

# Examining the Effectiveness of Group Based Acceptance and Commitment Therapy for Adolescents in a Community Outpatient Mental Health Setting: An Open Trial

Tajinder Uppal Dhariwal, Sheri Turrell, Mary Bell & Marci Gordeyko

## BACKGROUND

- ACT, delivered in a group format, is shown to be effective for a transdiagnostic adult population within a community hospital setting (Pinto et al., 2015)
- There is limited research of ACT groups with adolescents (Halliburton & Cooper, 2015)
- Effectiveness of group based ACT for adolescents diagnosed with heterogeneous psychiatric disorders in community outpatient setting has not yet been examined

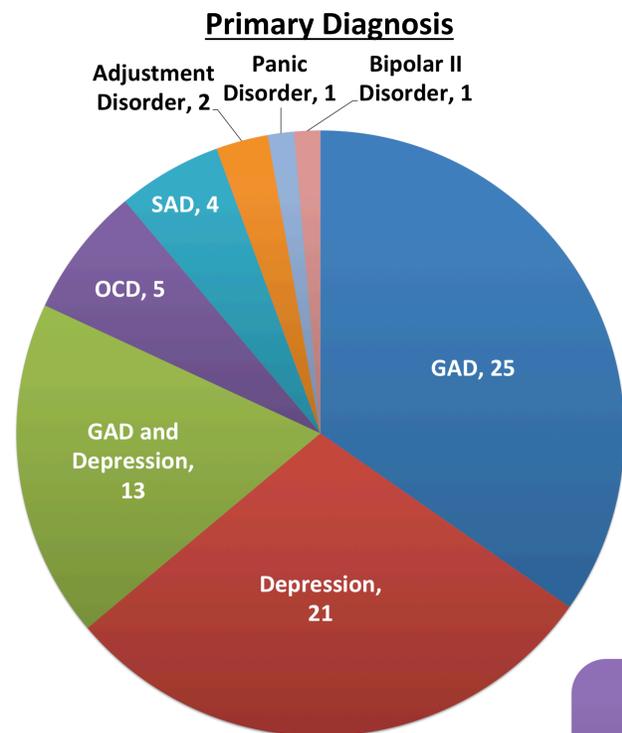
## RESEARCH OBJECTIVES

This exploratory study examined the effectiveness and mechanisms of change of 10 weeks of group based ACT for adolescents presenting with primarily anxiety and depression-related heterogeneous psychiatric disorders in a community hospital outpatient clinic.

## METHODS

**DESIGN:** Data were collected pre-, post- and 3MFU over four years and consisted of 15 groups of 4 to 8 adolescents per group.

**PARTICIPANTS:** 72 adolescents ages 13 to 18 ( $M=15.94$ ,  $SD=1.24$ ); 56 female (77.8%), 16 male (22.2%)



Outcome Measures
• Anxiety symptoms: MASC
• Depression symptoms: CDI-2
ACT Process Measures
• Defusion and acceptance: AFQ-Y8
• Mindfulness: CAMM10
• Values-based living/committed action: VLQa

## DATA ANALYSIS

### Treatment Effects

- Repeated measures ANOVAs

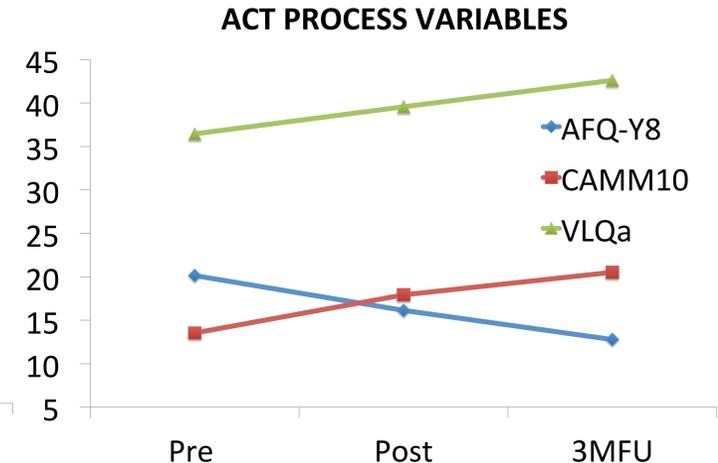
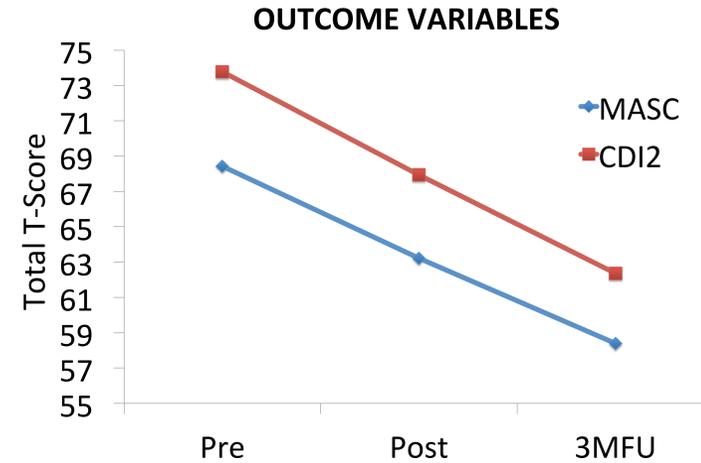
### Clinical Significance (Jacobson & Truax, 1991)

### Mechanisms of Change

- Multiple linear regression analyses

**Number of current diagnoses:** 1,  $n=29$  (40.3%); 2,  $n=28$  (38.9%), more than 2,  $n=15$  (20.8%); **Received previous psychotherapy:**  $n=71$  (98.6%); **Currently on psychotropic medication:**  $n=43$  (59.7%)

## RESULTS



- Repeated measures ANOVAs: significant time effect for MASC, Wilk's  $\lambda=.63$ ,  $F(2,70)=20.83^*$ , and CDI-2, Wilk's  $\lambda=.48$ ,  $F(2,70)=38.02^*$  Note.  $*p < .001$
- Post-hoc pairwise comparisons indicated significant reductions of anxiety and depression symptoms pre to post and further significant reductions of anxiety and depression symptoms post to 3MFU
- Repeated measures ANOVAs significant time effect for AFQ-Y8, Wilk's  $\lambda=.54$ ,  $F(2,70)=29.61^*$ , CAMM10, Wilk's  $\lambda=.56$ ,  $F(2,70)=27.30^*$ , and VLQa, Wilk's  $\lambda=.85$ ,  $F(2,70)=6.25^*$
- Post-hoc pairwise comparisons indicated significant reductions on AFQ-Y8, significant increases on CAMM10, and VLQa pre to post; significant reductions on AFQ-Y8, increases on CAMM10, and maintains on VLQa post to 3MFU

**CLINICAL SIGNIFICANCE:** For the MASC, 66.1% percent of the participants were above the clinical cutoff at pre. Of those, 34.1% met criteria for reliable and clinically significant change at post and 47.7% met criteria for reliable and clinically significant change at 3MFU. For the CDI-2, 76.4% of the participants were above the clinical cutoff at pre. Of those, 23.6% met criteria for clinically significant change at post and 50.9% met criteria for clinically significant change at 3MFU.

**MECHANISMS OF CHANGE:** Pre to post, multiple linear regression analyses of residualized gain scores indicated change of VLQa was a significant predictor of change of MASC; changes of AFQ-Y8 and CAMM10 were significant predictors of change of CDI-2. Thus, higher levels of VLQa predicted reductions of MASC and reductions of AFQ-Y8 and CAMM10 predicted reductions of CDI-2 pre to post. Post to 3MFU, change of AFQ-Y8 significantly predicted changes of MASC and CDI-2. Therefore, reductions of AFQ-Y8 predicted reductions of MASC and CDI-2 post to 3MFU.

## DISCUSSION

- The present study provides support for ACT groups as a transdiagnostic approach for adolescents presenting with primarily anxiety and depression-related psychiatric disorders in a community hospital outpatient mental health setting.
- There are several limitations to the present study. Regardless, future research of group based ACT and research comparing ACT groups and existing treatments in the community setting with a similar population is warranted.