor, compassionate self-touch, mindful walking or stretching or drinking
- Top-down => more 'cognitive' or 'cerebral' approach =>
 e.g. values, defusion, psycho-education, metaphors, etc.
- Ineffective for states of high emotional dysregulation, dissociation, extreme fusion



EXPANSIVE AWARENESS EXERCISE (Dropping anchor) - MODIFY!!!!!

- <u>There's something very painful showing up for you</u> and I want to help you handle it
- Push your feet hard into the floor
- Straighten your back, sit forward in your chair
- Push your fingertips together, shrug your shoulders
- Can you notice what's happening in your mind?
- Can you notice what's happening in your body?
- So notice, there are dificult thoughts and feelings showing up, and also notice your body in the chair hands, feet, back
- Also look around notice 5 things you can see
- <u>And</u> notice 3 or 4 things you can hear
- And also notice you and I, working together
- So notice: there are difficult thoughts and feelings here
- <u>And</u> around these thoughts and feelings, there's your body, in the chair
- <u>And</u> around your body, there's a room
- And there's you and I working together as a team

Dropping anchor - notes

- NB: If therapist uses dropping anchor to try to stop the client crying/ to distract her/ to reduce her anxiety etc, this is a misuse.
- The aim is to help the client to:
- Be present
- Regain control of his actions
- Engage in the session
- Refocus on the task at hand

$Dropping\ anchor-notes-cont.$

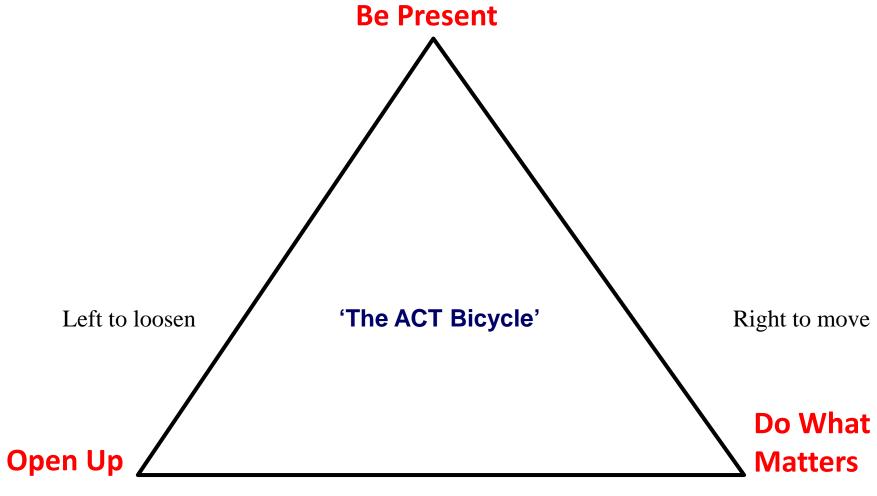
- Modify script use anything present (other than the storm itself) – e.g. glass of water, stretching arms, breathing, sound of air con
- Goes for as long as needed
- Repeat as often as needed
- If client is ready and able to talk, identify the thoughts and feelings first.
- But if client is too overwhelmed to speak, just go into the exercise.
- Debrief it afterwards

Debrief

- Do you notice any difference? Are you less caught up in the thoughts and feelings? Less swept away or pushed around by them?
- Is it easier for you to engage with me, to be present, to focus?
- Do you have more control over your actions? (Move your arms and legs – check it out.)
- How could this be helpful outside the room?
- Can we do more of this in our sessions?
- Would you be willing to practice this?

Practice

- No need to wait for a 'storm' to blow up
- If it's not anchored, a boat in harbor will soon drift out to sea, even if the weather is good
- We 'drift off' all day
- Can practice this any time, any place, any activity, with any thoughts and feelings
- And MODIFY!!!! don't need to use storm/anchor metaphor!!



Center to balance

Staying On Track 1

- Permission to start session 'differently' & rationale for doing so (e.g. not making progress)
- 2. Confirm you are a team, working together
- 3. Confirm you are using ACT informed consent
- Agree to a specific domain/area to work on
- 5. Your mind will try hard to 'get us off track'. Lets see if we can notice all the tactics it uses.

Staying On Track 2

- Notice, name and normalise each 'tactic' Write them down on a piece of paper
- 2. Ask the client to tick a 'tactic' whenever it recurs
- 3. If client say 'This won't work because X,Y,Z' then ask, 'Shall we give up, because your mind says XYZ or shall we let your mind say that and carry on?'

Staying On Track 3

- 1. Return to the agenda repeatedly
- Repeatedly draw attention to mind's tactics; unhook and return
- 3. Reinforce any workable behaviour you see eg point out and comment favourably on functionally positive non-verbal behaviour (e.g. eye contact, body posture), acceptance, defusion, engagement, willingness, vulnerability, commitment, connection with values etc.

- 1. Ask client to assess their own behaviour in session in terms of workability: 'towards' or 'away' from values (e.g. the bull's eye)
- 2. Ask client to assess how their behaviour affects the therapeutic/coaching relationship
- Permission to interrupt, and rationale for doing so
- Rationale for learning to focus, unhook, and refocus

- Keep noticing and naming habitual cognitive patterns
- 2. Psycho-education about automaticity versus choice: 'I want you to have more choice about what you do at the moment you seem to be totally controlled by your thoughts and feelings'
- 3. Have client take ownership of agenda

- 1. Is it okay if I ask you to try different things here, different to what you normally do?
- 2. Is it okay to continue, even though you're feeling uncomfortable/ anxious if this could help you with the problem in question?
- 3. Seems 'Weird'? Good! That means we are doing something different and new.
- 4. Do you see how what we are doing here is relevant to the problem in question? How can this help you? When, where, what, who?

- 1. What you've been doing works in the short term right? You get some real short term payoffs, such asX,Y,Z. But in the long term, it's not giving you the life you want.
- 2. So if you want things to be different, you need to do something different. So is it okay if I ask you to try out new patterns of behaviour, here in the room?
- 3. And of course, your mind will try to stop you. Can you notice how it does that? etc

- Reflect back client behaviour if and when necessary – e.g. through acting it out.
- When client behaviour is detrimental to the relationship, share it openly (compassionately and non-judgmentally)
- Use self-disclosure to develop empathy, perspective-taking skills, and ability to notice and respond to social cues

- 1. Thank you. It means a lot to me that you're willing to continue with this work, even though it's uncomfortable, and you're feeling ... (give examples: e.g. frustrated, anxious, irritated, the urge to go and have a cigarette) ... and your mind's saying (give examples: e.g. this is a croc of shit, this won't help)
- 2. In the service of (specify domain/values/goal if not sure then 'a better life) you are committing to do this work, even though lots of difficult thoughts and feelings are showing up

Crisis – Steps to Take

Mindful, values-guided problem-solving

- 1. Drop anchor
- 2. Defusion
- 3. Acceptance/self-compassion (if possible)
- 4. Values
- 5. Problem solving
- 6. Action plan
- 7. Anticipating obstacles

The Challenge Formula

- 4 approaches to any problem situation:
- 1. Leave
- 2. Stay & change what can be changed
- Stay & accept what can't be changed & live by your values
- 4. Stay & give up & do stuff that makes it worse

Mandated/Coerced Clients: 7 Steps

- 1. Normalise: e.g. "Most people feel upset or annoyed"
- 2. Validate & empathise
- See it from the client's perspective
- 4. Declare your values
- 5. I'm here for you, not them
- 6. Declare your powerlessness
- 7. Q: "What possible outcome from this would make it feel like a good use of your time?"

Go In Via The Back Door

A bit of gentle questioning - respectfully and compassionately

E.g. So you came here to stop your partner nagging/ to get your boss off your back/ to stop going to prison

... What's important about that? Why does that matter to you? Suppose you refused to come here: what would happen?

So obviously you don't want to be here, but your relationship/job/freedom really matters to you. Can we make this work about improving that aspect of your life?

Go Through The Motions

Agree with the client:

You don't want to be here, right? You're only here because XYZ has made you come.

So how about we do the bare minimum necessary to get XYZ off your back? Let's just go through the motions here; let's just pretend we're doing therapy.

If the client agrees, it's useful to then do something that doesn't feel like therapy.

For example, pull out a pack of values cards and do a card sort. Listen to some music mindfully. Watch some youtube videos.

Have A "Bitch Fest"

What pisses you off?

Validate and empathise

Slip in 'reversals': client says "X is a problem";

therapist slips in, "So you'd prefer Y?"

Compassionately Wait For The Cracks To Appear

Compassionately & respectfully make a 'holding space' where the client doesn't have to 'do anything.

The therapist empathises with the client's frustration, annoyance, ambivalence, resistance etc, validates for the client how difficult it is to be in this situation, and waits for the 'cracks to appear'.

Many clients, after a while, will 'let their guard down' – reveal their pain, or suffering or what they find hard.

The therapist can then compassionately follow this lead, and tease out more detail.

Dilemmas # 1: The Hard Facts

- 1. There is no simple answer. If one choice was clearly much better then you wouldn't have a dilemma!
- 2. So we probably won't solve it in today's session!
- No matter what choice you make, anxiety and doubt is certain.
- 4. There is actually no way *not* to choose.

Dilemmas #2: The Practicalities

- 1. Each morning: acknowledge today's choice.
- 2. Each morning: What do I want to stand for in the face of this? Live those values
- 3. Through the day: 'name the story', get present
- Spend 5-10 mins each day MINDFULLY focusing on pros and cons of each choice – using a pen & paper, or computer
- 5. Self-compassion; may go on for a long time!

