ACBS World Conference
SAN FRANCISCO
— June 14-19, 2022 —

VIRTUAL Program

Thursday, June 16 (all times PDT)

Thursday Morning Plenary 9:00 AM

1. Polyvagal Theory: A Science of Safety
Plenary (9:00 AM - 10:15 AM)
Components: *Original data*
Categories: Evolutionary behavioral science, Trauma, Attachment, Anxiety, Social Behavior
Target Audience: Beginner, Intermediate, Advanced

Stephen Porges, Ph.D., Indiana University
Introduced by: Steven Hayes, Ph.D., University of Nevada, Reno

Humans, as social mammals, are on a quest for safety. The need to feel safe is the prepotent survival related motivator impacting on all aspects of human experience by biasing thoughts, feelings, and behaviors. Threat reactions not only disrupt cognitive, emotional, and behavioral functions but also compromise the basic homeostatic physiological functions supporting health, growth, and restoration. Without feeling safe, the nervous system is unable to optimize the regulation of visceral organs with the consequential damage to organs leading to observable and diagnosable organ disease and failure. A profound need to survive triggers a complex genetically programmed portfolio of physiological reactions and behaviors to cues of threat and safety. The talk will illustrate that feeling safe has a physiological signature, which is a product of our evolutionary history in which the autonomic nervous system was repurposed to support sociality. The theory provides the basis to understand sociality as the mutual expression of cues of safety that lead to behavioral and physiological co-regulation. Thus, the power of feelings safe with others enables sociality to function as a neuromodulator of the autonomic nervous system leading to more optimal mental and physical health.

Educational Objectives:
1. Apply Polyvagal Theory to demystify several clinical symptoms related to psychiatric diagnoses (e.g., PTSD, autism, depression, and anxiety disorders).
2. Explain how deficits in the regulation of the Social Engagement System relate to the core features of several behavioral and psychiatric disorders.
3. Describe a neural process (neuroception) that evaluates risk in the environment triggering adaptive neural circuits to promote either social interactions or defensive behaviors.

Thursday Morning 10:30 AM

2. The role of Relational Frame Theory in Process-Based Therapy
Panel (10:30 AM - 12:00 PM)
Components: *Conceptual analysis*
Categories: RFT / RGB / language, Processes of change, Process-Based Therapy, Relational Frame Theory
Target Audience: Beginner, Intermediate, Advanced

Chair: Giovambattista Presti, M.D., Ph.D., University of Enna Kore
Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz
Carmen Luciano, Ph.D., University of Almería, Spain
Niklas Törneke, M.D., NT Psykiatri
Steven Hayes, Ph.D., University of Nevada, Reno
Louise McHugh, Ph.D., University College Dublin

Process-Based Therapy (PBT) has been gaining momentum in the last few years. PBT incorporates the Extended-Evolutionary Meta-Model (EEMM) that aims to be a model of models because it is not based on a specific theoretical or intervention orientation with its specific terms. On the contrary, the EEMM describes areas of coverage and principles of change that any orientation needs to explain. Both PBT and EEMM are coherent with contextual behavioral science, given their focus on processes of change and evolutionary

science. Contextual behavioral science analyzes processes of change through the learning principles and the approach of human language and cognition represented by Relational Frame Theory (RFT). These functional-contextual analyses are adequate for advancing the pre-analytic objectives of prediction-and-influence of psychological events. However, given the meta-model nature of PBT, the functional-contextual analysis of processes of change could be undermined. In this panel, prominent researchers and clinicians will discuss the role of RFT in PBT and if they can coexist in a symbiotic way.

Educational Objectives:
1. Discuss the relationship between Process-Based Therapy and Relational Frame Theory.
2. Assess the space of contextual behavioral science in Process-Based Therapy.
3. Describe ways in which Relational Frame Theory can contribute to Process-Based Therapy.

15. Cultivating an Open and Caring Mind: Integrating CFT and ACT in Clinical Practice
Workshop (10:30 AM - 12:00 PM)
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Clinical intervention development or outcomes, Compassion
Target Audience: Beginner, Intermediate, Advanced

Manuela O'Connell, Lic., Unviersidad Favaloro
Gonzalo Brito, Ph.D., Pontificia Universidad Católica de Chile

One of the central goals of psychotherapy is to relieve suffering, however there are different ways to approach this. While ACT emphasizes psychological flexibility by encouraging clients to learn to remain open, aware and engaged even in the midst of difficulties, CFT focuses on cultivating a compassionate motivation and developing the skills of a compassionate mind as a way to promote wellbeing and relieve suffering. Both therapeutic models have supportive evidence; compassion and psychological flexibility are both negatively correlated with depression, anxiety, and other issues, and are positively correlated with psychological well being. In this workshop we will theoretically and experientially explore how these two approaches can be integrated clinically in a complementary fashion. ACT practitioners may benefit from incorporating a more explicit and embodied training in the compassionate mind. In turn, CFT practitioners may enhance their practice by including psychological flexibility processes to broaden clients behavioral repertoires. This workshop will include both a didactic introduction to this model integration and experiential exercises to learn how to apply this knowledge in a clinical setting.

Educational Objectives:
1. Demonstrate a clear theoretical understanding about how to integrate ACT and CFT.
2. Explain the integration of CFT and ACT in the person of the therapist through experiential exercises.
3. Demonstrate the clinical integration of ACT and CFT through role-play.

Thursday Lunch Events 12:15 PM – 1:00 PM

I. Forensic & Corrections SIG
Chapter/SIG Meeting (12:15 PM - 1:00 PM)

Amie Zarling, Ph.D., Iowa State University

This will be a networking and discussion meeting for members of the SIG.

J. Children, Adolescents, and Families SIG
Chapter/SIG Meeting (12:15 PM - 1:00 PM)

Luiza Chagas Brandão, M.Sc., Universidade de São Paulo
Sean O'Dell, PhD., Geisinger

This is a moment for every one interested in working with CAF population to gather and exchange ideas. You don't have to be a SIG member to participate!

The sessions below in blue will be streamed live to our virtual audience. The recordings (video, Powerpoint, and audio) will be captured, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

K. General Networking
   Chapter/SIG Meeting (12:15 PM - 1:00 PM)

Amanda Gossack
Corina Wong Chen

All are welcome! This is our version of sitting next to someone at lunch or chatting around the watercooler! Join this Networking Room, and you'll be added into a breakout room with 3-6 others. Halfway through this networking session, you'll be notified that the groups will be reshuffled, and then you'll be added to a new breakout room with 3-6 new people.
Want to continue your conversation? Write down the names of folks from your breakouts and message them directly through the Attendee list on this site to exchange emails.
Not sure how to start the conversation? Briefly introduce yourself and your interests (30-60 seconds each). Following introductions, perhaps ponder questions like these together:
• I heard something in a session earlier today that I didn't quite understand. Can anyone explain _____ to me?
• If I could get one question answered during this event, it would be….
• I've been using ACT/FAP/CFT/etc. with my clients for a few years now, and I find the most powerful difference in my practice has been….
• I've tried to use technique _____ with a few clients and I feel like I never quite get it right. Do you have any suggestions?
• I'd like to start learning more about _____. Does anyone have a good recommendation about the best books or articles I should read?
• Has anyone seen any "must see" sessions yet? I'm trying to keep a list of which sessions I really need to watch when the recordings are online.
• Does anyone have a suggestion on the best sessions coming up in the schedule about topic _____? I can't quite choose and am looking for recommendations.
Don't need any help getting the conversation started? Talk about what you like!

<div style="background-color:black;color:white;text-align:center">Thursday Afternoon 1:15 PM</div>

16. Level Up in ACT: Choose Your Own Fidelity Training
   Workshop (1:15 PM - 4:15 PM)
Components: *Didactic presentation, Role play, Strategic planning*
Categories: Clinical intervention development or outcomes, Processes of change, ACT Fidelity
Target Audience: Intermediate, Advanced

Lou Lasprugato, M.A., Sutter Health
Rikke Kjelgaard, M.Sc., Rikke Kjelgaard Consulting
Matthew Boone, LCSW, University of Arkansas for Medical Sciences

Growing as a practitioner is not an automatic process. In fact, years of experience alone do not predict better results in therapy. One longitudinal study examining the clinical outcomes of 6591 patients for 170 therapists found that on the whole, effectiveness of psychotherapists actually decreased slightly with years of experience (Goldberg et al., 2016). And one practitioner's area of strength might be a deficit for another. With regards to the psychological flexibility model, it's quite common for clinicians to excel in targeting certain processes and struggle in effectively shaping others, while the therapeutic stance gets overlooked.
This workshop is designed to personalize one's training experience through self-assessment and deliberate practice informed by the ACT Fidelity Measure. After a brief overview of the ACT-FM, participants will choose one of three domains, each hosted by a Peer-Reviewed Trainer, to target for skill-development. Participants will have opportunities to practice coding clinical behaviors, which will serve as feedback to shape practitioners' learning. Whilst not essential, please consider downloading the ACT-FM ahead of time to self-assess your existing skill level.

Educational Objectives:
   1. Self-assess clinical skill level and deficits with respect to the ACT Fidelity Measure.

2. Target skill enhancement in one of three domains: open response style, aware response style, or engaged response style while modeling an ACT therapeutic stance
3. Demonstrate how to make use of competency assessment tools and peer feedback to shape clinical skill development.

29. Women's Leadership in Action: Empowering Women, Using a Contextual Behavioral Framework: Women in ACBS SIG Sponsored
Panel (1:15 PM - 2:45 PM)
Components: *Strategic planning*
Categories: Social justice / equity / diversity, Professional development, Women's leadership
Target Audience: Beginner, Intermediate

Chair: Mai Manchanda, Psy.D., Kaiser Permanente
Luisa Cañón, Psy.D., BCBA-D, Institute for Effective Behavioral Interventions / ACTto Thrive
Melissa Miller, M.S., Wichita State University
Racheli Miller, Ph.D., The Compassion Practice
Ashlyne Mullen, Psy.D., NYC Psychotherapy and Mindfulness Center
Jagmeet Sangha, M.A., BCBA, Kyo
Debbie Sorensen, Ph.D., ImpACT Psychology Colorado
Shannon Underwood, B.S., University at Albany, SUNY
Patricia Guerrero, MSc, M.A., Early Interventions & Parent Support

In a world where, historically, men have held more power and a majority of leadership positions, women face systemic challenges in moving toward leadership. This panel, started as an initiative of the Women's SIG, is an exploration of women's leadership through a contextual behavioral lens. Panelists will discuss contextual and systemic challenges women face in taking on leadership roles, as well as internal experiences, such as unhelpful narratives and gender stereotypes, related to leadership. They will share personal experiences related to leadership, drawing from ACT process, such as values and willingness, as they have taken the lead, and highlighting the importance of community support. We aim to inspire and empower women to take the lead and create community and to enhance clinical work with women considering their leadership potential.

Educational Objectives:
1. Explain at least 4 contextual and systemic challenges women face in taking on leadership roles.
2. Describe strategies to increase committed action in leadership roles and building community to support women leaders.
3. Describe personal values underlying leadership behavior.

Thursday Afternoon 3:00

41. Anxiety and depression in times of social isolation: The influence of psychological flexibility across the life span
Symposium (3:00 PM - 4:15 PM)
Components: *Original data*
Categories: Processes of change, Psychological Flexibility, Mental Health Outcomes, Young Adults, Adolescents
Target Audience: Beginner

Chair: Paula Vagos, Ph.D., Universidade Portucalense Infante D. Henrique
Discussant: Nuno Ferreira, Ph.D., University of Nicosia
Samantha Coyle, Ph.D., Montclair State University
Joana Silva, Ph.D., Universidade Portucalense
Shannon Underwood, B.S., University at Albany, SUNY

This international symposium addresses how psychological flexibility helps individuals across the lifespan cope with unexpected, threatening, and large-scale events, such as the COVID-19 pandemic. The first study addresses how psychological flexibility lessened the impact of contextual consequences of the pandemic on mental health. The second study qualitatively investigated the impact of social isolation due to the pandemic on social anxiety symptoms, namely those that may be conceptualized as acceptance and commitment related

variables. The third study investigated the role of psychological flexibility in mediating the association between health anxiety and quality of life. Taken together, these works support the ACT assumptions that being more accepting, present-minded, and oriented by value-actions promote better mental health outcomes, even when facing unprecedented, adverse circumstances.

- Pandemic's effects on mental health of higher education students: a multi-level approach study across Portugal and the USA
    - Joana Silva, Ph.D., Instituto de Desenvolvimento Humano Portucalense, Universidade Portucalense Infante D. Henrique
    - Ana Xavier, Ph.D., Instituto de Desenvolvimento Humano Portucalense, Universidade Portucalense Infante D. Henrique
    - Carrie Masia, Ph.D., Montclair State University and Nathan Kline Institute for Psychiatric Research
    - Jazmin Reyes-Portillo, Ph.D., Montclair State University
    - Paula Vagos, Ph.D., Instituto de Desenvolvimento Humano Portucalense, Universidade Portucalense Infante D. Henrique

    COVID-19 pandemic brought about multi-level consequences for young adults, namely at the academic (e.g. transitioning to online learning) and economic levels (e.g. lowered incomes). This work tested if psychological flexibility serves as a protective factor for mental health when facing these consequences, across countries. Participants were 708 young adults (36.9% Portuguese and 63.1% North American), attending Higher Education. They reported on the impact of the pandemic on their families' finances and on their academic success, as well as on their psychological flexibility (using the AAQ-II) and their mental health (using the BSI). Results showed that financial impact had a direct effect on mental health that was not mediated by psychological flexibility. Alternatively, academic impact had both a direct and an indirect effect, via psychological flexibility, on mental health. So, though mental health deteriorates in the face of diverse strains, psychological flexibility seems to be an asset particularly when those strains are more prone to an internal attribution.

- A cross-cultural qualitative investigation of the impact of the COVID19 pandemic on social anxiety in adolescents and young adulthood
    - Samantha Coyle, Ph.D., Montclair State University
    - Paula Vagos, Ph.D., Instituto de Desenvolvimento Humano Portucalense, Universidade Portucalense Infante D. Henrique
    - Ana Xavier, Ph.D., Instituto de Desenvolvimento Humano Portucalense, Universidade Portucalense Infante D. Henrique
    - Carrie Masia, Ph.D., Montclair State University and Nathan Kline Institute
    - Helen-Maria Lekas, Ph.D., Nathan Kline Institute for Psychiatric Research

    Social anxiety (SA) is characterized by fear of evaluation and distress in social situations. Given the social nature of SA, social isolation associated with the pandemic could provide short-term relief of symptoms and allow for the avoidance of feared stimuli, which could serve as maintaining factors for SA. The current study utilized semi-structured interviews with seven psychology undergraduate students in the United States and 10 adolescents with clinically significant social anxiety in Portugal. We explored the impact of the pandemic, namely in creating optimal conditions for experiential avoidance. Preliminary findings suggest that interaction restrictions imposed by the pandemic facilitated the use of safety behaviors to avoid feeling anxious, though acknowledging the impact of that behavior on the quality of social interactions. Moreover, these avoidance behaviors, which are inconsistent with commitment to one's values concerning social interactions, impacted participants' feelings about their abilities to interact effectively in social situations. These results reflect the role that components of psychological inflexibility may have in worsening social anxiety symptoms during the pandemic.

- Examining relations between health anxiety, psychological inflexibility, and quality of life amid the COVID-19 pandemic
    - Max Z. Roberts, M.A., University at Albany, State University of New York, Department of Psychology, Clinical Division
    - Shannon B. Underwood, B.S., University at Albany, State University of New York, Department of Psychology, Clinical Division
    - Eric D. Tifft, M.A., University at Albany, State University of New York, Department of Psychology, Clinical Division
    - Sara V. White, B.A., University at Albany, State University of New York, Department of Psychology, Clinical Division
    - John P. Forsyth, Ph.D., University at Albany, State University of New York, Department of Psychology, Clinical Division

Elevated health anxiety (HA) is a common experience amid the COVID-19 pandemic. Theory in ACT suggests HA would lead to lower quality of life (QoL) only if one responded to HA inflexibly. In this study, we sought to ascertain whether: (1) HA was greater among those more at risk for COVID-19 complications (i.e., older adults and those with pre-existing health conditions), (2) elevated HA was associated with lower quality of life (QoL), and (3) whether psychological inflexibility (PI) mediated the relation between HA and QoL. A non-clinical, community sample of adults (N&#3f290; Mage=46.5; 80.7% female) were surveyed early during the pandemic with measures of quality of life (QOLI), psychological inflexibility (MPFI), health anxiety (SHAI), depression, anxiety, and stress (DASS-21), and asked about pre-existing conditions. Contrary to expectations, HA significantly decreased with age. Those with pre-existing conditions reported significantly more HA. After controlling for age, pre-existing conditions, depression, anxiety, and stress, HA still significantly predicted QoL. Yet, this relation between HA and QoL was cross-sectionally mediated by PI. Clinical implications will be discussed.

Educational Objectives:
1. Describe the role of psychological flexibility in lessining the impact of experiences related to the COVID-19 pandemic on mental health.
2. List the protective role that psychological flexibility holds for diverse mental health outcomes, namely general mental health, social anxiety, quality of life.
3. List the protective role that psychological flexibility holds for diverse samples, concerning country of origem, age, or previous mental health or health conditions.

Thursday Afternoon Plenary 4:30

42. Healing Social Identity-Based Suffering Through Mindfulness
Plenary (4:30 PM - 5:30 PM)
Components: *Conceptual analysis, Experiential exercises*
Categories: Social justice / equity / diversity, Academics or education, Mindfulness, Social-Identity-Based Bias
Target Audience: Beginner

Rhonda Magee, M.A., J.D., University of San Francisco
Introduced by: Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

In an age of increasing polarization, new methods for minimizing bias and ameliorating social conflict are ever more important to our personal, interpersonal and collective wellbeing. In this Keynote, Rhonda Magee, author of The Inner Work of Racial Justice: Healing Ourselves and Transforming Our Communities Through Mindfulness, will discuss how compassion-based mindfulness-based interventions may be the key to healing these divides. Following a description of the problem and a review of relevant research findings, she will call for increased attention to these social dynamics among researchers, and for more collaborative and interdisciplinary research methods and teams.

Educational Objectives:
1. Describe key behavioral aspects of the problem of social-identity-based bias.
2. Discuss the relevant research findings providing promising indications of the efficacy of mindfulness as a support for minimizing bias and social distress.
3. Explain how applied mindfulness may support individuals and communities in healing the wounds of racism and other social-identity based harms and suffering.

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Friday, June 17 (all times PDT)

Friday Morning 8:00 AM

P. Sport, Health, and Human Performance SIG
Chapter/SIG Meeting (8:00 AM - 8:50 AM)

Emily Leeming, T3i Services
David Udelf, Psy.D., Becker, Udelf & Associates

The mission of this Sport, Health, and Human Performance SIG is to promote the practice and research of contextually supported interventions within populations seeking higher levels of performance. This sport, health, and human performance SIG will meet these goals by creating an open, collegial, and supportive environment for all members. This SIG seeks to contribute to the growing body of work within the area of third wave approaches to human performance and healthy living. The SIG encourages its members to creatively apply third-wave models to their work, training programs, clinical practice, and research. Over the last year the SHHP SIG has seen significant growth as we have continued our monthly networking and professional development meetings. This year we also hosted our first board member elections and created a directory of performance professionals and a updated quarterly resource tool. In This business meeting we will discuss ways to sustain this growth, discuss leadership opportunities, and new activity ideas. All conference attendees are welcome to join the meeting as we discuss applying performance strategies to our SIG.

Q. Veterans Affairs (VA) ACT SIG
Chapter/SIG Meeting (8:00 AM - 8:50 AM)

Alycia Zink, Ph.D., Department of Veterans Affairs

SIG meeting for networking, membership recruitment, and elections for SIG leadership

Friday Morning Plenary 9:00 AM

43. Finding Ourselves in One Another
Plenary (9:00 AM - 10:15 AM)
Components: *Didactic presentation*
Categories: Dissemination or global health strategies, Social justice / equity / diversity, Service
Target Audience: Beginner, Intermediate, Advanced

Miranda Morris, Ph.D., True North Therapy and Training
Introduced by: Lisa Coyne, Ph.D., Harvard Medical School/McLean & New England Center for OCD and Anxiety

 "When we choose to love, we choose to move against fear, against alienation and separation. The choice to love is a choice to connect, to find ourselves in the other" - bell hooks
Our community has a shared mission to alleviate the problem of human suffering, and at the end of the day, what else could we call this but love? How we love and connect and thus find one another in ACBS unfolds in a thousand different ways. One way is service to others - both inside and outside of ACBS. Many of these efforts are invisible. And yet their impact is profound. These are acts of love that have the power to unite us in a shared purpose. Who are the people in ACBS doing service? What kinds of service are they doing? Why are they doing it? Join me and find out. Meet some of the people in ACBS who breath life into our shared mission and show us who we are and who we can be.

Educational Objectives:
1. Explain what is meant by "the hands of ACT".
2. Identify at least 3 different ways that ACBS members are disseminating ACT and CBS through service.

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3. Describe at least one way in which service in the CBS community is consistent with our shared value to work to alleviate the problem of human suffering.

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44. The ACT Therapeutic Relationship: Creating Healthy Alliances and Repairing Ruptures
Workshop (10:30 AM - 12:00 PM)
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Supervision and training, Clinical Interventions and Interests, Supervision, Training and Dissemination, Therapeutic
alliance and repairing ruptures
Target Audience: Beginner, Intermediate, Advanced

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services
Manuela O'Connell, Lic., Unviersidad Favaloro

The ACT therapeutic relationship, or alliance, is an essential part of effective therapy. In acceptance and commitment therapy (ACT), the alliance is characterized by the client and therapist working together, using the core processes of ACT, creating a vital and moment-by-moment collaborative experience. Building healthy, supportive, and enriching relationships is necessary for integrating the six core processes of ACT in a fluid and flexible manner. As well, therapists facing a rupture in the alliance may be challenged to mend the discord in a forward-moving and effective treatment service that is ACT consistent. In ACT, processes such as defusion, perspective-taking, choice, and values play a role in restoring a cooperative, engaged alliance repair. We will explore the therapeutic relationship within the ACT model and present its perspective on rupture and repair in psychotherapy. This workshop will use didactic, experiential, and role-play exercises to convey the material.

Educational Objectives:
1. Describe the ACT therapeutic stance in creating a strong therapeutic alliance.
2. Describe what a rupture in the therapeutic relationship is from an ACT perspective.
3. Describe how to make a repair in the alliance from an ACT perspective following a rupture.

57. Telehealth and Digital ACT Interventions: Advances and Innovations for Transdiagnostic Behavioral Health Concerns
Symposium (10:30 AM - 12:00 PM)
Components: *Original data*
Categories: Mobile or digital technology, Health / behavioral medicine, Digital Health
Target Audience: Beginner, Intermediate

Chair: Orla Moran, Ph.D., Dundalk Institute of Technology
Discussant: Louise McHugh, Ph.D., University College Dublin
Joseph Lavelle, M.Sc., UCD School of Psychology; UCD School of Public Health, Physiotherapy, and Sports Science
Darren Edwards, Ph.D., Swansea University

Digital health platforms offer increased availability and flexibility to individuals wishing to access therapeutic support who may not be able to access in-person therapy, such as those with chronic health conditions (Stoll et al., 2020). While only a small number of studies have examined the adaption of Acceptance and Commitment Therapy (ACT) for use in digital interventions, preliminary findings are promising (Nes et al., 2012; 2015). However further research is critical to understand how digital ACT interventions can best meet the needs of populations affected by more profound challenges, such those with chronic illness and clinically significant mental health concerns. In the first paper, Lavelle and colleagues present research on brief telehealth ACT intervention for stress in patients diagnosed with IBD. In the second paper, Moran et al present findings on the effect of an ACT based digital behaviour change intervention for those with cardiac conditions. Finally, in paper three, Edwards & Kemp examine the feasibility of two ACT based interventions; a short digital psychoeducational course; and a computer game using the MRC framework guidelines.

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- A Single Case Experimental Design to Evaluate a Digital ACT Intervention for Improving Self-Management Behaviors in Cardiac Patients

  Orla Moran, Ph.D., Dundalk Institute of Technology
  Oonagh Giggins, Ph.D., Dundalk Institute of Technology
  Louise McHugh, Ph.D., University College Dublin
  Evelyn Gould, Ph.D., Harvard Medical School
  Suzanne Smith, Dundalk Institute of Technology
  Shane Gavin, Dundalk Institute of Technology
  Nisanth Sojan, Dundalk Institute of Technology
  Gordon Boyle, Dundalk Institute of Technology
  Julie Doyle, Ph.D., Dundalk Institute of Technology

To date, limited empirical research has been conducted examining the efficacy of Acceptance and Commitment Therapy (ACT) with cardiac patients and most ACT based empirical investigations to date also involve in-person therapy, which can be difficult to access for those dealing with the demands of chronic disease. This research examines the efficacy of a digital ACT intervention to improve self-management behaviors and psychological flexibility in cardiac patients. The intervention is delivered via a digital health app over 6 weeks with once weekly live video sessions and involves a randomized-multiple baseline Single Case Experimental Design (SCED) with nine cardiac patients (M=55.55yrs; SD=6.81yrs; 6 males). The Independent Variable for each participant will be pre-post intervention phase. Dependent variables will be daily self report measures of psychological flexibility, as well as objective measures of self-management. One-to-one qualitative interviews will also be used to further examine participants' experience using the intervention and what factors contributed to/impeded successful outcomes. Findings will be discussed in terms of how a digital ACT intervention can best meet the needs of cardiac patients.

- A Single Case Experimental Design (SCED) evaluating a two-session telehealth Acceptance and Commitment Therapy (ACT) intervention for stress in Inflammatory Bowel Disease (IBD)

  Joseph Lavelle, M.Sc., University College Dublin
  Darragh Storan, M.D., Beaumont Hospital
  Varsha Eswara Murthy, Ph.D., University College Dublin
  Noemi De Dominicis, Saint Vincent's University Hospital
  Hugh Edward Mulcahy, M.D., FRCPI, University College Dublin & Saint Vincent's University Hospital
  Louise McHugh, Ph.D., University College Dublin

Psychological intervention is now considered an integral component of Inflammatory Bowel Disease (IBD) management with this predicated on links between mental health concerns—such as mood disorders and chronic stress—, disease activity, and treatment response. However, significant barriers to access exist which necessitate the development of effective, economic, and accessible brief and remote interventions. The present study investigated a brief telehealth Acceptance and Commitment Therapy (ACT) intervention via randomized multiple-baseline design with temporal staggering of intervention onset and daily ecological momentary assessment of stress and indices of psychological flexibility. Participants (N&#3f12 people with an IBD diagnosis) completed baselines lasting from 21 to 66 days before receiving a two-session ACT telehealth intervention which was supplemented by a workbook to support better living with chronic illness and a brief phone consultation. Approximately, half of participants experienced reduced stress and increased psychological flexibility with factors such as intervention adherence influencing intervention response. The present findings suggest that brief ACT interventions in this population may be effective, economic, and accessible.

- Novel acceptance and commitment therapy (ACT) digital health psychoeducational and computer game interventions with students who have depression, anxiety, and stress: A feasibility study and protocol discussion

  Darren Edwards, Ph.D., Swansea University
  Andrew Kemp, Swansea University, Ph.D

Recent studies have revealed a high prevalence of depression anxiety, and stress symptoms among university students. This study aimed to determine the feasibility of two interventions; (1) a short online ACT digital psychoeducational course; and (2) an ACT-based computer game using the MRC framework guidelines. This included exploring quantitatively, whether the intervention would improve wellbeing and psychological flexibility, whilst reducing depression, anxiety, and stress. 28 participants with moderate to high levels of depression, anxiety and stress completed the 'Bite of ACT' psychoeducational intervention over a two-week period. The measures (for both interventions) used were the Warwick-Edinburgh Mental Well-being Scale (WEMWBS), the Depression, Anxiety and Stress Scale (DAS-21) to test for depression, anxiety and stress, and the Acceptance and Action Questionnaire II (AAQII). Pilot data (collected only for the psychoeducation intervention at present) showed overall DASS-21

scores significantly decreased, there was also a significant increase in WEMWBS. These pilot results are promising and in combination with the positive qualitative data we received it is now suggested that a full scale RCT should be conducted.

Educational Objectives:
1. Apply necessary adaptions to attendees' own digital ACT interventions for both clinical and research purposes.
2. Describe most recent developments and innovation in the application of ACT to transdiagnostic mental and physical health concerns.
3. Demonstrate understanding of the various types of research design used in testing digital ACT interventions and their advantages, including feasibility studies, and process-based designs such as Single Case Experimental Design.

Friday Lunch Events 12:15 PM – 1:00 PM

V. ACBS Colombia Chapter
Chapter/SIG Meeting (12:15 PM - 1:00 PM)

Amanda Muñoz-Martínez, Ph.D., Universidad de los Andes
Luis Manuel Silva, Ph.D., Pontificia Universidad Javeriana

El Capítulo Colombiano de ACBS (ACBS-CO) quiere dar la bienvenida a nuestros miembros para que se unan a nosotros y conversemos durante unos minutos durante la conferencia. Esta reunión se llevará a cabo en línea ya que cualquiera de los miembros actuales de la junta pudo participar en persona. Por favor, siéntase libre de venir y unirse a nosotros.

W. Social Work SIG
Chapter/SIG Meeting (12:15 PM - 1:00 PM)

Olga Montgomery, James River Hospice
Kristi Stuckwisch, Mayo Clinic

Join us and connect with social workers from around the world! We extend a special welcome to new ACBS and SIG members. This is an informal gathering to meet and share your ideas for the SIG and future World Conferences.

X. General Networking
(12:15 PM - 1:00 PM)

Amanda Gossack
Corina Wong Chen

All are welcome! This is our version of sitting next to someone at lunch or chatting around the watercooler! Join this Networking Room, and you'll be added into a breakout room with 3-6 others. Halfway through this networking session, you'll be notified that the groups will be reshuffled, and then you'll be added to a new breakout room with 3-6 new people.
Want to continue your conversation? Write down the names of folks from your breakouts and message them directly through the Attendee list on this site to exchange emails.
Not sure how to start the conversation? Briefly introduce yourself and your interests (30-60 seconds each). Following introductions, perhaps ponder questions like these together:
• I heard something in a session earlier today that I didn't quite understand. Can anyone explain _____ to me?
• If I could get one question answered during this event, it would be….
• I've been using ACT/FAP/CFT/etc. with my clients for a few years now, and I find the most powerful difference in my practice has been….
• I've tried to use technique _____ with a few clients and I feel like I never quite get it right. Do you have any suggestions?

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• I'd like to start learning more about _____. Does anyone have a good recommendation about the best books or articles I should read?
• Has anyone seen any "must see" sessions yet? I'm trying to keep a list of which sessions I really need to watch when the recordings are online.
• Does anyone have a suggestion on the best sessions coming up in the schedule about topic _____? I can't quite choose and am looking for recommendations.
Don't need any help getting the conversation started? Talk about what you like!

Friday Afternoon 1:15 PM

58. From Experience to Identity: Conceptualizing Gender from a CBS Lens
Panel (1:15 PM - 2:45 PM)
Components: *Conceptual analysis*
Categories: Theory and philosophical foundations, Social justice / equity / diversity, Gender
Target Audience: Beginner, Intermediate, Advanced

Chair: Eva Lieberman, M.S., Western Michigan University
Janani Vaidya, M.S., National Louis University; Louisiana Contextual Science Research Group
Tahcita Mizael, Ph.D., University of Sao Paulo (USP)
Lynn Farrell, Ph.D., National College of Ireland

Understanding of gender in popular culture has shifted dramatically in recent times, with the behavioral sciences (including CBS) slow to catch up. In research, gender- related constructs have been used as selection criteria, covariates, independent and dependent variables, moderators, and descriptive data. In our interventions, gender has primarily been treated as an eligibility criterion and gender minorities have rarely been included (let alone centered) in treatment development. And yet, a CBS perspective may offer a conceptualization of gender that has depth and complexity along with explicit action implications (e.g., for inclusion). For example, gender terms might refer to functional patterns in the broad context that covary with resources and power (e.g., male privilege). Gender terms might also refer to patterns of one's own behavior that humans tend to categorize as identities (e.g., nonbinary). Finally, gender terms might refer to patterns in another's behavior that serve as context, selecting for particular behaviors in those around them via interlocking behavioral contingencies. This panel will explore CBS approaches to conceptualizing gender, with explicit implications in research and practice.

Educational Objectives:
1. Describe ways that gender and related constructs have been used in research both within and outside of ACBS.
2. Describe a CBS perspective on gender and how it differs from other approaches.
3. Identify specific implications for research and practice when adopting a CBS conceptualization of gender.

71. Filling the gap in a post-pandemic world: How coaching can help people increase wellbeing and performance: Coaching SIG Sponsored
Panel (1:15 PM - 2:45 PM)
Components: *Conceptual analysis, Literature review, Original data*
Categories: Sports or performance-enhancing, Coaching
Target Audience: Beginner, Intermediate, Advanced

Chair: Shane O'Neil-Hart, LCSW, Lyra Health
Discussant: Rachel Collis, MB, BS (Lond), Queensland University of Technology
Matthew Boone, LCSW, University of Arkansas for Medical Sciences
Aprilia West, Psy.D., MT, PCC, Aprilia West
Liliane de Aguiar-Rocha, DBH, The Behavior Web, LLC
Mary Veerkamp, Ph.D., Mary Veerkamp Coaching/Lyra Health

Coaching is an emerging intervention that can increase access to effective care and reduce stigma. As a nascent field, coaching has minimal regulation, a variety of disparate theoretical approaches, and a small but fast-growing body of research support.

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ACT and other CBS approaches offer a natural lens for coaching that can further illuminate its success and grounding in science thanks to many similarities, including a de-emphasis on pathology, a commitment to viewing clients as whole and capable, a collaborative and process-based approach and the promotion of expanded behavioral repertoires through values-based action as the source of wellbeing and performance. This panel will include coaches —some of whom are also clinicians and/or behavior analysts—and clinicians who have trained coaches in a behavioral health setting and in the workplace. It will explore questions such as: What is the difference between coaching and therapy? What can therapists and behavior analysts learn from the field of coaching? How can a contextual behavioral framework be applied in coaching practice? There will also be a brief presentation on coaching research.

Educational Objectives:
1. Describe key differences between the practice of coaching and therapy.
2. Identify shared elements between the ACT therapeutic stance and common coaching philosophies.
3. Articulate how coaching may be able to fill a gap in the mental health care system.

Friday Afternoon 3:00 PM

72. Epiphany or Practice: Exploring the Processes and Pace of Change in Psychedelic-Assisted Psychotherapy
Panel (3:00 PM - 4:15 PM)
Components: *Conceptual analysis*
Categories: Processes of change, Theory and philosophical foundations, Psychedelic-Assisted Psychotherapy
Target Audience: Beginner, Intermediate

Chair: Nathan Gates, M.A., LCPC, Spoon River Counseling & Wellness
Brian Pilecki, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Steven Hayes, Ph.D., University of Nevada, Reno
Henry Whitfield, M.Sc., Regents University School of Psychology and Psychotherapy, Maastricht University Department of Neuropsychology and Psychopharmacology
Dennis Tirch, Ph.D., The Center for CFT

One of the most useful critiques of psychedelic drugs as agents of personal change regards the fact that human patterns of behavior tend to be so stable and enduring. How is it possible that a single experience may evoke durable changes to relatively stable systems so quickly?
For example, in clinical trials involving psilocybin participants regularly describe their psychedelic experiences as among the most meaningful in their lives. This is a remarkable statement, but not an uncommon one. Psychedelic drug use, in any setting, may at times evoke experiences that are indescribable, awe-inspiring, and dripping with what seems like deep meaning. These experiences are often important to people- but do they really help them change?
This panel will discuss this question in the contexts of current research, psychedelic retreats, and in Buddhist practice. These settings highlight tensions between sudden, impactful experience and slow, committed practices and shed light on the conditions and approaches to integration therapy that may make positive change more likely to occur.

Educational Objectives:
1. Discuss tensions between brief, episodic experiences of epiphany and slow, committed progress over time.
2. Describe how "episodic" and "slow" processes of change can leverage one another over time.
3. Describe the relationship between what is commonly referred to as "mystical experience" and "self-as-context".

83. Using the ACT Kidflex with Children 5-12 Years to Increase Psychological Flexibility: Australia & New Zealand Chapter and ACT in Education SIG Sponsored
Workshop (3:00 PM - 4:15 PM)
Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Supervision and training, Children
Target Audience: Beginner, Intermediate

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Tamar Black, Ph.D., Private Practice

ACT can be used effectively with children for a wide range of issues. This highly practical and experiential workshop will teach you how to use ACT with children 5-12 years. You will be introduced to the new ACT Kidflex, a developmentally appropriate adaptation of the ACT Hexaflex, and learn how to use quick, simple and engaging techniques to treat neuro-diverse and neuro-typical children. Participants will take part in an ACT and compassion-based experiential exercise.

The workshop facilitator is an educational and developmental psychologist who works as a school psychologist and in private practice, and is the author of ACT FOR TREATING CHILDREN (New Harbinger, 2022).

Educational Objectives:
  1. Demonstrate effective, simple and engaging ACT and compassion-focused techniques with neuro-diverse and neuro-typical children.
  2. Describe how to identify where in the ACT Kidflex to begin therapy with children.
  3. Explain how ACT and compassion-based experiential exercises can be used with children.

Friday Afternoon Plenary 4:30 PM

84. Radical Ethology: a Sideways Glance at Primate Lives
   Plenary (4:30 PM - 5:30 PM)
Components: *Conceptual analysis, Literature review, Original data*
Categories: Evolutionary behavioral science, Theory and philosophical foundations, Social Behaviour
Target Audience: *Beginner, Intermediate*

Louise Barrett, Ph.D., University of Lethbridge
Introduced by: Patti Robinson, Ph.D., Mountainview Consulting Group

The Anthropoid primates—the monkeys and apes— are known for both their intense sociality and their large brain size. This has given rise to the idea that these features might be causally related, and there is a now a large body of work that tests this so-called "social brain hypothesis" (SBH). The SBH views social life as highly political, and requires primates to plot and plan in an increasingly abstract manner—that is, to understand another's behaviour, primates must delve below the surface and make inferences about the hidden causes of other's actions. This "vertical" view risks losing sight of the fact that brains primarily evolved to enable the control of action in specific contexts, which in turn leads us to downplay or neglect the importance of the physical body in a material world full of bodies and other objects. Here, I make the case for taking a "horizontal" view of primate brain and social evolution— that is, one that focuses on bodies and action, and takes a "sideways" look at the concrete social and physical contexts in which animals are nested. I further suggest that this has implications for how we think of certain human conditions, like autism and schizophrenia.

Educational Objectives:
  1. Compare different theories of primate cognitive evolution.
  2. Describe the relevance of peri-personal space for social interactions.
  3. Assess the utility of an embodied and contextual perspective on behavioural evolution.

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Saturday, June 18 (all times PDT)

Saturday Morning 8:00 AM

AC. ACBS Argentina Chapter
Chapter/SIG Meeting (8:00 AM - 8:50 AM)

Lucia Loureiro, Private Practice

Esta reunión del Capítulo está abierta a todas las personas de habla hispana de cualquier país que quieran saber sobre el capítulo y las actividades que organizamos. Esta es una oportunidad para establecer contactos y recibiremos sugerencias para futuros proyectos.

AD. Climate Justice and Action SIG
Chapter/SIG Meeting (8:00 AM - 8:50 AM)

Martin Wilks, Private Practice
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

Members of the Climate Justice and Action SIG will meet for multiple purposes including a presentation of activities and to engage members in the SIG projects. Members will also participate in a discussion about how to harness our members in the service of facilitating activity around climate change action. Members will have the opportunity to meet and talk with the board and provide input regarding future directions.

Saturday Morning Plenary 9:00 AM

85. Psychological Flexibility and Prosociality: Applying RFT at the heart of Behavior Analysis
Plenary (9:00 AM - 10:00 AM)
Components: *Conceptual analysis, Didactic presentation*
Categories: RFT / RGB / language, Behavior analysis, Psychological Flexibility
Target Audience: Beginner, Intermediate, Advanced

Siri Ming, Ph.D., BCBA-D, Private Practice
Introduced by: Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Dr. Siri Ming has spent decades working in a wide range of contexts all over the world that have shaped her practice. In this talk, she shares her perspective that viewing behavior analytic intervention through a lens of psychological flexibility and prosociality gives a clear focal point for building a meaningful, values-directed, compassionate practice, centered on social validity and cultural humility.

Psychological flexibility involves interacting with (or "languaging about") our experiences in flexible, context-sensitive ways that help us connect with meaning and purpose, even when faced with adversity. Prosociality rests upon both psychological flexibility and cooperation. These are complex composite repertoires, requiring advanced repertoires of relational framing and rule governance—including deictic and hierarchical framing, valuing, behavioral variability and relational flexibility. However, they are repertoires that are learned, and can be taught, in terms of component skills building over time. In this talk, Dr. Ming unpacks psychological flexibility and prosociality in terms of basic behavior principles and relational framing, showing that these can be viewed as skill sets that can be promoted throughout the lifespan, from infancy to adulthood. She argues that taking this perspective keeps our focus always on social validity, the heart of behavior analytic practice.

Educational Objectives:
1. Identify how a focus on psychological flexibility and prosociality as ultimate outcomes help to support social validity.
2. Describe psychological flexibility as a composite repertoire, learned over time through increasing behavioral variability, perspective taking, hierarchical framing, and valuing.

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3. Describe cooperation (and by extension prosociality) as a composite repertoire, learned over time through increasing repertoires of curiosity, empathy, compassion and humility.

86. Open Science and Reproducibility in Contextual Behavioral Science
Symposium (10:15 AM - 11:45 AM)
Components: *Conceptual analysis, Literature review, Original data*
Categories: Methods/approaches for individual variation, Theory and philosophical foundations, Open Science, Reproducibility
Target Audience: Beginner, Intermediate

Chair: Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Discussant: Michael Levin, Ph.D., Utah State University
Kati Lear, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Clarissa Ong, Ph.D., Boston University
Eric Lee, Ph.D., Southern Illinois University

In recent years, large scale and well-conducted efforts at replicating scientific findings have repeatedly failed to replicate what were once thought to be scientific truths. These difficulties have shocked many behavioral scientists and scientists in general as these problems with replication have been shown to generalize to other fields. It appears that science is riddled with false positive "findings," making it difficult to tell the signal from the noise. The main solution proposed to this difficulty has been open science -- a movement that focuses on making science more accessible and that includes a number of practices aimed at increasing the accuracy of and replicability of scientific findings. This symposium aims to assess how widely recommendations for addressing these issues have been adopted inside the CBS literature and identify problems with replicability in different areas of research. We will also discuss how open science and reproducibility practices might be adopted by CBS researchers and how the open science movement fits with CBS in a conceptual, social, and philosophical manner.

- Auditing the *Journal of Contextual Behavioral Science* for Open Science and Reproducibility Practices
    Kati Lear, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
    Meredith Tittler, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
    Joel Fishbein, University of Colorado, Boulder
    Joanna Arch, Ph.D., University of Colorado Boulder
    Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center

    Open science refers to research values and practices that aim to increase openness, transparency, and reproducibility in scientific research (Cruwell et al., 2018). The Journal of Contextual and Behavior Science (*JCBS*) has recently updated submission requirements to advance the use of open science practices in CBS research. This study aims to provide a reference point for measuring future progress toward a culture of open science in CBS by characterizing the frequency of open science practices included in papers published in *JCBS* in the year preceding the adoption of the editorial board's open science recommendations. To accomplish this aim, we are auditing empirical articles published in complete issues of *JCBS* from July 2020 – July 2021 (N = 98) by adapting coding methodology from previous research auditing open science and replicability practices (e.g., pre-registration, data sharing, conflict of interest disclosure; project pre-registration: https://osf.io/ev5mu/) in clinical psychology journals (Nutu et al., 2019; Reardon et al., 2019). Data are currently being extracted and coded. Results are forthcoming and will inform targeted efforts to advance open science in CBS research.

- Acceptance and Commitment Therapy Mediation and Processes: Problems and How to Address Them
    Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
    Joann Arch, Ph.D., University of Colorado Boulder
    Joel Fishbein, M.A., University of Colorado Boulder
    Lauren Finkelstein, University of Colorado Boulder

    The assessment of mediation via theory-driven processes in Acceptance and Commitment Therapy has been hindered by multiple challenges, including: 1) challenges in defining ACT processes; 2) obstacles to developing and rigorously validating measures of ACT processes; 3) the wide use of psychometrically weaker ACT process measures and the more limited use of stronger measures; 4) the inconsistency of evidence that ACT processes are sensitive or specific to ACT or mediate ACT outcomes specifically; 5) problems with replicability, statistical power,

and transparency. Drawing on the existing ACT literature, this paper characterizes and provides evidence for each of these challenges. It then offers detailed recommendations for how to address each challenge in ongoing and future work, with an emphasis on principles based in the open science movement. Given ACT's core focus on theorized processes, improving the measurement and evaluation of these processes would significantly advance the field's understanding of ACT.

- What Contextual Behavioral Science and Open Science Have in Common
  Clarissa Ong, Ph.D., Center for Anxiety and Related Disorders at Boston University

  This paper discusses the philosophical and practical convergence of contextual behavioral science (CBS) and open science, outlining an argument for why the science of philosophy, theory, and values underlying CBS prescribe greater transparency and methodological accountability, which can be achieved by open science practices. Specifically, the paper will describe the philosophical and theoretical underpinnings of CBS as they relate to scientific research and infer recommended "best practices" based on these assumptions, showing how these recommendations overlap with those promulgated by the open science movement. For example, a key feature of CBS is that it is theory-driven and empirically verified rather than cobbled together ad hoc. Open science practices, including preregistration, similarly demand this level of forethought with respect to study planning. In addition, this paper will identify open science practices that may be especially relevant to CBS researchers, like code and data sharing to improve accessibility and equitable research practices. This paper aims to show that open science can provide a framework to help CBS researchers more closely hew to their scientific values.

- Testing the Open Science Waters: Dipping Your Toe or Taking the Plunge
  Eric B. Lee, Ph.D., Southern Illinois University

  Have you heard about open science, thought it was interesting, and wondered, "how do I even do that?" This talk is for you! Whether you want to dip your toe in the water and try a simple step or two for your next study or take the plunge and completely reorganize your research program, we will present ideas that can help take your research to the next level. Topics will include 1) an introduction to the Open Science Framework; 2) a preregistration tutorial, including strategies and troubleshooting; 3) how to submit preprints; and 4) how to share your methods and data ethically and responsibly. I am an early career researcher who has been learning and slowly implementing open science practices in my own work over time. The presentation will be an accessible primer to the world of open science using specific examples from my own research lab. Freely available resources will be showcased that can be picked up and used by anyone, budding researchers and veterans alike.

Educational Objectives:
1. Outline 3 major open science practices.
2. Describe 3 solutions recommended that CBS researchers can take from here to improve on current practices.
3. List 3 major critiques of the current CBS literature.

99. Desarrollando conciencia funcional de la propia experiencia en sesión
Workshop (10:15 AM - 11:45 AM)
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Supervision and training, Professional development, Therapist problems and improvements in session
Target Audience: Beginner, Intermediate

Germán Teti, M.D., Argentine Center for Contextual Therapies Foundation

Uno de los obstáculos para promover flexibilidad psicológica es la dificultad del terapeuta en discriminar su propia experiencia. Los mismos procesos que operan sobre el consultante (fusión/evitación) están presentes en el terapeuta. Estas funciones se hacen presentes en sesión producto de la historia personal de cada individuo. En este sentido, es central trabajar para fortalecer la discriminación de las variables que influyen sobre el comportamiento del terapeuta. Esto implica el desarrollo de un repertorio de conciencia de los impulsos, emociones, sensaciones y pensamientos que surgen como consecuencia de la interacción terapéutica.

Educational Objectives:
1. Sea consciente de la experiencia personal y la influencia que ejerce sobre su comportamiento.
2. Logre interpretar funcionalmente su comportamiento en sesión.

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3. Adquiera habilidades para responder en forma efectiva a la propia experiencia promoviendo una interacción terapéutica flexible.

Saturday Lunch Events 12:15 PM – 1:00 PM

AE. Gender and Sexual Diversity SIG
(12:15 PM - 1:00 PM)

Yash Bhambhani, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine
Nguyen Tran

Let's have a virtual meeting for the ACBS Gender and Sexual Diversity SIG! While the conference is in-person, we want to take advantage of online options and have a virtual meeting so that most folks can attend. We're also planning to host elections for the SIG leadership before the conference, we can do a virtual meet and greet :)
All folks who are LGBTQIA2S+ identified welcome!

AF. ACT for Military SIG
(12:15 PM - 1:00 PM)

Andy Santanello, Center for Deployment Psychology
Wyatt Evans, VA North Texas Health Care System

All members of the ACT for Military SIG are both welcome highly encouraged to attend. This will be an informal meeting with opportunities to connect with other clinicians and researchers who are interested in application of ACT and CBS in military contexts.

AG. General Networking
(12:15 PM - 1:00 PM)

Amanda Gossack
Corina Wong Chen

All are welcome! This is our version of sitting next to someone at lunch or chatting around the watercooler! Join this Networking Room, and you'll be added into a breakout room with 3-6 others. Halfway through this networking session, you'll be notified that the groups will be reshuffled, and then you'll be added to a new breakout room with 3-6 new people.
Want to continue your conversation? Write down the names of folks from your breakouts and message them directly through the Attendee list on this site to exchange emails.
Not sure how to start the conversation? Briefly introduce yourself and your interests (30-60 seconds each). Following introductions, perhaps ponder questions like these together:
• I heard something in a session earlier today that I didn't quite understand. Can anyone explain _____ to me?
• If I could get one question answered during this event, it would be….
• I've been using ACT/FAP/CFT/etc. with my clients for a few years now, and I find the most powerful difference in my practice has been….
• I've tried to use technique _____ with a few clients and I feel like I never quite get it right. Do you have any suggestions?
• I'd like to start learning more about _____. Does anyone have a good recommendation about the best books or articles I should read?
• Has anyone seen any "must see" sessions yet? I'm trying to keep a list of which sessions I really need to watch when the recordings are online.
• Does anyone have a suggestion on the best sessions coming up in the schedule about topic _____? I can't quite choose and am looking for recommendations.
Don't need any help getting the conversation started? Talk about what you like!

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Saturday Afternoon 1:15 PM

100. Finding The Way: Using ACT for Crisis Intervention and Crisis Integration
Workshop (1:15 PM - 4:15 PM)
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Processes of change, Crisis Intervention
Target Audience: Intermediate

Kirk Strosahl, Ph.D., HeartMatters Consulting LLC
Patricia Robinson, Ph.D., Mountainview Consulting Inc

This workshop will introduce the basic clinical principles of ACT-CI (ACT for Crisis Intervention), a brief, focused approach that uses the processes of acceptance, mindfulness and life engagement to help clients integrate the learnings of a life crisis. ACT-CI incorporates the psychological flexibility model as well as the principles of predictive coding theory, a neuroscience account of human emotions. In this approach, emotions signal a discrepancy (or match) between the client's mental model of the "desired and expected" world, versus what is actually in the world. Emotional and behavioral avoidance strategies function as attempts to make the world fit prior mental models (i.e., crisis instigation), whereas acceptance, mindful and life engagement function to change prior mental models to fit the world (e.g., crisis integration). We will demonstrate how to help clients in crisis become mindfully aware of, accept and reframe intense bodily sensations/emotions as portals into personal values. Role play demonstrations and dyadic practice will help participants learn how to insert these three transformative processes calmly and compassionately into what is often a single session.

Educational Objectives:
1. Describe the unique processes associated with crisis instigation and crisis integration.
2. Demonstrate how to apply clinical interventions to safely experience mindful awareness of the body.
3. Apply strategies for using the emotional pain of crisis to access a client's personal values and life aspirations.

113. ACT for Social Anxiety: An Evidence-Based In-Person and Virtual Group Approach
Workshop (1:15 PM - 2:45 PM)
Components: *Didactic presentation, Experiential exercises, Literature review, Original data, Role play*
Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, Social Anxiety Disorder
Target Audience: Beginner, Intermediate, Advanced

Nancy Kocovski, Ph.D., Wilfrid Laurier University
Jan Fleming, M.D., FRCPC, The Mindfulness Clinic, Toronto

This workshop will focus on training an ACT-based group approach for social anxiety that was originally developed for in-person delivery and has recently been adapted for the Zoom platform. Empirical evidence for in-person and virtual delivery of the approach will be briefly summarized followed by presentation of the 10-week group protocol which includes mindfulness and compassion practices, metaphors and experiential exercises (including improv-based) that get at acceptance, defusion, values and goals, as well as acceptance-based situational exposures referred to as VITAL Action exercises. Workshop attendees will learn by demonstration, experiential exercises, and role play how to use the strategies in person and how to adapt them for the Zoom platform, including effective use of break-out rooms. There will be particular emphasis on practicing acceptance-based exposure. The protocol is available for free online and is currently in use in several settings worldwide. Through this workshop our intent is to increase availability of this evidence-based approach for individuals who struggle with social anxiety.

Educational Objectives:
1. Describe and utilize an evidence-based group protocol for social anxiety delivered in person and virtually.
2. Implement acceptance-based exposure in virtual and in-person groups.
3. Implement improv-based experiential exercises with a self-compassion focus in virtual and in-person groups.

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Friday Afternoon 3:00 PM

125. Report from the ACBS Strategic Pillar for Competency and Dissemination
Panel (3:00 PM - 4:15 PM)
Components: *Literature review, Original data, Strategic planning*
Categories: Dissemination or global health strategies, Supervision and training, Training, Implementation, Competency
Target Audience: Beginner, Intermediate, Advanced

Raul Manzione, M.Sc., Paradigma Center of Behavioral Sciences
Alycia Zink, Ph.D., Department of Veterans Affairs
Sean Wright, M.A., M.S., LMHC, Lutheran Community Services Northwest
Giovambattista Presti, M.D., Ph.D., University of Enna Kore
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

Dissemination of evidence-informed CBS principles requires that clinicians, trainers, and other professionals implement competency based practices. Thus assessing, teaching, and learning competency-based principles is paramount for quality training and application. .The ACBS Board commissioned Competency and Dissemination Strategic Pillar was created in the Fall of 2019 with the goal of supporting the ACBS community in developing and refining the science guiding best competency-based practices in training, measurement, application and dissemination of CBS clinical interventions. The panelists will provide the outline of the strategic pillar's literature review and report from 2019 to the present date. Specific recommendations will be reviewed along with future directions in the context of further development and refinement of CBS competency and dissemination implementation strategies. The audience will be invited to discuss the implications of the work of the Competency Dissemination Strategic Pillar for practice, training, and dissemination efforts.

Educational Objectives:
1. Describe the main findings concerning competency training and assessment found by the Strategic Pillar.
2. Critically reflect on implications for training to competency and maintaining competency in practice.
3. Describe how to cultivate a commitment to the application of evidence to training and dissemination activities.

Saturday Afternoon Plenary 4:30 PM

126. Sources of Behavior and Experience: Ontological/Phenomenological Perspectives on Clinical Practice
Plenary (4:30 PM - 5:30 PM)
Components: *Conceptual analysis*
Categories: Clinical intervention development or outcomes, Theory and philosophical foundations,
Target Audience: Beginner, Intermediate, Advanced

Patrick Friman, Ph.D., APBB, Boys Town/ University of Nebraska School of Medicine
Introduced by: Kelly Wilson, Ph.D., University of Mississippi

This talk will assert that human behavior (and experience) has sources and causes and that these are distinct. Most educational and clinical efforts focus on causes and thus this talk will focus on sources. And it will argue that a person's points of view about the circumstances of their life are the source of their experience of, and behavior toward, those circumstances. In other words, humans respond to the world in accord with how the world occurs for them and not how it objectively is. Although a topic for another talk, it bears mention that it may be impossible to perceive the world in a purely objective fashion. In any event, it would seem prudent to add interventions derived from focus on sources of behavior to the vast number of extant interventions derived from focus on causes. There are two significant obstacles to overcome, however. First, people are often unaware they have a point of view or are vague on details if they do. Second, due to the influence of the architects of the educational system in the Western Hemisphere (i.e., Plato, Aristotle, and Socrates) there is a profound commitment to being right about

one's opinions, beliefs, assumptions or more generally, points of view. Thus, people are very resistant to giving them up or even modifying them. This talk will elaborate on points of view as sources of behavior and discuss methods for increasing flexibility with respect to them. It will end with my own point of view on clinicians and clinical practice.

Educational Objectives:
1. Describe the essence of the educational system in the industrialized western hemisphere.
2. Describe the influence of Plato, Socrates, and Aristotle on the educational (and cultural) systems in the industrialized western hemisphere.
3. Describe an alternative to the primary life goals yielded by the philosophies of Plato, Aristotle, and Socrates.

The sessions below in blue will be streamed live to our virtual audience. The recordings (video, Powerpoint, and audio) will be captured, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

Sunday, June 19 (all times PDT)

Sunday Morning 9:00 AM

139. An Introduction to Polyvagal-informed Acceptance and Commitment Therapy (PIACT)
Workshop (9:00 AM - 10:30 AM)
Components: *Case presentation, Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Trauma, Polyvagal Theory, Polyvagal-informed practice, Autonomic Nervous System
Target Audience: Beginner, Intermediate

Aisling Leonard-Curtin, M.Sc., C.Pyschol., Ps.S.I., ACT Now Purposeful Living
Amy Murrell, Ph.D., Murrell Psychological Services, LLC

Polyvagal theory provides an updated account of the autonomic nervous system suggesting that we go into three predictable states; dorsal vagal (flop and drop), sympathetic (flight-or-flight) and ventral vagal (safe and connected). Polyvagal-informed acceptance and commitment therapy (PIACT) involves delivering functional contextually sensitive interventions that encompass an awareness of the autonomic nervous system. When practitioners and clients can map, track and shape their nervous systems, they can more easily identify what ACT skills and practices will be more or less helpful for them at a particular time. Learning to consciously bring more cues of safety into our therapeutic interactions and helping clients to consciously connect to cues of safety outside the therapeutic context may help with the sustainability and generalisation of values-guided action. Criticisms to polyvagal theory will be briefly addressed. The core training will encompass the ACT principle of 'let your experience be your guide, rather than your mind' as you will get the opportunity to experience PIACT first hand learn about the practical application of PIACT by two peer-reviewed ACT trainers.

Educational Objectives:
1. Demonstrate how to map own autonomic nervous system in an ACT-consistent way to help you identify your internal world as well as your actions/inactions when in dorsal vagal, sympathetic and ventral vagal states.
2. Assess when and how clients are hijacked by a survival state of either dorsal vagal (flop and drop) or sympathetic (flight-or-flight).
3. Describe how polyvagal theory gives additional functional contextual information that can help ACT practitioners to respond more effectively to clients in the moment.

140. The Differential Impact of Elements of Acceptance and Mindfulness on Mental and Physical Health
Symposium (9:00 AM - 10:30 AM)
Components: *Didactic presentation*
Categories: Clinical intervention development or outcomes, Theory and philosophical foundations, Chronic Pain, Acceptance and Mindfulness
Target Audience: Beginner, Intermediate

Chair: Ashley Eddy, M.S., Pacific University
Discussant: Melissa Pielech, Ph.D., Brown University
Josh Kaplan, Ph.D., Oregon Health and Science University
Alicia Vasquez, M.S., Pacific University
Akeesha Simmons, M.A., Pacific University, School of Graduate Psychology
Nicole McCullough, EdS, Pacific University

As a result of the global COVID-19 pandemic, rates of mental and physical health concerns and chronic pain have reached historically high levels (Usher, Durkin, Bhullar, 2020; Wright et al., 2020). Elements of dispositional mindfulness and acceptance have been shown to help buffer the negative impact of stress on health (Mesmer Magnus et al., 2017). In this symposium we present findings from cross-sectional studies exploring the protective impact of mindfulness and acceptance in four distinct populations (police officers,

The sessions below in blue will be streamed live to our virtual audience. The recordings (video, Powerpoint, and audio) will be captured, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

older adults, chronic pain patients, and a large US census-matched sample) and examine the influence of third variable interactions on factors of health and pain. The results across each study suggest dispositional mindfulness and acceptance can mitigate the impact of stress on negative health outcomes in unique ways. Findings suggest that contemplative and third-wave approaches may serve as protective factors against the psychological and physical implications of stress which may, in turn, be valuable mechanisms for coping during these unprecedented times.

- Mindful Nonreactivity Moderates the Relationship between Chronic Stress and Pain Interference in Law Enforcement Officers

    Nicole McCullough, EdS, Pacific University
    Ashley Eddy, M.S., Pacific University
    Dana Dharmakaya Colgan, Ph.D., Oregon Health and Science University
    Michael Christopher, Ph.D., Pacific University

    Law enforcement officers (LEOs) experience high levels of chronic stress and pain, and therefore are a unique population to study potential mitigating impacts of cognitive and affective reactivity on stress–pain relationships (Ramstrand et. al., 2012). This knowledge can promote officer wellness, enhance organization performance, and improve policing at a community level. The aim of the current study was to examine the moderating role of mindful nonreactivity on the relationship between chronic stress and pain interference in LEOs (n = 60). Regression analyses were used to evaluate whether chronic stress predicted pain interference, and to compute an estimate of the interaction effect of chronic stress and mindful nonreactivity on pain interference. Results indicated that mindful nonreactivity mitigates the harmful effects of stress on pain interference ($F(3,55) = 5.29$, $p = .003$, $R2 = .47$). Among individuals with low levels of mindful nonreactivity, chronic stress significantly predicted pain interference; however, for individuals with greater levels of mindful nonreactivity, chronic stress did not predict pain interference. Clinical and research implications will be discussed.

- The Role of Interoceptive Awareness on Sleep Disturbance and Pain Interference in a Chronic Pain Population

    Akeesha Simmons, M.A., Pacific University
    Alicia Vasquez, M.S., Pacific University
    Lauren Siegel, M.S., Pacific University
    Dana Dharmakaya Colgan, Ph.D., Oregon Health and Science University

    Sleep disturbance may contribute to the development and maintenance of chronic pain (Anderson et al., 2018). Interoceptive awareness refers to how one attends to, appraises, and responds to bodily sensations (Craig, 2002) and may be an underlying mechanism in this relationship (Wei &Van Someren, 2020). In a cross-sectional study, online surveys (PROMIS 29; Multidimensional Assessment of Interoceptive Awareness-2) were administered to 301 individuals with chronic pain. The primary aim was to evaluate a mediational pathway through which sleep disturbance predicts increased pain interference via interoceptive awareness. Results indicated interoceptive awareness partially explained the relationship between sleep disturbance and pain interference (95% bootstrap CI = 0.04 to 0.38). Increased sleep disturbance was related to decreased interoceptive awareness ($b = -1.35$, $SE = 0.49$, $p < .01$), which in turn was related to increased pain interference, ($b = -0.14$, $SE = .03$, $p < .01$). Future longitudinal research should assess the role of Interoceptive awareness and sleep quality in chronic pain populations.

- Relative Impact of Mindfulness, Self-compassion, and Psychological Flexibility on Positive and Negative Aspects of Psychological Health

    Ashley Eddy, M.S., Pacific University
    Alicia Vasquez, M.S., Pacific University
    Jenna Flowers, M.S., Pacific University

    Third-wave behavioral approaches emphasize function over form and utilize techniques to target processes of experiential avoidance and cognitive fusion, allowing individuals to focus on living in accordance with their values (Hayes, 2016). Several third-wave underlying factors common to these strategies may account for decreasing symptomology while improving mental health outcomes (Woodruff et al., 2014). The current study aimed to evaluate the relative contribution of three third-wave components (mindfulness, psychological flexibility, and self-compassion) in predicting positive and negative mental health outcomes (depression, anxiety, stress, negative affect (NA), resilience, satisfaction with life (SWL), and positive affect (PA) in a U.S. census-matched sample (n = 584). A series of hierarchical linear regressions indicated self-compassion was the strongest predictor of resilience, PA, and SWL (all p's < .05), whereas mindfulness was the strongest predictor of depression, anxiety, stress, and

NA (all p's < .05). Findings suggest different elements of third-wave interventions may uniquely contribute to factors of mental health and provide continued support for acceptance-based approaches.

- The Synergistic Impact of Acceptance and Self-efficacy on Health Perception among Older Adults
  Josh Kaplan, Ph.D., Oregon Health and Science University
  Jenna Flowers. M.S., Pacific University
  Michael Christopher PhD, Pacific University

Health perception is the subjective rating and knowledge of health status (Tederko et al., 2017; Wilson & Cleary, 1995) and predicts mortality (Castillo-Andres, 2016) and quality of life (Schmidt, 2012). Dispositional mindfulness predicts improved physical functioning (Brooks et al., 2011) and general perceptions of health (Roberts & Danoff-Burg, 2010). Relatedly, mindfulness training improves self-efficacy (Taylor et al., 2020), and mindfulness and self-efficacy predict psychological health (Pan et al., 2019). Self-efficacy mediates relationships between mindfulness and emotional regulation (Luberto et al., 2014) and anxiety (Fallah, 2016). However, no known study has examined self-efficacy as a mediator of the relationship between mindful acceptance and health perceptions. In a cross-sectional sample of older adults (n = 134), results indicate that self-efficacy fully mediated the relationship between mindful acceptance and health perceptions. Mindful acceptance predicted self-efficacy (b = .18, SE = .06, p = .002), which predicted health perceptions (b = .83, SE = .33, p = .012). The relationship between mindful acceptance and health perceptions was nonsignificant in the full model (p = .11), indicating a full mediation. Bias-corrected bootstrap mediation analysis did not contain zero [95% CI; .026, .39], providing evidence for mediation.

Educational Objectives:
1. Describe the role of contemplative practices in the relationship between chronic pain and health.
2. Compare chronic pain-related consequences among various populations including law enforcement officers, older adults, and general chronic pain population.
3. Explain the distinction between moderation and mediation analyses in cross-sectional health data across populations.

Sunday Morning 10:45 AM

151. State of the ACT: Challenges and opportunities in evaluating ACT's status as an empirically supported treatment: Hawai'i Chapter Sponsored
Panel (10:45 AM - 12:15 PM)
Components: *Conceptual analysis*
Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, Meta analysis, empirically supported treatments
Target Audience: Intermediate, Advanced

Chair: Samuel Spencer, M.A., University of Hawaii, Manoa
Nicholas Borgogna, Ph.D., Texas Tech University
Brandon Gaudiano, Ph.D., Brown University & Butler Hospital
Lilian Dindo, Ph.D., Baylor College of Medicine
Andrew Gloster, Ph.D., Universität Basel
Michael Levin, Ph.D., Utah State University

As of December 2021, ACBS lists 860 randomized controlled trials (RCTs) supporting ACT's efficacy and effectiveness. ACT has also been recognized by major U.S. and international healthcare organizations as an evidence-based treatment for several specific mental and behavioral health concerns. However, ACT's relatively recent emergence compared to other interventions, along with conceptual differences between treatment approaches, has resulted in some challenges and controversies in evaluating ACT's empirical status (Atkins et al., 2017; Ost, 2008, 2014). As the process-based therapy movement gains traction, it is imperative that the systematic evaluation of ACT research keeps pace. In this panel discussion, leading figures within ACT intervention development and evaluation discuss a number of questions, including: (a) as methodological and statistical practices advance, how do we evaluate the rigor of research/RCTs examining ACT; (b) how can we optimally aggregate results of individual studies examining diverse processes and outcomes of ACT for a wide range of both psychopathological and salutary issues; and (c) how can we increase the pragmatic utility of ACT research/RCTs and increase focus on dissemination and implementation?

Educational Objectives:

1. Describe key developments within the evaluation of empirical research supporting ACT's efficacy and effectiveness.
2. Demonstrate knowledge of how best to aggregate results of diverse ACT outcome and process studies as the field moves into the process-based therapy (PBT) era.
3. Apply knowledge of methodological and statistical advances in applied ACT research to the demarcation of ACT's status as an empirically-supported treatment within healthcare organizations and the field of clinical psychology.

152. ACT for couples and family issues: digging pervasive behavior patterns
Workshop (10:45 AM - 12:15 PM)
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play, Strategic planning*
Categories: Clinical intervention development or outcomes, Processes of change, Couples, Family
Target Audience: Intermediate

Michaele Saban Bernauer, M.A., Clinics Hospital, Faculty of Medicine, University of São Paulo
Mara Lins, Ph.D., FACEFI (Faculty of Psychology CEFI-Center for Family and Individual Studies)

The family context is the environment that the person spends the first and usually several years of his/her life. In this context, behavioral learning occurs at different levels: modeling, shaping, through language and relationships that are learned repetitively in these contexts, in addition to genetic and epigenetic sensitivities and predispositions. Patterns of psychological inflexibility and experiential avoidance are often reproduced in these contexts across generations. In this workshop we propose experiential exercises to promote the observation of these generally pervasive patterns of experiential avoidance, promoting awareness, perspective taking and expanding the behavioral repertoire.

Educational Objectives:
1. Demonstrate clinical skills in the management of extensive patterns of behavior and understanding of the family context.
2. Conduct the process of helping the client to interact with his/her behavior in a flexible way.
3. Demonstrate how to lead exposure-based interventions adapted to an acceptance-based model in couple and family therapy.

On Demand

Workshops

"I'll do it later": Overcoming procrastination with ACT
   Workshop
Components: *Didactic presentation, Experiential exercises, Literature review*
Categories: Clinical intervention development or outcomes, Academics or education, Procrastination
Target Audience: Beginner, Intermediate

Frederick Dionne, Ph.D., Université du Québec à Trois-Rivières

Not living up to our values might be a matter of procrastination. Procrastination is an irrational tendency to delay tasks to the point of discomfort. One out of five adults suffer from procrastination. Almost 50% of students procrastinate consistently and problematically (Steel, 2007). Procrastination can be seen as experiential avoidance strategy or self-regulatory failure. Consequently, the ACT psychological flexibility model is very useful for the understanding of procrastination (e.g., Gagnon, Dionne, & Pychyl, 2016). Research suggests that ACT can be seen as an effective intervention for this pervasive problem (e.g., Wang et al., 2017). This workshop presents an ACT conceptual framework applied to the understanding of procrastination, and several tools to help professionals better intervene with people who procrastinate.

Educational Objectives:
   1. Demonstrate and experiment several simple and concrete techniques to help students engage more fully in their academic tasks.
   2. Explain procrastination within the ACT model.
   3. Give examples of ACT literature on procrastination

ACT as a Social-Justice & Intersectionality-Oriented Treatment Modality for Diverse Clients
   Workshop
Components: *Didactic presentation, Experiential exercises, Literature review*
Categories: Social justice / equity / diversity, Clinical intervention development or outcomes, ACT interventions
Target Audience: Beginner, Intermediate

Bianca Augustine, Ph.D., Upper Iowa University
Jasmine Griffith, M.A., Old Dominion University

In today's sociopolitical climate, the need for socially just and intersectionality-oriented treatment approaches is of utmost importance in the counseling profession. In this interactive workshop, the presenters will discuss the use of Acceptance and Commitment Therapy (ACT) as a liberating and empowering treatment modality for clients identifying within minoritized populations. This workshop will highlight the unique ways in which ACT can be employed to facilitate resilience and healing by presenting an overview of ACT as a socially just modality, including specific ACT interventions that promote the healing and empowerment of culturally diverse individuals. Attendees will also receive a list of resources to facilitate their ability to apply ACT to the treatment of diverse, oppressed, and under-served clients.

Educational Objectives:
   1. Demonstrate an enhanced understanding of Acceptance and Commitment Therapy as a socially just, intersectionality-oriented, growth-based, and trauma-informed approach to treating culturally diverse clients.
   2. Apply specific ACT interventions to facilitate growth, resilience, and healing among culturally diverse & historically oppressed clients.
   3. Demonstrate their understanding of considerations related to the unique challenges facing oppressed & culturally diverse clients and ways in which ACT can address these challenges.

Putting ACT into ACTion: Using ACT to Promote Resilience in Black Communities
Workshop
Components: *Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Social justice / equity / diversity, Resilience
Target Audience: Beginner

Bianca Augustine, Ph.D., Upper Iowa University
Natese Dockery, M.S., The Ohio State University

Black individuals are often subjected to various forms of racialized (or race-based) trauma, in the form of discrimination, microaggressions, and inequality, among other byproducts of colonialism and Eurocentrism. In this workshop, Dr. Bianca R. Augustine and Ms. Natese Dockery will present ways in which Acceptance and Commitment Therapy (ACT) can be used to foster Black individuals' healing, resilience, and post-traumatic growth during and following experiences of race-based trauma. This workshop will include interactive discussions and activities to facilitate healing and promote the development of values-based self-care plans for attendees while demonstrating how these activities can be used as therapeutic interventions.

Educational Objectives:
1. Implement specific exercises based on the Acceptance and Commitment Therapy hexaflex to foster resilience in Black individuals impacted by race-based trauma.
2. Describe ways in which Acceptance & Commitment Therapy can be implemented to foster post-traumatic growth.
3. Apply the principles of Acceptance & Commitment Therapy to develop a resilience-based self-care plan.

RFT is in our DNA - stuff clinicians want to know: Australia & New Zealand Chapter Sponsored
Workshop
Components: *Case presentation, Conceptual analysis, Experiential exercises*
Categories: RFT / RGB / language, Clinical intervention development or outcomes, DNA-v and RFT with OCD case conceptualisation
Target Audience: Intermediate

Tim McLauchlan, Master of Clinical Psychology, Peer-reviewed ACT trainer (private practice)

This workshop will cover the stuff clinicians want to know about Relational Frame Theory (RFT) when working with clients.
We will highlight how recent developments in RFT (HDML/ROE) are in a relation of 'awesomeness' with the DNA-v developmental model of ACT.
Developments in RFT, namely the process of Relating, Orienting, and Evoking (ROE) will be introduced experientially (through metaphors, a poem, and even a song!).
The workshop will then use a case example of a young person with OCD, with case conceptualisation from both the DNA-v model and the ROE as the unit of analysis.
Key References:
Barnes-Holmes, D., Barnes-Holmes, Y., & McEnteggart, C. (2020). Updating RFT (more field than frame) and its implications for process-based therapy. The Psychological Record, 70, 605-624.
The Thriving Adolescent: Using Acceptance and Commitment Therapy and Positive Psychology to Help Teens Manage Emotions, Achieve Goals, and Build Connection 2016 by Hayes, Louise, and Ciarrchi, Joseph.

Educational Objectives:
1. Explain how using DNA-v and RFT (HDML/ROE) together supports clinical work that is both flexible and precise.
2. Describe the process of Relating, Orienting, and Evoking (ROE).
3. Apply RFT (HDML/ROE) when conducting a functional analysis in clinical work.

The sessions below in orange will be available On Demand to our virtual audience from June 7 – September 15, 2022.

The Essentials of Treating Perfectionism: Where to Focus When Time is Short
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Processes of change, Perfectionism
Target Audience: Beginner, Intermediate

Jennifer Kemp, MPsych(Clinical), Adelaide Behaviour Therapy

Perfectionism is a growing societal problem that contributes to human suffering and mental health problems in people of all ages (Curran & Hill, 2019; Egan, Wade, & Shafran, 2012). Fortunately, unhelpful perfectionistic processes can be addressed using a functional contextual behavioral approach that alleviates suffering and builds self-compassion (Ong, et al., 2019; Ong, et al., 2019). Yet if time is limited (and it always is) where do you start?
Opening with an overview of perfectionism from a functional contextual behavioral perspective, participants will look beyond the stereotyped 'overachiever' and learn to recognise when unhelpful perfectionistic processes lead to disengagement from living a meaningful life.
The presenter will provide four treatment approaches that have maximum impact, helping people to:
- Unhook from avoidant loops and towards what's important in the presence of fear and self-criticism,
- No longer be defined by rigid, unattainable standards through flexible 'self-ing'
- Respond to self-criticism in ways that move towards what's important through willingness,
- Create lasting, imperfect personal change through increasing the frequency of desired behaviors over time.

Educational Objectives:
1. Describe a functional contextual behavioral model of perfectionism.
2. Identify different presentations of perfectionism in their clients.
3. Apply CBS approaches to build psychological flexibility and self-compassion in people and help them move towards a more meaningful life.

Do as I do: novel parenting interventions to impact parents' psychological inflexibility and improve child outcomes
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Supervision and training, Parenting, Family
Target Audience: Beginner, Intermediate, Advanced

Kerry N. Makin-Byrd, Ph.D., Cancer Support: Psychology & Social Work | Capital & Coast District Health Board

Parents' psychological inflexibility can be a significant barrier to clinical engagement and progress. This workshop teaches parenting-specific exercises to address the three core flexibility processes: (1) awareness of the here and now, (2) openness to what is, and (3) engagement in values-consistent behavior. Specifically, in the awareness domain, learners will practice an adapted mindful eating exercise and an "self as child" exercise to illustrate perspective taking and self as context. In the openness domain, attendees will learn both a brief defusion exercise titled "picking from a menu" and a "stressful morning" exercise to facilitate compassion and flexibility. Finally, in the active-engagement domain, participants will practice both a guided meditation of their child writing the parent's obituary and a self compassion letter writing exercise. (citations redacted to fit word limits)
All exercises reviewed in the workshop can be used in individual therapy, group settings, or within briefer consultation or primary care interactions. Exercises will be taught experientially and the workshop will provide ample time for personal reflection, discussion, and exercise adaptation for cultural or clinical considerations.

Educational Objectives:
1. Explain multilevel and contextual factors that impact assessment and treatment of parents and families.
2. Describe psychologically inflexible parenting behaviors using a contextual behavioral framework.
3. Implement a parenting awareness, openness, or active-engagement exercise.

Managing loneliness with fictional surrogates
Workshop
Components: *Case presentation, Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, PTSD
Target Audience: Beginner

Janina Scarlet, Ph.D., Superhero Therapy

Scientists are calling loneliness the new epidemic. Worldwide loneliness rates have skyrocketed prior to the COVID pandemic and continue to do so. In addition to the global spikes in suicide rates, loneliness has been found to negatively impact the human immune and cardiovascular system in a similar way as smoking a pack of cigarettes per day or daily alcohol abuse. Some dub loneliness as "The New Smoking."
Many trauma survivors struggle with feelings of loneliness and disconnection and, as a result, struggle to confide in other people. However, many trauma survivors find an emotional connection in fictional characters, such as Batman, Wonder Woman, Harry Potter, and Avengers. For some, these fictional characters might become surrogate friends or support groups. This talk will focus on how we can help clients learn to manage their feelings of loneliness and cultivate meaningful interpersonal connections, using fiction and narrative writing exercises as vehicles for fostering connection and posttraumatic growth. No prior experience with superheroes necessary.
Capes are optional.

Educational Objectives:
1. Describe the detrimental impacts of loneliness on mental and physical health.
2. Describe the benefits of meaningful social connection on mental and physical health.
3. Describe how to incorporate pop culture examples into treatment in order to help clients to manage their feelings of loneliness.

Panels

Devotion or Decoration?: Culturally Sensitive Use of Spiritual Terminology and Iconography in Applied CBS Work
Panel
Components: *Conceptual analysis*
Categories: Social justice / equity / diversity, Theory and philosophical foundations, Buddhism
Target Audience: Beginner, Intermediate, Advanced

Chair: Mike Guinasso, B.A., California School of Professional Psychology - San Francisco
Chia-Ying Chou, Ph.D., San Francisco Center for Compassion-Focused Therapies
Troy DuFrene, M.A., BCBA, San Francisco Center for Compassion-Focused Therapies
Maria-Elena Lukeides, D. Psych, The Wellness Foundation
Akihiko Masuda, Ph.D., University of Hawaii, Manoa
Debesh Mallik, Ph.D., Pacific University

For many, images of Buddha statues, raked sand gardens, and prayer flags evoke feelings of peacefulness, serenity, and meditative calm. And few CBS practitioners will today be unfamiliar with the term "mindfulness," and may use it regularly in their work. But terms and images that may evoke a certain ambience in a waiting room or on PowerPoint slides for one may be culturally or devotionally meaningful to another. And concepts that can be operationalized and empirically studied in some contexts may have different meanings and implications for spiritual and religious practice in others. How can and should we proceed when incorporating these terms, symbols, and ideas into our work in CBS? This panel brings together individuals who are culturally and/or practice-connected to various traditions of Buddhism and Hinduism who are also CBS professionals to explore this matter. Participants will leave the conversation with a better understanding of the issue of culturally sensitive and non-appropriative use of these terms, symbols, and concepts and will help to continue the conversation in the course of their professional work.

Educational Objectives:

The sessions below in orange will be available On Demand to our virtual audience from June 7 – September 15, 2022.

1. Describe culturally or practice-connected perspectives on Dharmic spiritual traditions (Buddhism and Hinduism) with respect to the use of religious concepts in the context of psychotherapy and behavior science.
2. Identify preliminary guidelines for the sensitive, non-appropriative, and responsibly comprehensive use of spiritual concepts, terms, and images to support and enrich psychotherapy and behavior science.
3. Demonstrate ways to foster self-awareness and personal responsibility when making use of spiritual concepts, terminology, and images that may be of religious significance to others.

International Perspectives on CBS Competency and Dissemination
Panel
Components: *Conceptual analysis, Strategic planning*
Categories: Dissemination or global health strategies, Supervision and training, Competency
Target Audience: Beginner, Intermediate

Chair: Sean Wright, M.A., M.S., LMHC, Lutheran Community Services Northwest
Carmen Luciano, Ph.D., University of Almería, Spain
Zhuohong Zhu, M Med, Ph.D., National civil servant mental health Application Research Center
Amanda Muñoz-Martinez, Ph.D., Universidad de los Andes, Colombia
Steven Hayes, Ph.D., University of Nevada, Reno
Hannah Bockarie, B.A., commit and act foundation Sierra Leone

Dissemination of evidence-informed CBS principles and technologies, in the service of addressing human suffering effectively on an individual, community, and global scale, requires that clinicians and trainers learn and teach these principles with competence. In 2019, the ACBS Board commissioned a Competency and Dissemination Strategic Pillar to support the ACBS community by developing guidance in best practices for competency-based practice. This panel will advance the mission of the Strategic Pillar by providing international perspectives on the issue of competency and dissemination of CBS-consistent principles and technologies. Panelists will describe the features of their local training contexts, identify what is needed to support competency-based practice in these contexts, and identify barriers and facilitators to wider dissemination of CBS-consistent activities. Panelists will reflect on commonalities and differences across international contexts.
Educational Objectives:
1. Describe the current state of competency-based practice of CBS in multiple international contexts.
2. Identify one shared training need and one unique training need as CBS practices are disseminated globally.
3. Discuss the training practices in their local context to identify strengths in supporting competency based practice and opportunities for further development.

Symposia

ACT and CBS in Correctional and Forensic Settings: Forensic and Corrections SIG
Symposium
Components: *Original data*
Categories: Clinical intervention development or outcomes, Supervision and training, Corrections, Criminal Justice, Forensics, Criminal Behavior
Target Audience: Beginner, Intermediate, Advanced

Chair: Amie Zarling, Ph.D., Iowa State University
Discussant: Levin Schwartz, MSW, Franklin County Sheriff's Office
Roxann Scheffert, M.A., Iowa State University
Kassandra Sauder, M.A., Centre for Addiction and Mental Health

A small but growing community of researchers and practitioners are using ACT and other CBS-informed approaches in correctional and forensic settings. Justice-involved individuals are often high risk for repeat criminal behavior, mental health problems, significant relationship distress, low social support, and substance abuse. The presenters in this symposium will introduce cutting edge research on the implementation of ACT to address the challenges experienced by this population. Data will be

presented from various correctional populations and settings, including men convicted of domestic assault, hard-to-serve forensic inpatient populations, and individuals just released from incarceration. We will also outline how ACT fits well with evidence-based principles of effective correctional interventions, such as risk-needs-responsivity and core correctional practices. Finally, data will be presented on how ACT can facilitate training correctional staff and assist in helping them navigate this difficult role of both law enforcer and facilitator of positive behavior change. We will identify future work needed to promote the fidelity and sustainability of ACT-based programs in correctional settings.

- A Randomized Clinical Trial of Acceptance and Commitment Therapy and the Duluth Model for Men Court-Mandated to a Domestic Violence Program
    Amie Zarling, Iowa State University
    Dan Russell, Iowa State University

    This is the first randomized controlled trial to compare Acceptance and Commitment Therapy (ACT) with the Duluth Model curriculum, which took place in community-based corrections for men convicted of domestic violence. The Duluth Model curriculum is an educational approach grounded in feminist theory that focuses on changing attitudes toward women and unlearning power and control motivations. This study included 338 men who were court-mandated to complete a domestic violence program after being convicted of assault against a female partner. Outcomes included criminal justice data (domestic violence charges, other violent charges, and non-violent charges) incurred during the one year following program drop-out or completion, and victim reports of intimate partner violence (IPV; aggression, controlling behaviors, and stalking/harassment). In intent-to-treat comparisons to Duluth, ACT participants did not show a difference in domestic assault charges at one year post-treatment, but acquired significantly fewer violent charges and non-violent charges compared to Duluth participants. Data from victims indicated that victims of ACT participants reported significantly fewer IPV behaviors than victims of Duluth participants at one year post-treatment.

- Training Correctional Staff in ACT
    Roxann Scheffert, Iowa State University
    Amie Zarling, Iowa State University

    In this presentation, we describe how a research-practitioner collaboration has led to statewide implementation of ACT-based programs within Iowa's correctional system. We outline how ACT fits well with principles of effective correctional interventions, such as risk-needs-responsivity and core correctional practices. We contend that ACT is also well-suited to address the challenges inherent in correctional practice, such as establishing an effective working alliance with clients and navigating dual roles of control and support. The barriers to implementation, such as staff buy-in, correctional policies, and training are explored. Data on training correctional staff are presented.

- Public Safety Through Treatment: A new Direction for County Corrections
    Levin Schwartz, Franklin County Sheriff's Office

    The political context in the United States continues to lean toward the over incarceration of people struggling with addiction and mental health; usually sending them to facilities ill-equipped to intervene effectively, keeping people stuck in disenfranchised positions upon release. Beginning in 2013, the Franklin County Sheriff's Office (MA, USA) began using contextual behavioral principles to transform a correctional environment into a locked treatment facility. At the time, the assessment data indicated that 86% of individuals were high risk for recidivism. The proportion of clients who self-report heroin/opioids as their primary problem steadily rose from 30% (2014) to 52% (2021). Most clients had severe childhood trauma, and about 85% met diagnostic criteria for co-occurring disorders. The data was clear: it was not enough to offer a program to a cadre of individuals, FCSO needed to transform the entire system to all residents in the facility - while maintaining individual's agency to opt-out. This presentation will outline the major findings of a recidivism study (2011-2018), which followed all sentenced clients who left FCSO for three years in the state of MA. The findings suggest that contextual behavioral science as implemented in FCSO helped to reduce reincarceration in a jail or prison, conviction of a new crime, and/or a violation of conditions of probation from 53% to 35% over three years; with a one year recidivism rate dropping from 23.7% to 14.2%.

- Experience ACT: A Forensic Inpatient Experiential Group
    Kassandra Sauder, Centre for Addiction and Mental Health

    Presentation Abstract: The Experience ACT group was developed for the Centre for Addiction and Mental Health's (CAMH) Forensic Division inpatient units. This group's primary treatment target and goal is to foster ACT-informed therapeutic skills for hard-to-serve patients using only the experiential components of

ACT. The modules are designed and delivered in a highly accessible, experiential and pragmatic format to support the rehabilitation and recovery of inpatients who have significant cognitive, developmental, and/or social limitations. The group has been successful in not only providing an increase in validated therapeutic programming for the target population, it has also improved overall DUNDRUM-3 scores in participants. Annual individual DUNDRUM-3 scores improved up to 25% in one participant since and overall attendance in any on-unit program has increased by 45.16% as of November 2021. Initial results of the group show promise for use of only the experiential components of ACT to support rehabilitation and recovery for hard-to-serve forensic inpatient populations.

Educational Objectives:
1. Describe current uses of ACT and CBS in correctional and forensic settings.
2. Identify how ACT fits with evidence-based principles of effective correctional interventions.
3. Demonstrate awareness of future research needed related to ACT/CBS in corrections and with justice-involved clients.

Innovations in Technology-supported ACT Interventions and Research: ACTing with Technology SIG Sponsored
Symposium
Components: *Original data*
Categories: Mobile or digital technology, Clinical intervention development or outcomes, Technology-supported ACT
Target Audience: Beginner, Intermediate

Discussant: Roger Vilardaga, Ph.D., Duke University
Korena Klimczak, B.S., Utah State University
Francesca Brandolin, M.A., University of Jyväskylä
Shaun Mehew, CBT, ieso
Pinelopi Konstantinou, B.Sc., M.Sc., University of Cyprus
Simone Gorinelli, M.A., University of Jyväskylä

Modern advances in technology offer unique mediums and tools regarding both the delivery of ACT, as well as research methods used to study ACT. Telehealth-delivered workshops, artificial intelligence-supported therapy, virtual reality interventions, self-guided web-based programs, and wearables as a research tool offering biophysiological data are just a few examples of technology that have facilitated new opportunities in our field. As a result, these interventions and tools allow us to better increase the accessibility of ACT, enhance the effectiveness of ACT, and develop a multi-dimensional understanding of ACT processes. The current symposium will showcase research examining or utilizing the previously listed technology-supported ACT interventions and research tools, with a diverse range of target populations and clinical issues including international students, individuals with type-II diabetes, social anxiety, general wellbeing, and physical pain.

- Examining the effectiveness and acceptability of a group-based ACT intervention when delivered face-to-face or online
    Francesca Brandolin, M.A., University of Jyväskylä
    Päivi Lappalainen, Ph.D., University of Jyväskylä
    Simone Gorinelli, M.A., University of Jyväskylä
    Joona Muotka, University of Jyväskylä
    Raimo Lappalainen, Ph.D., University of Jyväskylä

    Studies have shown that international students are at increased risk of experiencing poor mental health. In this study, we compared a low-threshold acceptance and commitment therapy (ACT) group workshop delivered in two different formats. International students (n=101) participated in five group meetings face to face (n=53) or online using the videoconferencing application zoom (n=48), as the workshop was transferred online after the outbreak of the COVID-19 pandemic. Symptom and process measures indicated close to equivalent, positive changes in both groups (e.g., PSS-10, face-to-face; dw=0.94, online dw=0.54; AFQ-Y, face-to-face, dw=0.84, online dw=0.55), with a slightly larger effect in the face-to-face group. This study suggests that a brief ACT-based group workshop is well received and effective in enhancing the psychological well-being of international students whether delivered face-to-face or online. The design and results of this study will be discussed.

- AI-powered ACT for the treatment of psychological difficulties and behavioural change in individuals with type-II diabetes

Ana Catarino, Ph.D., ieso Digital Health
Ann Hayes, Ph.D., ieso Digital Health
Shaun Mehew, CBT Dip, ieso Digital Health
Andy Blackwell, Ph.D., ieso Digital Health

A total of 101 adult patients with type-II diabetes and co-morbid anxiety and depression disorders (mixed) that met the inclusion criteria for UK IAPT were recruited into a pre-post treatment comparison design. They undertook an online course of live ACT sessions tailored for individuals with type-II diabetes via a messaging platform, with a BABCP qualified CBT therapist. Therapists and the clinical supervision team were provided with AI assisted feedback throughout sessions, including predictive recovery curves. Patients received sessions that targeted specific functional needs related to their presenting conditions, with personalised treatment targets. Results showed a statistically significant improvement on all measures, including the Patient Health Questionnaire (PHQ-9; $p<.001$), the General Anxiety Disorder (GAD-7; $p<.001$), the Patient Activation Measure (PAM; $p<.001$), the Diabetes Distress Scale (DDS; $p<.001$), and the Assessment of Quality of Life (AQoL; $p=.002$). Additionally, participants showed significantly greater outcomes as compared to statistically modelled control groups taken compared with patients treated within the service outside of the study. Specific clinical adaptations that were made to achieve such promising results will be discussed.

- Virtual reality ACT intervention for social and public speaking anxiety of university students
  Simone Gorinelli, M.A., University of Jyväskylä
  Ana Gallego, Ph.D., University of Jyväskylä
  Päivi Lappalainen, Ph.D., University of Jyväskylä
  Raimo Lappalainen, Ph.D., University of Jyväskylä

University students often experience substantial stress when performing in front of other people. Given that stress is a risk factor for general well-being, process-based interventions could be useful for university students. Virtual Reality (VR) technology offers new and flexible ways to provide psychological training. The aim of this study was therefore to examine the effectiveness of a VR intervention based on Acceptance and Commitment Therapy (ACT) and Relational Frame Theory (RFT) principles for social and public speaking anxiety. University students (n = 76) were randomized in intervention (VRACT) or waiting list control group (WLC) and encouraged to follow the VR environment, which combined different types of RFT-based exercises, and apply their skills while immersed in a social VR exposure context. Outcome measures included self-reported social anxiety, well-being, and process measures. After attending three intervention meetings, we observed both a significant decrease in social and communication anxiety (SIAS, db = -0.55; PRCA-24, db = -0.61) and a significant improvement in process measures (CompACT, db = 0.61). We will present the design and results of the study.

- Testing the User Experience and Engagement of a Single Session Web-based ACT Program
  Korena S. Klimczak, B.S., Utah State University
  Michael E. Levin, Ph.D., Utah State University

Web-based self-guided ACT programs are an effective intervention for improving mental health outcomes across a broad range of presenting problems (Thompson et al., 2021). While there is a plethora of research to support changes in outcomes on account of web-based ACT, less is known about how users engage with, experience, and behave in response to these programs (Vilardaga et al., 2018). The present study aims to shed light on these issues by taking a user centered design approach to a single-session ACT program called ACT Guide Lite. A mixed-methods design will be used, in which participants (n = 12) will use ACT Guide Lite while following think-aloud procedures. Questionnaires and post-test interviews will also be implemented. Thematic analysis will be used to identify themes found across user testing and interview transcriptions as well as qualitative feedback, to better understand what internal experiences users have while using web-based ACT, what takeaways users leave a web-based ACT program with, and whether users follow up with behaviors consistent with the aims of the program.

- An experimental comparison of acceptance vs. avoidance in managing acute pain
  Pinelopi Konstantinou, B.Sc., M.Sc., University of Cyprus
  Andria Trigeorgi, M.A., University of Cyprus
  Chryssis Georgiou, Ph.D., University of Cyprus
  Andrew T. Gloster, Ph.D., University of Basel
  Georgia Panayiotou, Ph.D., University of Cyprus
  Maria Karekla, Ph.D., University of Cyprus

Recently, the ACBS Task Force on the Strategies and Tactics of Contextual Behavioral Science Research defined high quality CBS research as: multilevel, process-based, multidimensional, prosocial, pragmatic and highlighted the importance of basic experimental work. Consistent with these guidelines, we

compared acceptance vs. avoidance techniques in a pain-induction experiment (Cold Pressor Task) using physiological (assessed multimodally using stationary and wearable devices), behavioral and verbal measures. Participants were 88 students (M age=21.33; SD=3.87). Participants were randomly assigned to four conditions: (a) Acceptance followed by avoidance instructions; (b) Avoidance followed by acceptance instructions; (c) No instructions followed by acceptance, and (d) No instructions followed by avoidance. Results showed that those receiving acceptance instructions reported lower pain-tolerance than controls at post-experimental phase one, and lower negative affect than both groups at all phases. Acceptance instruction conditions showed lower HR and higher heart rate variability (HRV) than avoidance at post-experimental phase two, and lower skin conductance level (SCL) when assessed via the stationary device. Implications include assessment and detection of mechanisms using different modalities of how individuals manage pain.

Educational Objectives:
1. Discuss various technology-based interventions, including their clinical efficacy and unique contribution to the ACT literature.
2. Explain research methods afforded by and used with ACT technology.
3. Integrate these innovations with broader movements in contextual behavioral science, such the increased synthesis of multiple levels of analysis and focus on pragmatic approaches.

Multifaceted approaches to investigating psychological flexibility: research across contexts
Symposium
Components: *Literature review, Original data*
Categories: Methods/approaches for individual variation, Processes of change, Psychological Flexibility and Inflexibility Research
Target Audience: Beginner, Intermediate, Advanced

Chair: Eric Morris, Ph.D., La Trobe University
Discussant: Lauren Lawson, Ph.D., La Trobe University
Andrew Gioia, SMCP, La robe University
Lisa Mastin-Purcell, La Trobe University
Conor McCloskey, B.Sc., University College Dublin
Alison Stapleton, B.A., University College Dublin
Staci Martin, Ph.D., National Cancer Institute

Psychological flexibility (PF) involves the capacity to be in conscious contact with the present moment and persist with or change behaviour based on whether it aligns with one's personal values (Hayes et al., 2006). Contemporary research in PF should reflect the multidimensional and contextual nature of the construct (e.g., Cherry, Hoeven et al. 2021); using measures of flexibility and inflexibility, and considering variables across levels of analysis (Hayes, Merwin et al. 2021). This symposium will present four studies examining multidimensional approaches to the measurement of PF and how this contributes to the understanding of key processes influencing sleep quality, obsessive-compulsive symptoms, the experience of pain, and values clarity. We discuss considerations in the measurement of PF, methodologies, and tackling the challenge of ergodicity (individual change differing from group-level average change over time) for the development of understanding the psychological flexibility of individuals in context.

- Psychological Flexibility and Emotion Regulation in the Context of Obsessive-Compulsive Behaviours
    Andrew Gioia, La Trobe University
    Eric Morris, La Trobe University

    Psychological flexibility (PF) and emotion regulation (ER) have gained increasing attention for their relationship with obsessive-compulsive (OC) symptoms, however inconsistent inclusion of cognitive constructs, and unidimensional measurement of PF has limited understanding of the relationships. The present study aimed to address these limitations by examining the relationship PF and ER have with OC symptoms whilst including obsessive beliefs, multidimensional measurement of all constructs, and controlling for the effects of depressive symptoms. A community sample of 198 individuals from Australia and New Zealand completed a battery of questionnaires assessing OC symptom dimensions, PF processes and ER. Results suggested Self as Content and Impulse Control had a unique relationship with the Unacceptable Thoughts symptom dimension, and Cognitive Fusion with the Responsibility for Harm dimension. The hypothesis that experiential avoidance would predict unique variance in OC symptom severity was not supported. It is asserted the heterogeneity of OC symptoms requires dimensional

analysis for increased understanding and treatment efficacy. The importance of the inclusion of obsessive beliefs and multidimensional measurement of transdiagnostic constructs in future OCD research is discussed.

- Measuring Clarity of Values and Establishing Clearer Group-to-Individual Generalizability in Psychometric Questionnaires
  Conor McCloskey, University College Dublin
  Alison Stapleton, University College Dublin

  The psychological flexibility model is a six-facet model of wellbeing that accounts for the ability to be open and aware in the present and to engage in actions that are consistent with personal values. One facet of this model is values, which refer to personal qualities that individuals hold in order to guide their goal-oriented behavior. Previous measures based on this model have measured values-directed action but not values clarity, which is the extent to which individuals can articulate and understand their own values. The Values Clarity Questionnaire is a new 8-item questionnaire that measures values clarity. Preliminary findings from this questionnaire will be discussed, along with the issue of ergodicity in questionnaire development.

- Fused to Thoughts and Trying to Sleep. What's the Link Between Psychological Inflexibility Processes, Pre-Sleep Arousal and Sleep Quality?
  Lisa Mastin-Purcell, Swinburne University of Technology
  Amanda Richdale, La Trobe University
  Lauren Lawson, La Trobe University
  Eric Morris, La Trobe University

  Poor sleep can have debilitating effects on physical and mental health. While psychological inflexibility has been linked to a broad range of psychological problems, the link between psychological inflexibility and sleep is not well understood. This study aimed to identify the relationships between different psychological inflexibility processes and sleep quality, and the mediating role of pre-sleep arousal and anxiety. Two path analysis models were tested in a large general population sample (N = 704) with a cross-sectional design. Results showed cognitive fusion, lack of present moment awareness and experiential avoidance, via pre-sleep cognitive and somatic arousal, differentially related to sleep quality and together explained 49% of the variance (Model 1). Cognitive fusion via pre-sleep cognitive arousal had the largest effect. These findings highlight the role of psychological inflexibility, particularly cognitive fusion, in disrupting the de-arousal process needed for healthy sleep and provide preliminary evidence for ACT in treating poor sleep quality.

- Heart-rate Variability in People with Chronic Pain: A Physiological Proxy for Psychological Flexibility?
  Taryn Allen, Ph.D., Pediatric Oncology Branch, National Cancer Institute
  Kari Struemph, PhD, Clinical Research Directorate, Frederick National Laboratory for Cancer Research
  Mary Anne Tamula, MA, Clinical Research Directorate, Frederick National Laboratory for Cancer Research
  Brigitte Widemann, MD, Pediatric Oncology Branch, National Cancer Institute, Bethesda, MD
  Staci Martin, PhD, Pediatric Oncology Branch, National Cancer Institute, Bethesda, MD

  Given the substantial body of work supporting ACT for individuals with chronic pain, recent research has considered whether physiological parameters relate to key processes such as psychological flexibility (PF). Specifically, heart rate variability (HRV) – or the variation in time between consecutive heartbeats – is often lower in people with chronic pain and may be a marker of PF. This study examined HRV before and after an 8-week ACT intervention among 62 people with chronic pain. In addition to pain questionnaires assessing severity, interference, inflexibility, and acceptance, participants underwent a 5-minute resting electrocardiogram (ECG) at baseline and post-intervention as part of a larger randomized controlled trial (ACT vs waitlist).

  Results indicated that HRV improved following the intervention (p<.05). Pre-intervention, HRV was significantly associated inflexibility, though changes in HRV were unrelated to changes in pain inflexibility (p<.05). Further, pain intensity predicted changes in HRV (p<.05), but pain inflexibility did not. While ACT seems to beneficially impact HRV, more research is needed to understand relationships between this physiological marker of PF and more standard measures.

Educational Objectives:
1. Explain why psychological flexibility should be investigated considering multiple levels of analysis.

2. Describe various ways that psychological flexibility and inflexibility can be measured multidimensionally.
3. Compare how psychological flexibility is operationalised in studies across populations.

Papers

Toward a Unified Framework for Positive Psychology Interventions: Evidence-Based Processes of Change

Paper

Components: *Conceptual analysis, Literature review*

Categories: Processes of change, Theory and philosophical foundations, Evidence-based processes; process-based therapy

Target Audience: Beginner, Intermediate, Advanced

Joseph Ciarrochi, Ph.D., Australian Catholic University
Stefan Hofmann, Ph.D., Department of Psychological and Brain Sciences, Philipps University Marburg
Lindsay Oades, Centre for Positive Psychology, University of Melbourne
Steve Hayes, University of Nevada, Reno

Since 2000, research within positive psychology has exploded, as reflected in dozens of meta-analyses of different interventions and targeted processes, including strength spotting, positive affect, meaning in life, mindfulness, gratitude, hope, and passion. Frequently, researchers treat positive psychology processes of change as distinct from each other and unrelated to processes in clinical psychology. This paper presents a comprehensive framework for positive psychology processes that crosses theoretical orientation, links coherently to clinical psychology and its more dominantly "negative" processes, and supports practitioners in their efforts to personalize positive psychological interventions. Multi-dimensional and multi-level extended evolutionary approach can organize effective processes of change in psychosocial interventions, by focusing interventions on context-appropriate variation, selection, and retention of processes, arranged in terms of key biopsychosocial dimensions across psychological, biophysiological, and sociocultural levels of analysis. We review widely studied positive psychology constructs and programs and show how this evolutionary approach can readily accommodate them and provide a common language and framework for improving human and community flourishing. We conclude that Interventions should start with the person, not the protocol.

Coping with cancer-related fatigue in patients with advanced lung cancer: A descriptive qualitative study

Paper

Components: *Didactic presentation, Original data*

Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, cancer-related fatigue, fatigue interference, advanced lung cancer

Target Audience: Beginner, Intermediate, Advanced

Huiyuan LI, The Nethesole School of Nursing, The Chinese University of Hong Kong
Cho Lee Wong, Ph.D., The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong,
Marques Shek Nam Ng, Ph.D., The Nethersole School of Nursing, Faculty of Medicine, The Chinese University of Hong Kong

Cancer-related fatigue causes varying degrees of interference in patients with advanced lung cancer. Understanding how patients cope with fatigue interference in the context of Chinese culture, as well as advanced cancer, is important to develop an ACT grogram applying in this population in China and help them improve their palliative quality of life. A descriptive qualitative study guided by ACT hexagonal matrix was used to understand the participants' experiences of fatigue and experiences in the degree of flexibly coping with fatigue and advanced lung cancer. Individual face-to-face semi-structured interviews were conducted. Twenty-one patients with advanced lung cancer were recruited in the respiratory department. Content-analysis was used for data analysis. A total of 13 subthemes in six themes emerged from the data. The findings increased understanding of this topic that has been seldom studied in China, especially from the overall perspective of the ACT hexagonal model.

Healthcare professionals should develop an acceptance-based intervention based on the findings to help increase the tolerance of fatigue and advanced cancer to live a flexible cancer life.

The effects of compassion and fears of compassion on psychosocial wellbeing in the context of the COVID-19 pandemic
Paper
Components: *Original data*
Categories: Dissemination or global health strategies, Covid-19
Target Audience: Beginner, Intermediate, Advanced

Marcela Matos, Ph.D., University of Coimbra, Portugal
Nuno Ferreira, Ph.D., University of Nicosia
Kirsten McEwan, University of Derby, College of Health, Psychology and Social Care, Centre for Compassion Research and Training
Martin Kanovský, Comenius University, Institute of Social Anthropology, Faculty of Social and Economic Sciences, Bratislava, Slovakia
Júlia Halamová, Comenius University, Institute of Applied Psychology, Faculty of Social and Economic Sciences, Bratislava, Slovakia
Stanley Steindl, University of Queensland, School of Psychology, Compassionate Mind Research Group, Brisbane, Australia
Mariana Linharelhos, University of Coimbra, Center for Research in Neuropsychology and Cognitive Behavioral Intervention (CINEICC), Coimbra, Portugal
Daniel Rijo, University of Coimbra, Center for Research in Neuropsychology and Cognitive Behavioral Intervention (CINEICC), Coimbra, Portugal

The COVID-19 pandemic is having an unprecedented detrimental impact on mental health in people around the world. It is therefore important to examine factors that may buffer or heighten the risk of mental health problems in this context. This study explores the buffering effects of compassion and the magnifying effects of fears of compassion on the impact of perceived threat of COVID-19 on indicators of psychosocial wellbeing, in a multinational sample of 4057 adult participants from 21 countries (Europe, Middle East, North and South America, Asia and Oceania).
Self-compassion moderated the impact of perceived threat of COVID-19 on depression, anxiety and stress, whereas compassion from others moderated the effects of fears of COVID-19 on social safeness. Fears of compassion moderated the impact of threat of COVID-19 on psychological distress. Fears of compassion from others moderated the effects of fears of COVID-19 on social safeness. These effects were consistent across countries.
Our findings highlight the universal protective role of compassion in promoting resilience by buffering against the harmful effects of the COVID-19 pandemic on psychosocial wellbeing.

Empathy, Compassion, and Patterns of High Frequency Heart Rate Variability Reactivity to Stress
Paper
Components: *Conceptual analysis, Didactic presentation, Original data*
Categories: Health / behavioral medicine, Behavioral or contextual neuroscience, Neurovisceral Integration Theory, Compassion, Empathy
Target Audience: Intermediate

William OBrien, Ph.D., Bowling Green State University
Emily Mueller, M.A., Bowling Green State University

Psychophysiological researchers demonstrated that orienting stressors (e.g., injury stimuli) elicit HR decreases and high frequency heart rate variability (HF-HRV) increases. Defensive stressors (e.g., social evaluation stimuli) elicit HR increases and HF-HRV decreases. In this study, HR and HF-HRV reactivity to an orienting and defensive stressor were measured among 81 undergraduate students. As predicted, HR significantly ($p < .01$) decreased and HF-HRV increased to the orienting stressor while HR increased and HF-HRV decreased to the defensive stressor. The order of stressor presentation interacted with HF-HRV reactivity. When the orienting stressor was presented first, a large increase in HF-HRV was observed (43.33%, $\eta2 = .38$, $p < .001$). According to Polyvagal Theory, this HF-HRV increase indicates that empathy and compassion networks were activated. When the orienting stressor followed the defensive stressor, HF-HRV reactivity was muted (16.20%, $\eta2 = .03$, $p = ns$). This may

indicate that empathy and compassion networks were inhibited by prior exposure to the defensive stressor. Future researchers can evaluate whether acceptance, self-compassion, and mindfulness training can mitigate defensive inhibition of empathy and compassion.

Psychological Flexibility and Inflexibility Predict PPE Use and Social Distancing across Time (2 Month Interval)
Paper
Components: *Didactic presentation, Original data*
Categories: Health / behavioral medicine, COVID-19, Psychological Flexibility
Target Audience: Intermediate

William OBrien, Ph.D., Bowling Green State University
Emily Mueller, M.A., Bowling Green State University

Personal protective equipment (PPE) use and social distancing (SD) mitigate COVID-19 transmission. In this study, demographic variables (age, sex, race, education, BMI, medical conditions), perceived susceptibility to COVID-19, Psychological Flexibility (PF–observe/describe, PF–nonreactivity), Psychological Inflexibility (PI–nonawareness, PI–judgement), PPE, and SD were measured at two time points (April, 2020, June, 2020) that corresponded to high COVID-19 incidence rates and lockdowns in the USA. Participants were 151 MTurk workers. Time 1 demographic, susceptibility, and PF/PI variables were used to predict Time 2 PPE and SD using hierarchical regressions. For PPE use, the overall regression model accounted for nearly half of the variance (R=.42, p<.001) with PF-nonreactivity (β=.26, p<.001) and PI-judgement (β=.27, p =.005) being unique and significant predictors. For Time 2 SD, the overall model was significant and accounted for a moderate proportion of the variance (R2=.14, p<.02). PF-observe/describe and PI-nonawareness marginally predicted SD (β=.19, p=.06; β= -.22, p=.06). The significant prediction by PF and PI across time is substantial. Psychological flexibility interventions can be a way to increase engagement in PPE and SD.

Ignites

Thinking by the Minute: How to Structure a Great ACT Training
IGNITE
Categories: Academics or education, Professional development, Presenting, lecturing, crafting trainings

Jacob Martinez, M.A., LPC, Private Practice

Effective presentation skills are essential for the dissemination of knowledge across fields. As the popularity and visibility of ACT and other CBS approaches increases the greater the demand for high quality training, and high quality trainers becomes. This IGNITE provides tips designed to maximize impact of workshops, presentations, and lectures, by reframing the focus of these events away from content and toward time allotted, allowing for greater flexibility in structure. Viewers will be able to design bespoke ACT trainings using methods learned in this session.

ACTing Sustainably: Using ACT to promote plant-based eating
IGNITE
Categories: Environmental problems, Health / behavioral medicine, plant-based eating

Aja Meyer, Ph.D., Johns Hopkins All Children's Hospital
Robert Burdine, M.Ed., South Carolina Department of Mental Health

Sustainability as a concept recognizes that our environment's resources are finite, and therefore it is imperative we act in ways that protect our environment and its resources. Practicing sustainability requires making ethical choices for the benefit of the planet, humanity, and all living things. One direct way to make a meaningful, positive impact on our environment (and our own wellness) is to adopt a plant-based diet. Unfortunately, there continue to be a number of barriers to engaging in plant-based eating. Utilizing an ACT framework, we will discuss ways to identify common barriers to behavioral change and generate steps for taking committed action to adopting a plant-based diet. Mental health providers are in a position to engage clients, colleagues, and communities in dialogue to identify

barriers, increase overall awareness, and facilitate engagement in values-driven behavior for the benefit of our environment and all sentient beings.

ACT Your Way to Better Undergraduate Teaching
IGNITE
Components:
Categories: Academics or education, Social justice / equity / diversity, inclusive pedagogy, applied ACT principles
Target Audience:

Amanda Taylor, M.S., LLP, University of Michigan - Flint

Promoting psychological flexibility in higher education is particularly tricky in the current climate, as so many of us have competing demands, limited and limiting resources (cognitive and otherwise), and deep-seated fatigue. In this IGNITE, I make a case for using the basic ACT model to promote psychological flexibility in ourselves and our students as a means of getting us closer to heart-centered, values-based, meaningful educational experiences. We'll talk about the role cognitive fusion has historically had in higher education and the various levels at which defusion may get us closer to our shared goal of lifting up our students and supporting their sense of efficacy. Values-based education is an issue of equity and accessibility across student populations, and I intend to illustrate how and why, and how and why professors could do something about it (here's looking at you, experiential avoidance).

The Young Ones! An 8-week transdiagnostic ACT-training for young adults with severe psychiatric disorders.
IGNITE
Categories: Clinical intervention development or outcomes, Young adults, severe mental disorders, psychosis, transdiagnostic

Julia Vink, M.Sc., Amsterdam UMC
Lieuwe de Haan, Amsterdam UMC

The mental health of young people is a growing issue of importance as was discussed in a large European Parliament Debate held in November 2021. In Belgium, France and the United States in March 2021 rates of anxiety and depression were twice as high as before the COVID-19 pandemic also adding an increase in feelings of loneliness and suicide. The importance of novel psychological interventions that better meet the needs of young people with (severe) psychiatric conditions is increasingly recognised. In this inspiring IGNITE session you will learn about the rationale behind an eight-week transdiagnostic acceptance and commitment-based group training (The Young Ones) for young adults with severe psychiatric disorders, you will get to experience how the sessions were offered and we will share with you the main findings of our qualitative and quantitative mixed method research.

Are you and your client really working on ACT in the same boat?: Diversity, Equity, and Inclusion SIG Sponsored
IGNITE
Components:
Categories: Clinical intervention development or outcomes, Acceptance and Commitment Therapy, Therapeutic relationship
Target Audience:

Manabu Yoshimoto, B.A., COCO - BPD family/peers support group

If the therapist is providing ACT without putting values into action or disclosing the thoughts, feelings, urges and so on in front of the client, that will damage the equality and trust in the therapeutic relationship between the client and the therapist. Besides, we will not be able to successfully promote their psychological flexibility. Conversely, if we therapists live along with our values and work on ACT exercises with clients together, our psychological flexibility will be facilitated as well as theirs. In this ignite session, we will check on key points that the therapists tend to miss in the session.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

PPT/Audio recorded for post event, on demand viewing

Sessions Recorded Thursday, June 16

5. Flexibility Across Dimensions (FAD): A Form of Process-Based Functional Analysis: Process-Based Therapy SIG Sponsored
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Role play*
Categories: Processes of change, Behavior analysis, Tells and Reads
Target Audience: Beginner, Intermediate

Lou Lasprugato, M.A., Sutter Health

The growing movement into a process-based model of therapy is calling for a "context-and individual-sensitive, principles-informed approach to care" (Ong, Levin, & Twohig, 2020) that asks, "What core biopsychosocial processes should be targeted with this client given this goal in this situation, and how can they most efficiently and effectively be changed?" (Hofmann & Hayes, 2019). Manualized protocols, while convenient, don't take into account the fluid and dynamic psychology of each human being we encounter in our clinical work. Contextual behavioral approaches, on the other hand, have long argued for a "commitment to responding to in-the-moment processes, which are to be conceptualized based on the functions they serve for the individual." (Ong, Levin, & Twohig, 2020). This workshop will present a user-friendly method of analyzing and targeting the core processes of acceptance and commitment therapy (ACT). Across the six dimensions of psychological flexibility, participants will have opportunities to practice detecting and coding these core processes. Such practice will include the use of a video vignette and/or demonstration, and small, feedback-enhanced group sessions.

Educational Objectives:
1. Analyze the function of verbal and non-verbal behavior occurring in clinical contexts.
2. Assess subtle shifts in psychological flexibility across six dimensions.
3. Explain how to utilize on-the-fly functional analysis to more flexibly target processes in-the-moment.

6. Craving life: Utilizing ACT and compassion-based skills to overcome cravings and addictive behaviors: Greek & Cypriot Chapter Sponsored
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Role play*
Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Substance abuse
Target Audience: Beginner, Intermediate

Maria Karekla, Ph.D., University of Cyprus

The application of ACT for the treatment of problems where craving is a core feature, is growing (e.g., substance use, tobacco use, overeating). Cravings are intense desires for using or consuming certain substances with the goal of feeling pleasure and satisfaction and are key for addiction-related problems. Difficulties involving cravings are associated with substantial distress, functional impairment, and low quality of life. This workshop presents practical strategies based in ACT to help individuals to cope and manage cravings at the core of common addictions. The workshop will also present the latest research in ACT for dealing and overcoming cravings, and examine the efficacy, the mechanisms, and processes of change of ACT for the treatment of craving-related problems. Concepts will be illustrated using live demonstrations, experiential exercises, metaphors, and worksheets. This workshop is designed to teach skills needed to explore ACT as an assessment model and intervention method for addressing cravings and addictions. It will be mostly experiential and will balance didactics with a personal connection with the issues raised in ACT, and with skill development.

Educational Objectives:
1. Explore the functional behavioral analysis of craving-related problems.
2. Describe the basic tenets and core processes of ACT as they apply to cravings and addictions.
3. Describe how to use mindfulness, acceptance, experiential exercises, metaphors, and defusion techniques, to improve well-being in individuals with craving-related issues.

8. Connecting with meaning while living with moral pain: A workshop on ACT for Moral Injury (ACT-MI)
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Role play*
Categories: Clinical intervention development or outcomes, Processes of change, Moral Injury
Target Audience: Beginner, Intermediate, Advanced

Lauren Borges, Ph.D., Rocky Mountain MIRECC
Jacob Farnsworth, Ph.D., VA Eastern Colorado Health Care System
Kent Drescher, Ph.D., Clinical Psychologist
Sean Barnes, Ph.D., Rocky Mountain MIRECC
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

From the warzone, to the COVID-19 pandemic, to racial injustice, the world is rife with events that can violate one's moral code (potentially morally injurious events [PMIEs]). PMIEs often cause moral pain (e.g., guilt, shame, disgust, anger, and contempt). Moral injury can result from efforts to avoid and control this moral pain. Interventions targeting moral injury are critical to preventing adverse outcomes like suicide (Nichter et al., 2021) and to fostering values-driven lives. Workshop participants will learn to use Acceptance and Commitment Therapy for Moral Injury (ACT-MI) to help individuals live their values in the presence of moral pain (Borges, 2019; Farnsworth et al., 2017). In this workshop, participants will learn to apply functional analysis to disrupt behavioral patterns maintaining moral injury. They will practice guiding clients in building new values-driven patterns of behavior while contacting moral pain. Barriers to living values after experiencing PMIEs will be explored, and methods for overcoming them discussed. Following the workshop, participants will be better prepared to assist clients in flexibly responding to moral pain.

Educational Objectives:
1. Describe how to conceptualize moral injury from a contextual behavioral perspective using functional analysis.
2. Apply procedures from ACT-MI to cultivate flexibility in responding to moral pain.
3. Explain how to guide clients in building patterns of behavior informed by their values.

9. Basic & applied research examining psychological flexibility: Process-based, transdiagnostic & prosocial approaches: Hawai'i Chapter Sponsored
Symposium
Components: *Conceptual analysis, Literature review, Original data*
Categories: Processes of change, Clinical intervention development or outcomes, Experiential avoidance
Target Audience: Intermediate

Chair: Anastasia Keller-Collins, Ph.D., BCBA-D, LBA, CTRS, BAYADA
Discussant: Michael Levin, Ph.D., Utah State University
Kyra Katte, M.A., Western Michigan University
Samuel Spencer, M.A., University of Hawaii, Manoa
Kati Lear, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Meredith Tittler, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Fabián Olaz, Ph.D., National University of Córdoba

Discoveries from basic research inform applied research, and vice versa. It is only through the dynamic integration of both that we can hope to advance the field and work towards fostering prosocial change in our world (Hayes et al., 2021). This symposium includes five studies, united within a process-based, transdiagnostic framework (Hayes & Hofmann, 2018), and will highlight empirical findings from intervention outcome and analog studies. Presenters in the current symposium will present findings from longitudinal research that examined the efficacy of brief transdiagnostic interventions (e.g., ACT, FAP) in alleviating human suffering for both individuals and romantic couples facing the hardships of COVID-19. The influences of experiential avoidance on emotional expression in response to experimentally-manipulated video stimuli and in daily diaries will also be explored and related to psychological flexibility. The research questions are approached through experimental, longitudinal, and survey studies, including participants from at least four states and two countries. Impacts of these findings and areas for further study will be discussed.

- Inflexible self-criticism as shame-avoidance in social anxiety: Results from a daily diary study
    Kati Lear, Portland Psychotherapy Clinic, Research, & Training Center
    Sarah M. Smith, Portland Psychotherapy Clinic, Research, & Training Center
    Ben Shahar, Portland Psychotherapy Clinic, Research, & Training Center
    Jason B. Luoma, Portland Psychotherapy Clinic, Research, & Training Center

    Self-critical post-event processing has been robustly associated with the maintenance of social anxiety disorder (SAD). Theories of SAD have asserted that shame is the core emotion in SAD and that self-criticism serves as an experientially avoidant function by reducing current feelings of shame and preventing future shame by reducing the likelihood the person will take future social risks (Lazarus & Shahar, 2018). This study extends a previously published daily-diary study (Lazarus & Shahar, 2018) which reported that inflexible self-criticism was associated with shame in socially anxious participants following social interactions. Data have been collected on 170 U.S. participants recruited from Amazon MTurk across 14 days. Participants completed a measure of social anxiety severity at baseline and evening assessments each day reporting on one stressful social interaction and subsequent self-criticism. This paper reports the results of pre-registered hypotheses (https://osf.io/37vp9/), for example, that between-subjects social anxiety severity will moderate the relation between within-subjects shame and self-criticism and that, specifically, higher social anxiety will be associated with increased self-criticism across levels of shame reported.

- Experiential avoidance among high self-critics: the role of expressive suppression in response to positive-emotion eliciting stimuli
    Meredith V. Tittler, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
    M. Kati Lear, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
    Christina, Chwyl, B.A., Portland Psychotherapy Clinic, Research, & Training Center
    Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center, 3700 N. Williams St., Portland, OR 97227

    Reduced expression of positive emotions has been proposed as one mechanism to explain the link between self-criticism and low social belonging (Luoma & Chwyl, 2020). In this study, we examine the way in which high self-critics (HSC) use expressive suppression (ES) as an emotion regulation strategy in response to two videos meant to elicit the pro-social emotions of compassion and inspiration. Participants (N = 303) were recruited from the community and came to the lab to watch two videos and complete related questionnaires. Results partially supported hypotheses showing that self-criticism predicted more negative emotions in response to both videos and also moderated the relationship between video condition and shame. Contrary to hypotheses, HSCs showed high levels of shame across both conditions, while low self-critics (LSCs) showed a variable response of higher shame in the compassion video and low shame in the inspiration condition. Mediation results indicated that the increase in negative emotions experienced by HSCs explained their increased use of ES suggesting their use of ES may serve the purpose of hiding socially incongruent emotions.

- Acceptance and commitment therapy for transdiagnostic mental health concerns: Examining experiential avoidance and engaged living as processes of change
    Samuel D. Spencer, University of Hawai'i at Mānoa
    Arleen Firoozan, University of Hawai'i at Mānoa
    Monet Meyer, University of Hawai'i at Mānoa
    Akihiko Masuda, University of Hawai'i at Mānoa

Acceptance and commitment therapy (ACT) is conceptualized as a process-based, transdiagnostic approach to treatment that seeks to increase values-based, adaptive functioning (i.e., engaged living [EL]) and attenuate psychopathological repertoires of experiential avoidance (EA). The present study utilized a multiple baseline design across participants to examine the process of change and outcome of a 10-week course of ACT focusing on EA and EL. Participants included a university-based sample of two women and one man (ages 18-27) with transdiagnostic mental health concerns associated with elevated EA. Variables of interest included daily self-monitored clinically relevant behavioral excesses and deficits; daily and weekly measures of EL and EA; and pre-, mid-, post-treatment, and 3-month follow-up measures of nomothetic outcome variables. Cross-lagged correlation analyses also examined whether changes in EL and EA (processes) preceded changes in clinically relevant target behaviors (outcomes). Data collection is currently ongoing– however, preliminary results indicate tentative support for the efficacy of the ACT intervention on measured variables. Results will be discussed in the context of process-based therapy and the use of intensive time series methodology.

- Helping Couples to Connect during the COVID-19 Crisis: An Intervention Based on the ACL (Awareness, Courage and Love) Model of FAP (Functional Analytical Psychotherapy)- A Replication Study
    Fabián O. Olaz, University of Cordoba
    María Roberta Bañuelos, University of Cordoba
    Julia Molfino, University of Cordoba
    Mavis Tsai, University of Washington

This study evaluated the effectiveness of a one-session online psychological intervention based on the Awareness, Courage, and Love (ACL) Model from Functional Analytic Psychotherapy (FAP) to promote closeness and intimacy between couples during the pandemic. The study is a replication study of the research carried out by Tsai et al (2020) of Participants: 17 dyads (couples) from Argentina, adults (18+ years old) who were in a situation of social distancing during the COVID-19 crisis, and who lived together with their partner (boyfriend/girlfriend, husband/wife, concubine) Method: couples were randomly assigned into either the intervention or control group for a single 2-hour online group session. The ACL intervention protocol was designed by Mavis Tsai to increase closeness between couples whereas control group members watched a movie. Previous to the first session both groups responded to two instruments that assessed the couple's relationship. Generalized Estimation Equations (GEE) were used to compare the change scores over time between the groups. Results: The results support the proposed hypothesis. As expected, the experimental group obtained a higher score in the VDs, and the differences with respect to the control group were maintained at one week of follow-up. We conclude that this preliminary findings support the efficacy and utility of short interventions focused on Interpersonal Processes to prevent stress and other risk factors in situations of social isolation

- Enhancing Young Relationships in Under an Hour: The Impact of the Fast Friends Procedure with New College Dating Couples
    Kyra Katte, M.A., Western Michigan University
    Amy Naugle, Ph.D., Western Michigan University
    Geraldine Granados Todd, B.S., Western Michigan University

The present research investigated relationship enhancement following a brief self-disclosure task (i.e., the Fast Friends Procedure) and factors related to changes in relationship outcomes from pre- to post task. Thirty-three undergraduate couples dating for less than six months asked and answered questions that required increasingly higher levels of self-disclosure for 45 minutes via a virtual format. Relationship satisfaction, closeness, and emotional intimacy all increased from pre to post task with emotional intimacy demonstrating the largest effect. Improved relationship outcomes were associated with greater self-disclosure, lower trait and state experiential avoidance, and learning more about one's partner. Ideas for further enhancing relationship outcomes and suggestions for future research are discussed.

Educational Objectives:
  1. Identify mechanisms of change in process-based therapy for individuals and couples.
  2. Describe at least two methods to studying self-criticism in a laboratory setting.
  3. Articulate how basic and applied research serve to alleviate human suffering.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

10. Getting ACT Out of the Office and Into Life: Novel Applications of ACT and CBS
Panel
Components: *Case presentation, Conceptual analysis, Strategic planning, None of these*
Categories: Clinical intervention development or outcomes, Methods/approaches for individual variation, Novel Applications of ACT and CBS
Target Audience: Beginner, Intermediate, Advanced

Chair: Jill Stoddard, Ph.D., The Center for Stress and Anxiety Management
Discussant: Nathan Gates, M.A., LCPC, Spoon River Counseling & Wellness
Joey Salvatore, M.S., Maryland Board of Counselors
Shawn Costello Whooley, Psy.D., Owner, Private Practice
Brian Pilecki, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Rikke Kjelgaard, M.Sc., Rikke Kjelgaard Consulting
Susie McAfee, Ph.D., Private Practice

It is no surprise that new ways of adapting and applying ACT continue to expand. One has only to thumb through this conference program to see new applications of ACT across clinical problems, populations, settings, and cultures. (e.g. Levin, Twohig, Krafft, 2020). And yet, how we adapt ACT does not need to be limited by traditional methods of delivery. The flexibility in the model allows us to apply it to an infinite range of contexts and we are only limited by our imagination. And in fact, the 6 core processes of ACT not only maintain their integrity toward the goals of reducing struggle, increasing psychological flexibility, and fostering meaningful life engagement outside of the traditional delivery box, they flourish! In the kitchen, along the trail, during profound spiritual experiences, riding the waves, over cocktails with peer trainees, or with our hands in the dirt on the farm! The practitioners on this panel invite you to hear how they have developed and are delivering novel contexts in which to engage clients using an ACT framework.

Educational Objectives:
1. Describe recent innovative applications of ACT.
2. Identify processes of change by which the psychological flexibility model can be adapted in real world applications.
3. Identify and apply one's own values to the dissemination of ACT.

19. When is it Willingness? Assent in the Therapeutic Relationship
Workshop
Components: *Conceptual analysis, Didactic presentation*
Categories: Methods/approaches for individual variation, Assent, Consent, Conceptual Analysis
Target Audience: Beginner, Intermediate

Tommy Parry, LMHC, LBA, BCBA, Parry Behavioral Consulting, LLC
Jonathan Amey, M.Ed., Agile Instruction and Management Solutions, LLC.

Acceptance, often referred to as "Willingness" is a core component of Acceptance and Commitment Therapy and a central part of the ACT therapeutic stance. Entire books and book chapters have been written on the transformative effects of acceptance and how applying it as a process in therapy can yield powerful therapeutic change and growth among both the client and therapist. Given the gravity of the concept of willingness in ACT, we might ask "But when is it willingness?" Furthermore, given the wide variety of behavioral responding based on individual learning histories, there may be times when our clients seemingly indicate consent when their behavior is under aversive control. This workshop seeks to analyze the concepts of assent and consent among different client case conceptualizations. The goal of this workshop is to explore a concept analysis of assent/consent and how these may impact how a therapist responds in-session.

Educational Objectives:
1. Describe the differences between true and apparent consent.
2. Identify client behaviors that may indicate hidden avoidant responses to therapy.
3. Apply strategies that foster client choice and autonomy in therapy.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

20. Empowering the flexibility of your clinical interventions using the ACT Matrix
Workshop
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Supervision and training, Clinical intervention development or outcomes, ACT Matrix
Target Audience: Beginner, Intermediate, Advanced

Fabián Olaz, Ph.D., National University of Córdoba
Holly Yates, LCMHC, Certified FAP Trainer, Certified FAP Trainer

The ACT matrix is a model that allows client and therapist to transform the functions of psychological events by helping them to be in contact with the broader aspect of the context and providing them with instant feedback about the usefulness of their behaviors. As with learning to ride a bike, working with the matrix looks simple, yet it isn't easy. In this workshop we will focus on flexing your use of the Matrix following three core RFT-based clinical strategies outlined in Törneke, Luciano, Barnes-Holmes, & Bond (2016): 1) Helping clients discriminate the relationship between current functional classes of responding and their problematic consequences, 2) Training clients in discriminating their responses as participating in a frame of hierarchy with the deictic I, and 3) Helping clients practice perspective-taking in a way that helps them contact appetitive augmental functions for further behavior. The workshop will start with a short didactic presentation. Next, we'll provide examples for each strategy using Matrix-based interventions. At the end of the workshop, participants will work in groups to practice the strategies.

Educational Objectives:
1. Demonstrate an understanding of the Matrix through the lens of RFT and CBA.
2. Describe how to use the ACT-matrix in a flexible and experiential way.
3. Demonstrate how to use the ACT-Matrix Model to implement the three core RFT-based clinical strategies.

22. Processes of Change and Mind-Body Relations
Panel
Components: *Conceptual analysis, Literature review, Strategic planning*
Categories: Processes of change, Clinical intervention development or outcomes, Mind-Body Relations
Target Audience: Intermediate

Steven Hayes, Ph.D., University of Nevada, Reno
Stephen Porges, Ph.D., Indiana University
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services
Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center

Psychosocial processes of change are embedded in a network of biophysiological processes. This set of relations constitutes the core of what is traditionally labelled the "mind-body" issue. Addressing mind-body relations adequately is conceptually, philosophically, and practically difficult as it can pull for reductionism, reification, or merely confusion about levels of analysis. Ignoring the issue, however, is inherently inadequate and contemporary advances in research and practice demand a more sophisticated approach. This panel is composed of experts who have done work in PolyVagal Theory, ACT, RFT, trauma, psychedelic therapy, and processes of change among other areas of relevance to the topic. How can contextual behavioral science best make progress in this area of mind-body relations? How can attention to the body support the therapeutic change? If processes of change are really biopsychosocial, what are the implications for our practical and research work? Questions such as these will be the focus of this panel discussion.

Educational Objectives:
1. Describe the multi-level nature of biopsychosocial processes of change.
2. Discuss how attention to the body can advance research and practice in contextual behavioral science.

3. Relate contemporary research in biopsychosocial processes of change to ACT and other forms of psychosocial intervention.

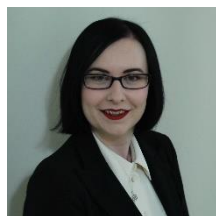### 23. Gender Bias and Relational Frame Theory: What's the relation?
Invited
Components: *Literature review, Original data*
Categories: RFT / RGB / language, Social justice / equity / diversity, Gender Bias, IRAP
Target Audience: Beginner

Lynn Farrell, Ph.D., National College of Ireland

Gender is often viewed in relation to women, and differences between men and women in particular which tend to be essentialized. This strengthens the perceived legitimacy of stereotypes that assign traits and expectations to people based on their assumed sex. However, research consistently demonstrates the impact of sociocultural factors which suggests gender stereotypes are open to influence. This gender research is often seen as the remit of social psychology; however, Relational Frame Theory (RFT) provides a contemporary behavioral approach to understanding and influencing social psychological phenomena. RFT conceptualizes bias and stereotypes as forms of arbitrarily applicable relational responding maintained by current and historical contextual factors. This can help us better appreciate the persistence and potential for flexibility in gender stereotypes. In this talk I will discuss my research on understanding and influencing gender-STEM stereotypes and attitudes towards gender equality initiatives in STEM through an RFT-lens. I will also discuss some of the broader literature that has taken an RFT-relevant approach to gender bias. In this way I will highlight how RFT may help us better understand gender and gender stereotypes as dynamic relational networks that are context-dependent and influenced by social contingencies, while also highlighting areas for further research.

Educational Objectives:
1. Describe research that has examined gender bias and its malleability through the lens of RFT.
2. Identify relevant gaps in the literature that research inspired by RFT may contribute to.
3. Discuss how gender and gender stereotypes are dynamic, context-dependent relational networks influenced by social contingencies.

24. Testing the Efficacy of Magpies; An Integration of ACT and RFT skills based interventions for children
Symposium
Components: *Case presentation, Conceptual analysis, Literature review, Original data*
Categories: Clinical intervention development or outcomes, RFT / RGB / language, ACT, Children, Mental Health, Skills based interventions
Target Audience: Beginner, Intermediate

Chair: Lisa Coyne, Ph.D., Harvard Medical School/McLean & New England Center for OCD and Anxiety
Discussant: Louise McHugh, Ph.D., University College Dublin
Sarah Cassidy, Ph.D., Smithsfield Clinic
Elle Kirsten, Ph.D., Compassionate Behaviour Analysis/Smithsfield Clinic

There are now over 400 randomised control trials demonstrating the efficacy of Acceptance and Commitment Therapy (ACT). ACT is rigorously behavioural but is based on the comprehensive empirical analysis of human language and cognition, also known as Relational Frame Theory, RFT (Hayes, 2004). However, ACT for youth with specific emotional behavioural difficulties is still in the early days. In addition, whilst many basic scientists study RFT in the lab, many clinicians have struggled to understand to integrate RFT and ACT into clinical interventions and particularly those discussed in more mainstream psychology (e.g., low self-esteem, poor social skills, emotional dysregulation and anxiety). This is partly related to the mentalistic language used in mainstream psychology but also to the lack of agreement relating to functional working definitions of same. The Magpies programme aims to functionally understand these difficulties and address them in systematic

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ways over four separate 8 week blocks of implementation. This symposium highlights the need to work closely with statutory services and to focus on what education and health services deem important to address.

- Testing the Feasibility and Efficacy of the Magpies Intervention Social Skills Module
    Shannon Eidman, M.Ed., BCBA, Reach Children's Services/Smithsfield Clinic
    Amy Russell, M.Sc., Smithsfield Clinic
    Chloe Drumm, M.Sc., Smithsfield Clinic
    Roberta Hines, D. Psych. BAT/ABA, BCBA-D, H-Dip Montessori, Smithsfield Clinic
    Elle Kirsten, Ph.D., BCBA, LBA, Smithsfield Clinic/Compassionate Behavior Analysis
    Sarah Cassidy, Ph.D., Smithsfield Clinic
    Joeleen Lynch, M.Sc., BCBA, Reach Children's Services/Smithsfield Clinic
    Julianne Bell, BCBA, Smithsfield Clinic
    Charlene Moore, M.Sc., BCBA, Smithsfield Clinic/ The Western Health and Social Trust

    Research suggests that children with poor social skills are often rejected by peers (Dodge, 1983; Masten et al., 2005), achieve worse academically (Welsh et al., 2001), and are at greater risk for delinquency and the development of mental health conditions such as anxiety and depression (Bellini, 2006; Cown, 1973; Parker & Asher, 1987; Tantum, 2000). Given these risks, there is a clear need for focused and effective therapeutic models that can easily be implemented in mainstream schools. Typically, behavioural approaches to supporting social skills have relied heavily on teaching explicit rules through behavioural skills training. Such approaches however often have little regard for context, and they have increasingly come under scrutiny among the neurodivergent community. The social skills module in Magpies aims to address these concerns, promoting a neuroaffirmitive approach to self-awareness and relationship skills. The module includes 8 sessions, encompassing a set of child friendly experiential exercises designed for children aged 8-12. Preliminary data will be shared on active engagement, values-guided actions, and parent/child reports of psychological flexibility and social skills.

- Testing the Feasibility and Efficacy of the Anxiety Module of Magpies
    Roberta Hines, D. Psych. BAT/ABA, BCBA-D H-Dip Montessori, Smithsfield Clinic
    Julianne Bell, BCBA, Smithsfield Clinic
    Chloe Drumm, M.Sc., Smithsfield Clinic
    Amy Russell, M.Sc., Smithsfield Clinic
    Elle Kirsten, M.Sc., BCBA, LBA, PhD, Smithsfield Clinic/Compassionate Behaviour Analysis
    Sarah Cassidy, Ph.D., Smithsfield Clinic

    Research estimates prevalence of clinically elevated child and adolescent anxiety are at a 20.5 % of the global population (Racine, 2021). In Ireland about 1 in 12 children aged 11 – 13 experience anxiety (8.1%) and 1 in 20 experience social phobia (5.1%) and generalized anxiety disorder (4.7%) (Cannon 2013). Symptoms of childhood anxiety can involve behaviours involving phobias, fearfulness, separation anxiety, self-consciousness, intense worrying and irrational thoughts (Rodgers 2015). When dealing with anxiety in children, many countries have moved towards natural environment settings such as schools to incorporate behavioural interventions in order to normalize seeking help and facilitate skills acquisitions (Scaini 2022). The anxiety module of Magpies aims to address skills acquisition though Acceptance and Commitment Therapy (ACT) an evidence-based approach for treating anxious children (Landy 2015). This module includes 8 sessions, encompassing a set of child friendly experiential exercises designed for children aged 8-12. Preliminary data will be shared on active engagement, values-guided actions, and parent and child reports of psychological flexibility and anxiety measures.

- Testing the Feasibility and Efficacy of the Self Esteem Module of Magpies
    Charlene Moore, M.Sc., BCBA, Smithsfield Clinic/Western Health and Social Trust
    Chloe Drumm, M.Sc., Smithsfield Clinic
    Amy Russell, M.Sc., Smithsfield Clinic
    Joeleen Lynch, M.Sc., BCBA, Smithsfield Clinic/Reach Children's Services
    Sarah Cassidy, Ph.D., Smithsfield Clinic

    Oliver & Bennett (2019) defined self-esteem as, evaluating or judging the self. Although self is not a technical term in operant Psychology, from an RFT perspective, we can draw a distinction between our own behaviour and the environment. Therefore, we can target behaviours for relating to and thinking of ourselves (McHugh et al., 2019). Self-evaluations begin when language skills develop, paving the way for associations made. Previous solutions for low self-esteem reached for high self-esteem, however research demonstrates this as ineffective. A meta-analysis completed by Orth et al (2018) investigating the

normative trajectory of self-esteem across the life span, found that levels of self-esteem were lowest in children. Additionally, the child's relationships, education, physical and mental health were impacted by low self-esteem. The self-esteem module in Magpies aims to address low self-esteem in a group of children aged between 8-12 years through an 8-week group programme using ACT and RFT based interventions. This research will evaluate the efficacy of targeting various ACT processes, including values, committed action, acceptance, and psychological flexibility.

- Testing the Efficacy and Feasibility of the Emotional Regulation Module of the Magpies Programme
    Elle Kirsten, Ph.D., BCBA, LBA, Smithsfield Clinic/Compassionate Behaviour Analysis
    Shannon Eidman, M.Ed., BCBA, Smithsfield Clinic/Reach Children's Services
    Amy Russell, M.Sc., Smithsfield Clinic
    Chloe Drumm, M.Sc., Smithsfield Clinic
    Joeleen Lynch, M.Sc., BCBA, Reach Children's Services/Smithsfield Clinic

    Research investigating ACT & RFT interventions for youth with specific emotional behavioural difficulties remains sparse. Adaptive emotional regulation skills promote children's psychological wellbeing and functioning whereas emotion dysregulation increases the risk for future psychopathologies (e.g., anxiety, depression, aggression). ACT offers a viable and flexible framework to teach emotion regulation skills; intervention may have meaningful protective and preventative effects by facilitating peer relations, educational outcomes, adult relationships, mental health, and more satisfying employment. The Magpies programme is a focused and systemic ACT-based transdiagnostic therapeutic intervention for children with a range of emotional behavioural difficulties or neurodevelopmental differences in mainstream school settings. The present data were collected during an 8-week block of the Magpies Emotional Regulation programme, and include four pre- and post-measures, including the SDQ, DERS, CAMM, and CPFQ. Data will be discussed.

Educational Objectives:
1. Describe common areas of struggle recognised in mainstream psychology (e.g., low self esteem, poor social skills, emotional dysregulation, anxiety) within school systems.
2. Explain why these areas of struggle can be functionally understood in behaviour analytic terms.
3. Describe how RFT and ACT can be integrated to inform evidence based interventions for neurotypical and neurodivergent children. Feasibility and efficacy issues will be discussed.

32. Supercharging Supervision through Experiential Learning: the SHAPE framework in action
Workshop
Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*
Categories: Supervision and training, Processes of change, Supervision and Consultation, Practitioner development
Target Audience: Beginner, Intermediate

Eric Morris, Ph.D., La Trobe University
Linda Nicholson, MClinPsyc, Ph.D., Australian National University

Supervision and consultation are central to supporting effective and ethical psychological practice, and can facilitate new learning, promote working within the boundaries of safe and recommended practice, and support the welfare of the practitioner.

This workshop will engage participants in contextual methods to enhance supervision informed by the SHAPE supervision framework (Morris and Bilich-Eric, 2017): creating a strong supervisory relationship, promoting experiential learning, and building reflective practice in supervision. SHAPE presents a contextual behavioural science perspective on the supervisory relationship and provides guidance on how these core components of supervision can be enhanced through psychological flexibility skills.

We will outline five features of the SHAPE framework that promote practitioners' psychological flexibility and experiential learning in supervision: Supervision values; Holding stories lightly; Assessment of function; Perspective-taking; Experiential methods. These five features are extensions

of agreed supervision best practices, enhanced by developments in perspective taking, cognitive defusion and acceptance. The workshop will present examples of using SHAPE, and engage participants in practicing SHAPE skills in supervisory scenarios.

Educational Objectives:
1. Describe the SHAPE framework to support experiential learning in supervision.
2. Conduct contracting for feedback guided by supervisor & supervisee values.
3. Identify functions of story-telling in supervision, and options to enhance openness and curiosity in client discussions, including using perspective-taking and experiential exercises.

34. More Than a Feeling: Contextual Approaches to Understanding and Intervening on Appetitive Control
Panel
Components: *Conceptual analysis*
Categories: Theory and philosophical foundations, Processes of change, Values, Motivation, Reinforcement, Behavior Analysis
Target Audience: Intermediate, Advanced

Chair: Evelyn Gould, Ph.D., BCBA-D,LABA, Keck School of Medicine at USC
Discussant: Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Discussant: Emily Sandoz, Ph.D., University of Louisiana at Lafayette
Patrick Friman, Ph.D., APBB, Boys Town/ University of Nebraska School of Medicine
Kelly Wilson, Ph.D., University of Mississippi

Psychological flexibility, the model of psychological health emphasized most commonly in the Contextual Behavioral Science tradition, characterizes wellness in terms of how one relates to the context. In short, psychological flexibility is characterized by appetitive control, or behavioral sensitivity to appetitive contexts, especially in contexts that have functioned as aversive. In this way, appetitive can be used to describe a context in which flexibility is likely, and to describe behavior that is broad and flexible. This general idea has been explored in terms of positive reinforcement, values, and compassion, with implications for research and intervention on a number of different phenomena. This panel will explore different approaches to conceptualizing, assessing, and intervening upon appetitive control from a contextual perspective with a focus on those differences with applied implications.

Educational Objectives:
1. Define psychological flexibility in terms of appetitive control and behavioral sensitivity.
2. Describe ways that appetitive control has been discussed and understood with respect to positive reinforcement, values and compassion.
3. Identify at least two applied implications for contextual behavioral scientists in terms of assessment, case conceptualization and intervention.

35. Psychedelics and Psychological Flexibility: ACBS as a Home for Psychedelic-Assisted Therapies
Invited
Components: *Didactic presentation, Literature review*
Categories: Clinical intervention development or outcomes, Processes of change, Psychedelics
Target Audience: Beginner, Intermediate, Advanced

Brian Pilecki, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center

Over the last decade, psychedelic-assisted therapy (PAT) has emerged as a novel form of mental health treatment and is unique in using a combination of psychotherapeutic techniques with an altered state of consciousness to facilitate change and transformation. Psychedelic-assisted therapy may represent a paradigm shift in mental health treatment but needs a strong, reliable conceptual framework to best guide the use of these powerful tools in order to maximize clinical benefit and reduce potential harm. Since its beginning in the 1960's, psychedelic therapy has lacked a unifying theoretical model to guide clinicians in maximizing therapeutic benefits. Contextual behavioral science and the psychological flexibility model are perfectly suited to understand these mysterious altered states of consciousness and how they can catalyze processes of change that lead to growth and greater engagement with a values-driven life. ACT has already been used to inform several clinical trials of psilocybin-assisted therapy for the treatment of depression with good results. ACBS can and should be a home for psychedelic assisted therapies to grow and develop as new treatments to help alleviate suffering. This presentation will provide an overview of psychedelic-assisted therapy, review modern clinical research, and describe the synergy between CBS and psychedelics.

Educational Objectives:
1. Describe the theory and practice of psychedelic-assisted psychotherapy.
2. Explain how the psychological flexibility model and contextual behavioral approaches can be used to inform therapeutic interventions to enhance the benefits of psychedelic experiences.
3. Summarize the most rigorous empirical support for the use of psychedelic-assisted therapy in treating mental health conditions.

36. Putting the task force report into action
Panel
Components: *Strategic planning*
Categories: Implementation of Task force report
Target Audience: Beginner, Intermediate, Advanced

Chair: Maria Karekla, Ph.D., University of Cyprus
Chair: Rhonda Merwin, Ph.D., Duke University, School of Medicine, Dept. of Psychiatry and Behavioral Sciences
Steven Hayes, Ph.D., University of Nevada, Reno
Louise McHugh, Ph.D., University College Dublin
Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

The ACBS Task Force on the Strategies and Tactics of Contextual Behavioral Science Research released its report last year and it mapped a strategy and tactics for the future of our science. This report emphasized the consensus characteristics of CBS research as multilevel, process-based, multidimensional, prosocial, and pragmatic. This panel aims to discuss issues surrounding how the task force report recommendations can be implemented in research and practice. Panelists will present recent exemplars following the recommendations and discuss the reports' vision for the future of research and practice in our field, as well as provide practical ideas for putting the report into action.

Educational Objectives:
1. Discuss the implications of the Task Force Report for research and practice in the field of contextual behavioral science.
2. Outline how the task force report recommendations can be implemented in research and practice.
3. Apply the recommendations to inform research and practice.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

<div style="background:black;color:white">Sessions Recorded Friday, June 17</div>

47. No-one is to blame: combining ACT and moral philosophy to enable forgiveness and compassion
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Theory and philosophical foundations, Developing self-compassion and other-compassion
Target Audience: Beginner, Intermediate

Richard Bennett, ClinPsyD, University of Birmingham, UK
Dawn Johnson, ClinPsyD, Think Psychology

Do you use ACT with people who find it hard to forgive themselves or others? Does their fusion with blame lead to them getting overwhelmed by unwanted emotions like guilt, shame, or anger? Would you like to get better at helping those people move forward with a greater sense of compassion for themselves and others?
This workshop, suitable for practitioners at any stage of their ACT journey, will focus on integrating key principles from moral philosophy into their ACT practice. It will incorporate some didactic teaching and experiential exercises that draw on determinist and utilitarian concepts, inviting participants to consider how these schools of thought might frame a contextual behavioural approach to moral questions that arise in the therapy room. It will build toward a live demonstration of how to use these principles in a therapeutic interaction, following which delegates will have the opportunity to ask questions and/or discuss their own cases. No previous knowledge of moral philosophy will be assumed.

Educational Objectives:
1. Explain how to integrate some key principles of moral philosophy within a contextual behavioural approach to forgiveness.
2. Assess the utility of applying the aforementioned principles in their own lives, or in the lives of the people to whom they offer services.
3. Describe a compassion-focused perspective-taking intervention to help themselves or others to defuse from blame.

48. Bringing Compassion to the Critic: Working with Self-critical Behavior from an ACT Perspective
Workshop
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Processes of change, Methods/approaches for individual variation, Self compassion
Target Audience: Beginner, Intermediate

Shawn Costello Whooley, Psy.D., Owner, Private Practice
Holly Yates, LCMHC, Certified FAP Trainer, Certified FAP Trainer

What is it about intense self-criticism that is so uniquely challenging for clients and the therapists who work with them? Why is it that our highly self critical clients seem almost unwilling to lighten their hold on self critical thoughts, no matter how painful or destructive?
Self-compassion is often identified as an antidote to self-criticism (Luoma & Platt, 2015), yet even seasoned therapists find it difficult to cultivate in highly self-critical clients.
This workshop is about helping clients increase their willingness and ability to bring self-compassion to their self-criticism. We will explore the constellation of harsh evaluation, fear of rejection, and shame of the self-critic from a CBS perspective. We will examine the differences between the symbolic and observable functions of self-critical behavior, (e.g., improving performance vs inhibiting it) as well as the role of shame and self-punishment in its maintenance. Using role play and small group exercises, we will practice strategies for helping clients expand their behavioral repertoires to include more adaptive self-critical and self compassionate behaviors.

Educational Objectives:
1. Identify one reason why self-critical behavior is difficult to target.
2. Explain why it makes sense to expand a person's behavioral repertoire rather than try to eliminate learned behavior.
3. Identify two self-compassion practices.

50. "But I don't work with substance use..." What your colleagues who do work in the field wish you knew.: Applying ACT to Addictions SIG Sponsored
Panel
Categories: Health / behavioral medicine, Addiction
Target Audience: Beginner

Chair: Cordelia Kraus, LPC, CADC-I, Certified CRAFT clinician, Vital Space, LLC
Harold Robb III, Ph.D., ABPP, Private Practice
Yash Bhambhani, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine
Maria Karekla, Ph.D., University of Cyprus
Lia Bishop, Ph.D., VA Eastern Colorado Health Care System
Nancy Haug, Ph.D., Palo Alto University

According to the National Institute on Drug Abuse (USA), almost 1 in 4 adults with a serious mental illness have a co-occurring substance use disorder. With numbers like that it's likely you work with clients with alcohol or substance use concerns, whether they talk about it or not.
In this panel discussion, clinicians experienced in the substance use field offer their knowledge and encouragement to attendees who don't work with substance use issues as much. Panelists will share stories of their clients' strength and resilience; insight on the functional mechanics of addictive behaviors in comparison to other mental health concerns; thoughts on when to receive increased clinical support; favorite CBS-aligned skills, tools, and resources; and other things they want their colleagues to know.
After engaging in this conversation, attendees will have increased knowledge of resources available and a greater understanding of how to help their clients with addictive behaviors.

Educational Objectives:
1. Describe and identify areas of strength and resilience for clients who struggle with alcohol and/or substance use.
2. Access recommended resources and tools for working with clients who struggle with alcohol and/or substance use.
3. Identify multiple pathways towards recovery beyond 12-step and abstinence approaches, including harm-reduction, evidence-based family involvement, peer mentors, and other resources.

51. Using Contextual Behavioral Science to Explore Complex Cultural Identities
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Literature review*
Categories: Clinical intervention development or outcomes, RFT / RGB / language, Identity Development
Target Audience: Beginner, Intermediate

Lanaya Ethington, Ph.D., Thrive Behavioral Health

"Who are you?" is a question that many people struggle to answer, especially as it relates to having a coherent sense of self. "Where are you from?" is a question that people with complex cultural identities also struggle with, given that their life experience may have included time spent in a variety of geographical or geopolitical contexts. These identities may include Third Culture Kids, global nomads, Missionary Kids, military "brats," refugees, and members of a minority group who are raised in a context where the predominant culture is that of a majority group. Contextual Behavioral Science can help with the development of a cohesive sense of self and the ability to engage in flexible selfing (an act of complex relating). This workshop utilizes CBS approaches, with an emphasis on RFT, to

increase people's ability to use three selfing repertoires (self-as-content, self-as-process, and self-as-context) with intentionality. The workshop also addresses how values-based behavior is impacted by both flexible and inflexible selfing and identifies features of this process that are unique to people with complex cultural identities.

Educational Objectives:
1. Describe features of the three selfing repertoires (self-as-content, self-as-process, and self-as-context) that may be present in people with complex cultural identities.
2. Discuss how hierarchical framing contributes to healthy (and flexible) selfing.
3. Identify how values-based behavior may be impacted by both flexible and inflexible selfing.

52. Analyzing functionally the personal history
Panel
Components: *Conceptual analysis*
Categories: RFT / RGB / language, Theory and philosophical foundations, CBS
Target Audience: Beginner, Intermediate, Advanced

Chair: Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz
Carmen Luciano, Ph.D., University of Almería, Spain
Jordan Belisle, Ph.D., Missouri State University
Niklas Törneke, M.D., NT Psykiatri

The history of a behavioral event is at the core in mostly whatever conceptualization of psychology. A contextual and functional approach has been, from the very beginning, very clear and very explicit about the function of analyzing the behavioral event as a present event in the context of the individual psychological history. Consequently, to analyze functionally any behavior, either client's behavior or participant's behavior or therapist's behavior, we need to jump somehow in the whole event. Behavior analysis has for a long time followed specific procedures for analyzing behavior in the context of its history. The question is to discuss the different ways we follow from the analysis of behavioral events based on contingencies to those when relational behavior is involved. This panel is oriented to discuss these points in as many regards as the panelists consider.

Educational Objectives:
1. List conceptual tools recently developed to understand derived relational responding.
2. Describe procedures in which we analyze the personal history in contextual behavioral science.
3. Discuss the need of new approaches to analyze the personal history from a functional-contextual standpoint.

61. Life NOW: A FACT Telehealth Intervention for Stressed Healthcare Workers
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Role play*
Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Burnout or stress overload
Target Audience: Beginner, Intermediate

Patti Robinson, Ph.D., Mountainview Consulting Group

Prior to the coronavirus pandemic, health care worker burnout rates were high, ranging from 30 to 50%. Now, current estimated rates range from 40% t0 70%. A recent review of 14 studies evaluating the use of ACT to address burnout found that 13 studies reported an ACT to be associated with a positive outcome on in at least one outcome measure subscale (Towery-Swift, Lauvrud, & Whittington, 2022). While these findings are encouraging, we need service delivery models that address stigma and other barriers that limit engagement in ACT informed interventions. Additionally, we need models of service delivery that can be scaled to meet the burgeoning needs in today's world. This 1.5-hour workshop will briefly describe the development of a Telehealth service informed by Focused Acceptance and Commitment Therapy (FACT), including usability information and initial and follow-up

call activities. Participants will learn practical tools for growing the resilience of healthcare workers and other frontline workers in virtual and face-to-face venues.

Educational Objectives:
1. Describe the prevalence of burnout and stress overload among healthcare workers and the barriers to their use of ACT and other treatments.
2. Discuss the evidence for use of ACT and FACT to enhance healthcare worker resilience.
3. Demonstrate how to use tools and methods from the Life NOW program to provide Telehealth and/or in-person services to healthcare workers seeking assistance with stress overload or burnout.

62. RFT Made Simple
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises*
Categories: RFT / RGB / language, Theory and philosophical foundations, Applying RFT to ACT practice
Target Audience: Beginner

Richard Bennett, ClinPsyD, University of Birmingham, UK
Joe Oliver, Ph.D., University College London/ Contextual Consulting

Have you noticed how language sometimes gets in the way of your clients living the kind of lives they want for themselves? Are you interested in talking to your clients more precisely and efficiently? Have you ever openly wept whilst trying to work your way through an RFT article?
Would you like to hear a working clinician share and demonstrate how RFT has enriched their practice? If you can answer 'Yes' to more than one of these questions, then this workshop has been designed for you. RFT is a powerful and elegantly simple theory that can make a big difference in terms of the precision, speed and focus of your ACT work. This workshop will present the core concepts of RFT in an accessible manner with a clear focus on practical application. No previous knowledge of RFT will be assumed, although some experience of using behavioural principles in the service of your work as a therapist, coach, or educator will be helpful.

Educational Objectives:
1. Describe the key principles of RFT as a contextual behavioural science account of language and cognition.
2. Explain how to shape their intentional use of language in the service of increasing therapeutic efficiency and efficacy.
3. Demonstrate how to use the ACT Matrix as a tool for mapping co-ordination, opposition, and deictic framing as part of a case conceptualisation.

64. Rapport-building and ACT interventions for the lonely, disgruntled, (and possibly angry) male client: Quebec Chapter Sponsored
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Processes of change, Methods/approaches for individual variation, Men's mental health, Toxic masculinity, Functional Male Roles, Manosphere, Radicalization, Loneliness Epidemic, ACT, FAP,
Target Audience: Beginner, Intermediate, Advanced

Francis Lemay, Ph.D., Université Laval
Drew Carr, Ph.D., VA Sierra Nevada HCS
Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

In online communities of the "Manosphere" (Incels, MGTOW, MRA), anger-fueling rhetoric is spread daily, encouraging vulnerable individuals to isolate from real-life friends and relatives to virtually gather in communities promoting ideals reminiscent of radicalization. Loneliness and social isolation are significant factors of both mental health problems in men and contribute to radicalization and

polarization of worldviews. Given worldwide public health guidelines to socially distance during the pandemic, we suspect that mental health professionals will need to adjust their interventions to work with increasingly angry, disgruntled, lonely men. This population can pose a challenge for several reasons, not the least of which is a significant incongruence between clients' expressed and therapist's deeply held values. We propose this workshop to identify the processes leading men to adopt misogynistic and other similar "values" (or rather, arbitrary rules) promoted within the "Manosphere." We also provide strategies to develop rapport with such clients, in order to successfully alleviate their pain and help them develop more functional, pro-social beliefs, values, and everyday behaviors.

Educational Objectives:
1. Functionally analyze the isolated, disgruntled, potentially angry client using the six ACT processes.
2. Apply the five rules of FAP in order to properly build rapport and facilitate the use of ACT strategies.
3. Demonstrate how to use the therapist's ACT Matrix to defuse, accept, and choose workable in-session behaviors when working with people expressing contradictory values and/or using "triggering" speech/behaviors.

65. Pointing towards CRAFT: How to connect families struggling with addiction with CBS-aligned, evidence based practice
Invited
Components: *Didactic presentation*
Categories: Health / behavioral medicine, Families, Alcohol/substance use concerns
Target Audience: Beginner

Cordelia Kraus, LPC, CADC-I, Certified CRAFT clinician, Vital Space, LLC

If you had a client struggling with their partner or child's substance use, would you know the evidence-based resources to support your client?
These families are usually offered one option: a treatment-as-usual that was never intended to be treatment at all.
We, as clinicians, have the power to help these families, and by extension their loved ones, by learning about an evidence-based approach called CRAFT (community reinforcement and family training). And you don't need extensive training to help… simply knowing what it is and directing someone towards it is enough.
CRAFT-based approaches go beyond support to offer families transformative skills and perspectives on substance use, processes of change, empathetic communication, strategic behavioral responses, and increased connection with valued living. Engagement in CRAFT significantly increases the chance of their loved one entering into treatment (approaching 70% vs 20% TAU), reduces substance use, and improves family well-being.
This talk covers CRAFT-based approaches, including a composite of CRAFT and ACT called "Invitation to Change", and will give you what you need to connect families with this work.

Educational Objectives:
1. Describe the basic skills and perspectives that CRAFT-based approaches offer.
2. Explain how CRAFT-based approaches, the Invitation to Change Approach in particular, is strongly aligned with CBS.
3. Access CRAFT-based resources available for clients and for providers.

66. Implementing Process-Based Therapy in Clinical Practice, Supervision, and Research: Process-Based Therapy SIG Sponsored
Panel
Components: *Conceptual analysis*
Categories: Processes of change, PBT
Target Audience: Beginner, Intermediate, Advanced

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

Chair: Clarissa Ong, Ph.D., Boston University
Daniel Maitland, Ph.D., Bowling Green State University
Steven Topper, M.A., Symmetry Counseling
Carolyn Williams, B.A., Portland DBT Institute
Eric Lee, Ph.D., Southern Illinois University

Process-based therapy (PBT) is a new model of psychological assessment and intervention based on evolution science principles. It reconceptualizes how we do therapy, not what we do in therapy, because evidence-based treatment technologies have already been largely established. PBT approaches treatment with an idiographic lens and aims to improve well-being of specific people in their unique context. There have been many theoretical discussions on PBT (e.g., Hayes et al., 2019; Hofmann & Hayes, 2019) and, recently, Hofmann et al. (2021) published a skills training manual to guide clinicians on how to use PBT in their practice. Given that many clinicians and researchers interested in PBT are still learning how to implement PBT in their clinical practice and research, the objectives of this panel are to describe and provide examples of how psychologists using different treatment modalities (e.g., ACT, FAP, DBT) are integrating PBT principles into their work. Panelist will discuss how they deliver PBT and adapt their research methods to cohere better with the idiographic, functional goals of PBT.

Educational Objectives:
1. Define key features of process-based therapy.
2. Describe how to use process-based therapy in clinical practice.
3. Describe how to integrate process-based therapy principles into research.

73. Contextual Relating, Responding & Reinforcing: Adopting a process-based approach to Functional Analysis in ACT.
Workshop
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Professional development, Behavior analysis, Functional Analysis
Target Audience: Intermediate, Advanced

Jim Lucas, BSc., PG Cert. PG Dip., ACBS Peer-reviewed ACT Trainer

ACT therapists may treat functional analysis as an information-gathering exercise about the client's behaviour elsewhere and organise it into a coherent description of cause and effect to explain their suffering. Such a response distracts from the functional contextual principles underlying ACT and runs the risk of mentalistic applications (Fryling & Hayes, 2011).
The Interbehavioral perspective steers practitioners toward 'behavioural fields' and unfolding behavioural streams between the therapist and the client (Sandoz, 2020). By watching and acting on observable behaviours, clinicians can improve their functional analysis skills.
A further problem occurs when using Skinner's three-term contingency because it struggles to capture the contextual relating processes described in the psychological flexibility model. Using the Three R's approach to functional analysis (Lucas, 2021), attendees will practice observing and intervening on relating processes, aversive responding patterns, and positively or negatively reinforcing consequences, as they occur in conversation.
Through live demonstration, small group practice and some brief theoretical description, clinicians will go away with a more precise and powerful approach to functional analysis firmly rooted in the behavioural tradition.

Educational Objectives:
1. Implement a dynamic process-based approach to Functional Analysis using the Three Rs Approach.
2. Recognize observable behaviours between the therapist and the client by watching and responding to functional relationships.
3. Describe the difference between processes and procedures in Acceptance and Commitment Therapy.

74. Acceptance and Commitment Therapy for Addressing Health Disparities
    Symposium
Components: *Original data*
Categories: Social justice / equity / diversity, Clinical intervention development or outcomes, ACT, HIV, Smoking Cessation, Stigma, Substance use
Target Audience: Beginner, Intermediate, Advanced

Chair: Jonathan Bricker, Ph.D., Fred Hutchinson Cancer Research Center
Discussant: Kenneth Fung, M.D., University of Toronto
Margarita Santiago-Torres, Ph.D., Fred Hutchinson Cancer Center
Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Maile Karris, M.D., UC San Diego

There are marked health disparities in marginalized populations, including those with racial/ethnic minority backgrounds and people living with HIV. Social factors including discrimination, racism, and self-stigma are major barriers to their access to care. Despite the need for treatment and these barriers, the field of behavioral research has historically lacked the inclusion of marginalized populations, which reduces generalizability of study findings. The aim of this symposium is to present data of the use of Acceptance and Commitment Therapy (ACT) to help racial/ethnic minority groups quit smoking and addressing self-stigma in people living with HIV. First, Dr. Bricker will present results on the efficacy of an ACT-based application for smoking cessation among Black adults. Second, Dr. Santiago-Torres will present results on the efficacy of an ACT-based website for smoking cessation among Hispanic/Latinx adults. Third, Dr. Luoma will present results on ACT for addressing self-stigma related to HIV. Fourth, Dr. Karris will discuss whether ACT requires tailoring to fit stigmatized populations living with HIV. Dr. Fung will discuss the implications of these studies and will moderate questions.

- Efficacy and Utilization of an Acceptance and Commitment Therapy-based Smartphone Application for Smoking Cessation among Black Adults: Analysis of the iCanQuit Randomized Trial
    Jonathan Bricker, Ph.D., Fred Hutchinson Cancer Research Center
    Kristin E. Mull, M.S., Fred Hutchinson Cancer Research Center
    Brianna M. Sullivan, M.S., Fred Hutchinson Cancer Research Center
    Diana Kwon, M.S., Fred Hutchinson Cancer Research Center
    Nicole Nollen, Ph.D., University of Kansas
    Michael Zvolensky, Ph.D., University of Houston
    Margarita Santiago-Torres, Ph.D., Fred Hutchinson Cancer Research Center

    Black adult smokers are less likely to seek treatment and to succeed in quitting compared with other racial groups. The lack of efficacious and engaging trials for smoking cessation further contributes to this disparity. In a secondary analysis, we explored the efficacy of an Acceptance and Commitment Therapy (ACT)-based smartphone application (iCanQuit) vs. a US Clinical Practice Guidelines (USCPG)-based smartphone application (QuitGuide) for smoking cessation among Black adults. A total of 554 Black smokers were randomized to either receive iCanQuit (n=274) or QuitGuide (n=280). Retention rate was 89% at 12-months and did not differ by arm. Complete-case 30-day point-prevalence abstinence was 28% for iCanQuit vs. 20% for QuitGuide participants at 12-months (OR=1.60 95% CI: 1.03, 2.46). The iCanQuit application was more engaging than QuitGuide. Increased acceptance of cues to smoke mediated the effect of treatment on cessation. iCanQuit application was more efficacious and engaging for smoking cessation among Black adults than the USCPG-based QuitGuide application. To determine whether iCanQuit may alleviate cessation-related disparities among black adults, adaptation and testing of the iCanQuit application is warranted.

- Web-Delivered Acceptance and Commitment Therapy for Smoking Cessation: Is it Engaging and Effective for U.S. Hispanic/Latinx Adult Smokers?
    Margarita Santiago-Torres, Ph.D., Fred Hutchinson Cancer Research Center
    Diana Kwon, M.S., Fred Hutchinson Cancer Research Center
    Kristin E Mull, M.S., Fred Hutchinson Cancer Research Center
    Brianna Sullivan, M.S., Fred Hutchinson Cancer Research Center
    Jonathan Bricker, PhD, Fred Hutchinson Cancer Research Center

Hispanic/Latinx adults face major barriers to receiving and utilizing cessation treatments compared with other racial/ethnic groups. The lack of efficacious and accessible smoking cessation treatments for this population further contributes to this disparity. In a secondary analysis, we explored the efficacy of an Acceptance and Commitment Therapy (ACT)-based website (WebQuit.org) versus a US Clinical Practice Guidelines (USCPG)-based website (Smokefree.gov) for smoking cessation among Hispanic/Latinx adults. A total of 222 Hispanic/Latinx smokers were randomized to receive WebQuit (n=101) or Smokefree (n=121) for 12-months. Retention rate was 88% at 12-months. WebQuit participants had nearly double the odds of smoking cessation compared to Smokefree participants at 12-months (40% vs. 25%; OR=1.93 95% CI: 1.04, 3.59). Although WebQuit participants engaged more with the website than Smokefree participants through multiple indicators of treatment engagement, mediation analyses did not show evidence that differences in quit rates were mediated by level of engagement. In a nationwide sample with high participant engagement, this study provides evidence that an Acceptance and Commitment Therapy-based digital interventions may be efficacious for helping Hispanic/Latinx adults quit smoking.

- Psychological flexibility processes in a stigma coping intervention based on Acceptance and Commitment Therapy for people with HIV who inject drugs: An RCT in St. Petersburg, Russia
  Jason Luoma, Ph.D., Portland Psychotherapy Clinic
  Sarah L. Rossi, Boston University
  Yuliia Sereda, Independent Research Consultant
  Nikolai Pavlov,
  Olga Toussova,

People with HIV who inject drugs experience intersecting forms of stigma that increase suffering and impede health care seeking. This RCT evaluated an ACT-based stigma intervention with 100 adults with HIV and past 30 days injection drug use in Russia. Participants were randomized to either a six-hour, 3-session group intervention based on ACT or usual care. At 1 month, HIV and substance use stigma changes did not differ between groups. At six months, participants in the intervention group were more likely to initiate anti-retroviral therapy (20% vs. 3%) and to engage in substance use care (23% vs. 7%) than controls. Intervention participants also had less frequent injections in the previous 30 days at six months. There were no significant between-group differences on change in substance-use related psychological flexibility or stigma avoidance at any time point. Change on a measure of stigma-related values disengagement was higher in the active treatment arm compared to controls at one month, but not at six months. Additional contextual information will be reported in an attempt to understand these results.

- Does Acceptance and Commitment Therapy Require Tailoring to Fit Stigmatized Populations such as Older People with HIV?
  Kathryn Wehrmeyer, Medical College of Georgia , Augusta University
  Jessica Montoya, University of California San Diego
  Edward Seefried, University of California San Diego
  Velma Justice-Royster, University of California San Diego
  David J Moore, University of California San Diego

Older People With HIV (OPWH) experience high rates of chronic pain due to the intersectionality of HIV and psychosocial factors (trauma, stigma, ageism, isolation, and substance use). Acceptance and commitment therapy (ACT) promotes acceptance of internal experiences (negative thoughts and painful sensations), identification of personal values and goals, and encourages actions that bring life meaning. This approach may improve the pain experience while addressing intersecting disparities of health. To determine acceptability of ACT inductive thematic analysis was applied to focus group transcripts from 6 OPWH (2 male, 4 female, ≥ 50 years) whom completed ACT for pain. Major themes include: positive experience with group therapy, interaction of pain and psychosocial factors, improvement of coping strategies, and minimal need for adaptation. Overall, minimal alterations are necessary to address the needs of OPWH due to the broad applicability of ACT. Alteration of ACT's content schedule could better orient groups with goals of ACT and including examples attuned to the needs of OPWH (emphasis on relationships, emotions and stigma) during training may enhance contextualization of ACT for OPWH.

Educational Objectives:
1. Describe social factors, such as discrimination, racism, and self-stigma that are major barriers to access to care in marginalized populations.
2. Demonstrate an appreciation for the use of Acceptance and Commitment Therapy to help reduce health disparities in marginalized populations.

3. Demonstrate skills in the interpretation of research findings and drawing of appropriate conclusions.

76. Processes of Change in Novel ACT-Based Eating Disorder Interventions
Symposium
Components: *Conceptual analysis, Didactic presentation, Literature review, Original data*
Categories: Processes of change, Mobile or digital technology, Eating disorders
Target Audience: Beginner, Intermediate, Advanced

Chair: Rhonda Merwin, Ph.D., Duke University, School of Medicine, Dept. of Psychiatry and Behavioral Sciences
Ashley Moskovich, Ph.D., Duke University, School of Medicine, Dept. of Psychiatry and Behavioral Sciences
Carly Onnink, B.S., SUWS of the Carolinas
Catherine Kakoulakis, B.Sc., University of Cyprus
Georgia Polyviou, B.S., University of Cyprus

Eating disorders are serious problems that decrease the quality and longevity of individuals lives. This symposium will (1) review the current state of evidence on ACT for eating disorders (EDs), in light of recent developments in process-based CBT and the Contextual Behavioral Science Research Task Force Report, and (2) present original data on processes of change in EDs in the context of novel, ACT-based digitized and mHealth interventions. The first paper will frame the discussion with a systematic review of ACT with EDs methods and outcomes. The second paper will present data on increased body-image flexibility (BIF) as a process of change in a digital, gamified intervention for EDs. A third paper will present data on explorations of lab measurement of BIF. A fourth paper will present on the role of psychological flexibility in body image distortions in virtual reality. A final paper will present data on psychological flexibility as a mediator in a virtual reality values-augmented exposure intervention on body-image concerns among young females at-risk for developing an ED.

- A Systematic Review of the Current Evidence on ACT for Eating Disorders
    Carly Onnink, B.S., SUWS of the Carolinas
    Yvonni Konstantinidou, BS, University of Cyprus
    Ashley Moskovich, PhD, Duke University School of Medicine
    Maria Karekla, Ph.D., University of Cyprus
    Rhonda M. Merwin, Ph.D., Duke University School of Medicine

    ACT is increasing used to treat eating disorders (EDs). However, there is only one literature review on ACT for EDs published in 2013. Since that time, several more studies have emerged. We present a systematic review of the evidence of ACT for EDs through January of 2022. We searched PsychInfo and PubMed and included treatment studies using 3 or more ACT processes with adolescents or adults with anorexia or bulimia nervosa, binge eating and purging disorder. We excluded studies focused on obesity and weight loss and studies targeting body image (in the absence of ED symptoms). We also excluded prevention studies. Taking the perspective that knowledge is cumulative and iterative, we included all intervention study methods, including case reports, case series, open trials, multiple baseline designs, and randomized controlled trials. We report on methodological rigor, outcomes and need for future research, and consider the findings in light of recent developments in the field.

- Body Image Flexibility as a Process of Change in Digital, Gamified Eating Disorder Intervention
    Rhonda M. Merwin. PhD, Duke University School of Medicine
    Patrisia Nikolaou, PhD,
    Ashley Moskovich, PhD, Duke University School of Medicine
    Michael Babyak, PhD,
    Maria Karekla, PhD, University of Cyprus

    Body image flexibility (BIF) refers to the ability to have difficult body-related thoughts/feelings without unnecessary attempts to avoid/escape these experiences and without these experiences limiting one's life. A growing body of evidence suggests that BIF might be considered a process of change in EDs, and/or offer protection against ED development, however, data are limited. The current study examined changes in BIF in a digital, gamified early intervention for EDs. Adolescents and young adults at risk for an ED were randomized to either the ACT intervention or a waitlist control. We examined the interaction between

change in BIF and group as a predictor of Weight Concerns Scale (WCS) scores at end-of-treatment, and Eating Disorder Examination Questionnaire (EDE-Q) scores at 1-month follow-up. Increased BIF was associated with lower WCS scores at end-of-treatment, an association concentrated almost entirely in the ACT condition. Increased BIF also predicted lower EDE-Q scores at follow-up. This study suggests BIF as a potential process of change and directions for future research.

- Explorations in Behavioral Measurement of Body Image Flexibility
  Ashley A. Moskovich, PhD, Duke University, School of Medicine
  Rhonda M. Merwin, Ph.D., Duke University, School of Medicine

  The assessment of psychological flexibility is often limited to self-report measures. This is a major limitation in ACT research, which would benefit from behavioral measures of mid-level terms. It is also limiting, as funders (such as NIMH) increasing require rigorous measurement of engagement of target mechanisms of change. The current paper reports on explorations in behavioral measurement of body-image flexibility (BIF). Specifically, we examine whether behavioral responses to body and weight-related stimuli correspond with self-report assessment of BIF using the Body-Image Acceptance and Action Questionnaire (BI-AAQ). Seventy-six women completed a hypervigilance-avoidance attention task with body weight and neutral words. The correlation between differences in reaction time to body weight versus neutral words and the BI-AAQ was .21, p=.067. We will discuss how the findings inform current understanding of BIF, and future directions in behavioral assessments of psychological flexibility.

- Body image perception distortions for own vs. other vs. inanimate objects estimation among individuals at low and high-risk for an Eating Disorder and the role of psychological flexibility
  Yvoni Konstantinidou, B.S., University of Cyprus
  Georgia Polyviou, BS, University of Cyprus
  Maria Karekla, PhD, University of Cyprus

  Dissatisfaction with body image is a very common concern, mainly among females across different age groups especially in Western cultures. Body image dissatisfaction is hypothesized to result in distorted body perceptions, but there is lack of studies examining discrepancies between own body image and ideal body image, normative perceptions of human body sizes (e.g., the ability to correctly perceive human bodies in terms of normality) and general proportion estimation (e.g., of inanimate objects). Preliminary work proposes that psychological inflexibility is related to disordered eating-related cognition and may affect body image perception. This study investigates distorted body image perception of individuals deemed to be either at low (N&#3f80) or high-risk (N&#3f46) for developing an eating disorder and the role of psychological flexibility in body perception. Participants were university student females aged 18-25 years old. Virtual reality is utilized as a means to create one's avatar to their likeness and is used as one means of assessing body image distortion.

- Psychological Flexibility as a Mediator of Body Image Concerns: A Virtual Reality Values Augmented Exposure Early-Intervention for Females at High-risk for Eating Disorders
  Catherine Kakoulakis, BS, University of Cyprus
  Georgia Polyviou, BS, University of Cyprus
  Maria Karekla, PhD, University of Cyprus

  Body image dissatisfaction is a common experience which can contribute to the development of eating pathology when the individual's psychological functioning does not involve psychological flexibility. Body image concerns exist on a continuum therefore the development of eating disorders can be prevented when targeting those issues on an early point of this continuum, by concentrating on individuals at high-risk for developing an eating disorder. This study investigated whether psychological flexibility serves as a mediator between a multi-user virtual reality intervention based on Acceptance and Commitment Therapy -and specifically, on values clarification and exposure therapy- and body image concerns, in a sample (N&#3f46; Age range: 18-25years old) of young women at-risk for eating disorder development. It examined whether improvements in perceived body image acceptance following the intervention were mediated by changes in psychological flexibility. Findings can help design effective interventions based on user-friendly virtual reality technology, both for preventing eating disorders and promoting the acceptance of body image through the cultivation of psychological flexibility.

Educational Objectives:
1. Describe the evidence for ACT for eating disorders, including body-image flexibility as a process of change, and in relation to the needs identified in the CBS Research Task Force Report.
2. Identify behavioral measurement strategies for body-image flexibility.

3. Describe the relationship between psychological flexibility and body perception in a virtual reality paradigm.

77. Derived Relational Responding Meets Diversity, Equity, and Inclusion: Contributions from the field

Invited
Components: *Didactic presentation, Literature review, Original data*
Categories: Social justice / equity / diversity, RFT / RGB / language, Racial Prejudice, Diversity, Equity, and Inclusion, Derived Relational Responding.
Target Audience: Intermediate

Tahcita Mizael, Ph.D., University of Sao Paulo (USP)

This talk aims to present the audience with some contributions from behavior analysis and Relational Frame Theory to both understanding and reducing racial and other types of prejudices. Starting with a review of studies from the field, I will present a few studies that used derived relational responding to assess and/or reduce racial prejudice. Then, other studies with related phenomena (e.g., gender issues) will be discussed. Finally, I will suggest some avenues of research that could use derived relational responding to understand act upon other DEI issues, such as feminism, and intersectionality.

Educational Objectives:
1. List some papers that used behavior analysis to study racial issues (e.g., racial bias, racial prejudice, racism).
2. Describe studies that used derived relational responding to reduce racial prejudice.
3. Discuss new research questions and/or design experiments aimed at using derived relational responding to study diversity, equity, and inclusion issues.

78. The Diffusion of Defusion: Disseminating and Promoting Contextual Behavioral Science through Popular Media

Panel
Components: *Didactic presentation, Strategic planning*
Categories: Dissemination or global health strategies, Professional development, Mobile/Digital Technology
Target Audience: Beginner

Chair: Melissa Miller, M.S., Wichita State University
Katy Rothfelder, M.A., Austin Anxiety and OCD Specialists
Diana Hill, Ph.D., Private Practice
Debbie Sorensen, Ph.D., ImpACT Psychology Colorado
Jennifer Payne, Ph.D., Johns Hopkins University
Jelena Kecmanovic, Ph.D., Arlington/DC Behavior Therapy Institute

From the most accessible self-help books to the most abstruse research articles, the CBS community is growing rapidly. In recent years, we've seen ACT and CBS-based books become best sellers, podcasts become chart-toppers, and ACT concepts flourish in popular journalism and social media. With increasing ease of access and abundance of choice, creating meaningful, scientifically-informed and diverse content has never been more important. How can experts in the field more effectively reach the general public, so they can benefit from these concepts? This panel, consisting of content creators (podcasters, authors, and social media content creators) who are also researchers and/or therapists, will incorporate a broad range of experiences as they discuss the contextual behavioral underpinnings of dissemination — including the behavioral process involved in creating user-friendly content, content-consumption behavior, and the prosocial behavior of disseminating evidence-based work. Panelists will discuss the practical use of various dissemination tools for teaching, learning, and disseminating information about CBS, ACT, and related research and therapeutic approaches through accessible language and platforms.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

Educational Objectives:
1. Describe the role of podcasts and media in disseminating Contextual Behavioral Science through accessible platforms.
2. Explain the behavioral mechanisms involved in creating and consuming media.
3. Elucidate processes involved in disseminating equitable, diverse, and prosocial information to mass populations.

<div style="background:black;color:white;text-align:center">Sessions Recorded Saturday, June 18</div>

89. Interpersonal Behavior Therapy: Using Principles for Interpersonal Change: Clinical Behavior Analysis SIG Sponsored
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Behavior analysis, Clinical intervention development or outcomes, Interpersonal therapy
Target Audience: Beginner, Intermediate

Glenn Callaghan, Ph.D., San Jose State University
William Follette, Ph.D., University of Nevada, Reno

Interpersonal Behavior Therapy (IBT, Callaghan & Follette, 2020) is inspired and influenced by Functional Analytic Psychotherapy (FAP, Kohlenberg & Tsai, 1991) focusing on the interpersonal interaction dynamic as the unit of intervention. IBT uses clinical behavior analysis to conceptualize client problems and effect client change. The mechanisms of clinical change are the direct contingent responding to client behaviors in-session by the therapist as well as targeted reinforcement provided by community members. This workshop will discuss the need for an interpersonal focus in contextual behavioral science therapies, the principles and process of IBT (highlighting differences from FAP), and the foundation of IBT in assessment and case conceptualization. Workshop attendees will learn to observe in-session client behaviors in role plays or pre-recorded interactions and how to respond to in-session improvements with representative natural reinforcers. Attendees will also learn the importance and method of an assessment of community members for the generalization of client responding out of session. The workshop will highlight more advanced IBT skills and essential training, supervision, and ethical development in conducting IBT.

Educational Objectives:
1. Describe the principles and clinical behavior analytic foundation of Interpersonal Behavior Therapy (IBT).
2. Create a basic assessment and conceptualization of IBT for both clients and community members.
3. Demonstrate how to respond to (differentially reinforce) client improvements in-session and make efforts to generalize those responses to community members.

90. Functional Vulnerability: Navigating Consensual Intimacy Across Differentials of Power and Privilege
Workshop
Components: *Didactic presentation, Experiential exercises*
Categories: Social justice / equity / diversity, Supervision and training, Power and Privilege
Target Audience: Intermediate, Advanced

Emily Sandoz, Ph.D., University of Louisiana at Lafayette
MaKensey Sanders, M.A., University of Louisiana at Lafayette, Louisiana Contextual Science Research Lab
Janani Vaidya, M.S., National Louis University; Louisiana Contextual Science Research Group
Eva Lieberman, M.S., Western Michigan University
Melissa Miller, M.S., Wichita State University
Michael May, M.A., LPCC, Compassionate Behavioral Healthcare, LLC

Vulnerability is emphasized in several models of intimacy (e.g., Reis & Shaver, 1988), including from behavioral (Cordova & Scott, 2017) and contextual behavioral (Kanter et al., 2020; Kuczynski et al., 2020) perspectives. Colloquially defined as susceptibility to harm, vulnerability involves responses historically consequated by social aversives (Cordova & Scott, 2017). Thus intimacy is fostered when socially risky behavior is met with reinforcement. Applied to intervention, some aim to train intimacy through skill-building emotional expression and responsiveness (Kanter et al., 2018). These "skills" function differently, however, when degrees of power and privilege differ among the people involved. For instance, harmful dynamics that can emerge with vulnerability across ethnic groups have been explicitly described (e.g., white tears; Accapadi, 2007; Menakem, 2021). This experiential workshop is based on a behavioral conceptualization of vulnerability that centers relative power and privilege through the lens of appetitive control, which is key in recent behavioral conceptualizations of privilege and consent (LCSRG, 2021, in press). Participants will practice tracking relative power, vulnerability, and appetitive functional relations in individual, paired, and group experiential exercises.

Educational Objectives:
1. Track relative power across social contexts.
2. Explain how to track relative vulnerability across social contexts.
3. Track relative appetitive and aversive functional relations across social contexts.

92. Variation with Vignettes: Responding to Clinical Presentations from Different Points on the Hexaflex: Process-Based Therapy SIG Sponsored
   Panel
Components: *Case presentation, Strategic planning*
Categories: Methods/approaches for individual variation, Processes of change, Case Conceptualization and Intervention
Target Audience: Beginner, Intermediate, Advanced

Chair: Lou Lasprugato, M.A., Sutter Health
Discussant: Richard Bennett, ClinPsyD, University of Birmingham, UK
Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Miranda Morris, Ph.D., True North Therapy and Training
Joe Oliver, Ph.D., University College London/ Contextual Consulting

Behavioral variation is not only important to the adaptive functioning of our clients, it's a critical component of our therapeutic responsiveness. Being able to read for and pivot towards different core processes of psychological flexibility allows for a more robust case conceptualization and access to a broader range of interventions that can be applied to a given clinical presentation, naturally enhancing our flexibility as clinicians. And yet, competently and coherently making use of different processes, or functional lenses, can be challenging, to say the least.
This panel discussion will call upon experts in acceptance and commitment therapy (ACT) to offer an idiographic functional analysis and proposed process-based intervention in response to challenging clinical video vignettes. There will be three rounds, with each offering a distinct way of targeting processes, and thus, a unique learning opportunity for audience members. Time will be allotted for questions and comments regarding rationale for interventions and other considerations from a contextual behavioral perspective.

Educational Objectives:
1. Provide a brief process-based case conceptualization.
2. Compare and contrast idiographic functional analyses with respect to psychological flexibility.
3. Describe a process-based intervention from one or more points on the Hexaflex.

93. ACT for Clients Who Scare Us
   Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Health / behavioral medicine, High Risk Clients
Target Audience: Intermediate, Advanced

Shane O'Neil-Hart, LCSW, Lyra Health
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

What happens when we take the principles of ACT to their conclusion - when we apply them to the most terrifying and disturbing content our clients reveal? Do we ask our clients to accept thoughts or urges to hurt themselves or others, to make peace with disturbing images or memories? Is defusion always the answer or do we sometimes want to lean into thoughts that scare us? ACT is increasingly being used with suicide, BPD, psychosis, and other high-risk presentations. The six core processes of ACT can be used in integrated and fluid ways to work with ourselves and clients. Particularly those clients who scare us, worry us, or shape us into places of unhelpful action or inaction. This workshop will focus on how to conceptualize and treat these problems from an ACT perspective. It will feature case examples, demonstration, and experiential exercises.

Educational Objectives:
1. Conduct a basic functional analysis of difficult behaviors including suicidal and homicidal expression.
2. Identify how avoidance and fusion support the maintenance of harmful and ineffective client behaviors.
3. Apply acceptance and defusion skills to disturbing content.

94. Snap Judgements, Assumptions, and Biases: A Scientist-Practitioner RFT Panel
Panel
Components: *Conceptual analysis, Literature review, Original data*
Categories: RFT / RGB / language, Theory and philosophical foundations, Bias, Judgement, Relational Responding under Uncertainty
Target Audience: Intermediate, Advanced

Chair: Steven Hayes, Ph.D., University of Nevada, Reno
Patrick Smith, M.S., University of Nevada Reno
Alison Stapleton, B.A., University College Dublin
Jordan Belisle, Ph.D., Missouri State University
Mike Johnston, Ph.D., Fit Learning Bay Area

Since the development of RFT, the high frequency of failure on a range of relational tasks has been under researched. Addressing this gap, researchers have begun advancing the literature on both responding under uncertainty and inaccurate, imprecise derived relations. These phenomena have been dubbed 'Known-Unknowns" (KUs). Simply put, "we know that we do not know, which is itself a kind of stimulus relation" (Hayes et al., 2001, p.31). Beginning with a brief introduction to KUs and their current evidence base, this panel will examine recent developments and future directions for KUs in RFT research. Panelists will describe conceptual implications and methodological considerations for KUs with reference to recent extensions, including Relational Density Theory. Panelists will conclude by discussing means of promoting multi-level, multi-dimensional, process-based, prosocial, and practical KU work that advances the field and pushes RFT further into the mainstream.

Educational Objectives:
1. Describe the latest Known-Unknown relational responding advancements in RFT research.
2. Discuss the implications of Known-Unknown relational responding for RFT and beyond.
3. Identify the needs for future research in RFT for Known-Unknown relational responding.

103. The Perfectionistic Therapist: How Aiming for Perfect Holds Us Back and What We Can Do About It
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Perfectionism, Self Care
Target Audience: Beginner, Intermediate, Advanced

Jennifer Kemp, MPsych(Clinical), Adelaide Behaviour Therapy

As therapists, we want to help people, however, our work is characterized by uncertainty and ambiguity. Clinical outcomes are impossible to control. Not wanting to fail, we can feel considerable pressure to always perform at our best. As Wittenberg and Norcross (2001) pithily said, delivering therapy presents "a formidable assault on a psychotherapist's fantasy of perfection".
Starting with a concise introduction to 'the perfectionistic therapist', participants will learn how unhelpful processes develop and are maintained using a contextual behavioral framework. Participants will then conduct a functional analysis of their own unhelpful patterns and use this understanding to identify the minimal changes they can make for the biggest personal impact.
The remainder of the workshop will be focused on skills development. With an approach that engages 'head, heart, and hands', participants will explore the specific strategies needed to address unhelpful perfectionistic habits. Participants will leave the workshop understanding how to apply psychological flexibility and self-compassion to balance their desire to help and high expectations of themselves with the imperfect reality of the therapeutic process.

Educational Objectives:
1. Describe a clear and concise formulation of perfectionism and how this can affect therapists in their practice.
2. Describe the function of their own unhelpful perfectionistic behaviors, including how these develop and are maintained.
3. Apply behavioral approaches to build greater psychological flexibility and self-compassion when working as a therapist.

104. The Compassionate-Mind Approach to Working with Hoarding Disorder
   Symposium
Components: *Case presentation, Conceptual analysis, Literature review, Original data*
Categories: Clinical intervention development or outcomes, Processes of change, Hoarding Disorder
Target Audience: Intermediate, Advanced

Chair: Leo Yoke, A.A., San Francisco Center for Compassion-Focused Therapies
Discussant: Laura Silberstein-Tirch, Psy.D., Center for Compassion Focused Therapy
Troy DuFrene, M.A., BCBA, San Francisco Center for Compassion-Focused Therapies
Rea Berg, B.A., University of Denver
Chia-Ying Chou, Ph.D., San Francisco Center for Compassion-Focused Therapies

Compassion-Focused Therapy (CFT) and Compassionate Mind Training (CMT) have been applied to work with a wide range of clinical and nonclinical populations. This symposium will present research findings and clinical observations connected to three studies about these approaches. First, a series of studies examines the effectiveness of CFT at reducing hoarding-symptom severity and psychological factors associated with hoarding. Second, two studies examine the effects of CMT on well-being and communication improvements among family and friends of people experiencing hoarding difficulties, with the first study using ecological momentary assessment (EMA), behavioral skills training, single-case experimental design. And third, a qualitative study investigates professional well-being and challenges encountered by professional organizers in their work with individuals suffering with hoarding issues and proposes a CMT protocol tailored for them. All three studies propose advantages a CFT/CMT approach has over traditional cognitive-behavioral (CBT) approaches to intervening on hoarding challenges.

- A Compassion-Focused Therapy Approach for Hoarding Disorder
     Chia-Ying Chou, Ph.D., San Francisco Center for Compassion-Focused Therapy
     Troy DuFrene, M.A., BCBA, California School of Professional Psychology - San Francisco

  Hoarding disorder (HD) was recognized as a psychiatric disorder in 2013, with literature suggesting the need to improve its current standard approach of treatment based on Cognitive Behavioral Therapy (CBT). To address potential limitations in the current treatment, group-based Compassion-Focused Therapy (CFT) was examined and found to yield significant symptom reduction as a second-wave treatment following

CBT. Stemming from this, the current study investigated CFT as a standalone treatment for HD. This study, conducted in a HD-specializing private practice, examined the effects of group CFT and CBT. Both treatments involve 20 two-hour online group sessions led by licensed therapists specializing in HD. All participants went through a pre- and a post-treatment assessment on their symptoms and psychological processes associated with HD. This presentation will show findings from both treatment arms. Specific results will include treatment feasibility and satisfaction, treatment effects on HD symptom severity, emotion regulation and distress tolerance, and self-attitudes such as self-criticism and shame. Implications of these data, and the unique design of this private practice-based research study will be discussed.

- Compassion Skills Training in the Collateral Care of Hoarding Disorder: Two Pilot Studies
    Troy DuFrene, M.A., BCBA, California School of Professional Psychology - San Francisco
    Chia-Ying Chou, Ph.D., San Francisco Center for Compassion-Focused Therapies
    Eduard Morales, Ph.D., California School of Professional Psychology - San Francisco

    A small number of early-phase studies have demonstrated the promise of compassion-based interventions, such as Compassion-Focused Therapy (CFT), for treating Hoarding Disorder (HD), with mechanisms of action thought to be the reduction of shame and self-criticism and the increase of positive social-affiliation behaviors in the individual experiencing HD. These studies examine a parallel question: Can providing Compassionate Mind Training (CMT) in a non-psychotherapeutic, skills-training mode to friends and family of people experiencing HD reduce their negative verbal behavior toward HD sufferers and facilitate richer, more supportive environments for those experiencing HD? The first study is a multiple-baseline across subjects design that tests a two-hour CMT intervention to reduce frequency of negative verbal behavior, using ecological momentary assessment (EMA) for data collection and behavioral skills training (BST) in the intervention. The second is a group trial that compares a one-day, eight-hour CMT training to a cleaning and organizing control to assess reductions in distress and improvements in relationship quality.

- Developing A Compassionate Mind Training Program for Professional Organizers Working with People with Hoarding Challenges
    Rea Berg, University of Denver
    Chia-Ying Chou, Ph.D., San Francisco Center for Compassion-Focused Therapies
    Troy DuFrene, M.A., BCBA, California School of Professional Psychology - San Francisco

    The purpose of this study is to investigate the challenges and needs among professional organizers working with people who hoard. Given the chronic and complex nature of hoarding behaviors, and the nature of professional organizing service, which includes close involvement, and is usually long-term, it is highly likely that professional organizers may experience symptoms of burnout, such as a sense of failure and self-doubt, feeling helpless or defeated, losing motivation and fatigue (Roy, 2018). It is therefore of great importance to explore the psychological and professional challenges faced by professional organizers working with individuals with HD. Moreover, it is also important to develop tools that are tailored for this group of professional organizers to help them develop resilience and improve self-efficacy. With these goals, the aims of the current study are twofold: 1) Investigating challenges and needs among professional organizers working with people who hoard. 2) Developing a Compassion Mind Training (CMT) program tailored for professional organizers with the focus on building resilience and self-efficacy.

Educational Objectives:
1. Explain the principles involved in using Compassion-Focused Therapy to treat Hoarding Disorder.
2. Demonstrate Compassionate Mind Training techniques for fostering well-being and communication skills among family and friends of people experiencing hoarding challenges.
3. Describe opportunities for collateral care in Hoarding Disorder cases provided by both professional and dedicated Compassionate Mind trainers operating a behavioral consultants rather than psychotherapists.

106. What is the Role of Psychologists and How Can ACT Be Helpful in Cancer Care?: CBS and Cancer SIG, Greek & Cypriot Chapter Sponsored
    Panel
Components: *Case presentation, Didactic presentation, Literature review*
Categories: Health / behavioral medicine, Clinical intervention development or outcomes, Cancer
Target Audience: Beginner, Intermediate, Advanced

Chair: Marianna Zacharia, M.Sc., University of Cyprus
Discussant: Maria Karekla, Ph.D., University of Cyprus
Amanda Rhodes, Psy.D., National Cancer Institute
Jennifer Gregg, Ph.D., San Jose State University
Staci Martin, Ph.D., National Cancer Institute

Psychologists provide support to cancer patients from prevention through diagnosis, treatment, to recovery, all the way to the dying process. They also provide support to caregivers and bereaved significant others during this process. Psychologists in medical settings act as links between different professionals involved in a multidisciplinary team. This panel will discuss the different areas psychologists working within oncology settings deal with and how they intervene to alleviate suffering and improve quality of life among people with cancer. Additionally, the role of psychologists in managing the dynamics in the interdisciplinary cancer treatment team will be discussed, as well as their role in educating other healthcare professionals. Integral is the professional development of psychologists and suggestions will be made for self-care practices. Many researchers have emphasized that Acceptance and Commitment Therapy (ACT) can be helpful in fostering high quality of life of individuals with cancer. Specific interventions within the framework of ACT's core constructs will be explored. Adopting an ACT perspective will be discussed as a helpful approach in cancer care.

Educational Objectives:
1. Describe the role of psychologists in cancer care.
2. Discuss how Acceptance and Commitment Therapy can be helpful in cancer care.
3. Discuss specific interventions within the framework of ACT's core constructs.

107. The Heart of the Matter: Language and Connection for Sustainability
Invited
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Strategic planning*
Categories: Environmental problems, RFT / RGB / language, Sustainability
Target Audience: Beginner, Intermediate, Advanced

Julia Fiebig, Ph.D., Ball State University

Human overconsumption of earth's resources continues to exacerbate problems of a world in conflict and climate crisis - widening inequities and further marginalizing vulnerable populations. At its heart, sustainability is about equitable access and operating within resource boundaries that address collective need, rather than the wants of the few. For individuals and communities to thrive, connecting sustainability to core values of equity, prosociality, and well-being is essential. The complex contingencies that influence these issues require sophisticated understanding and application of our knowledge of complex language. This extends to cultural practices and beliefs; geographical-environmental conditions; socio-economic circumstances; and psychological impacts of navigating climate related crises. Awareness of ourselves as part of an environment that either promotes sustainable practices, or leads to inequities is critical. An RFT perspective offers a framework of analysis and strategies for mitigation. Fostering connection, rather than division, through our awareness of language, is a pillar of our practice as contextual behavior scientists. Together we can transform meaning and create the connections needed for collective actions that embody sustainable, thriving communities and relationships.

Educational Objectives:
1. Describe opportunities and barriers to transforming function of sustainability specific language.
2. Define personal values specific to sustainability.
3. List action steps for building a more sustainable environment in their home, workplace, and/or community.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

108. Women's Rights and the Rise of Authoritarianism: How can CBS Help?
Panel
Components: *Conceptual analysis, Didactic presentation*
Categories: Social justice / equity / diversity, Professional development, Women's Equity
Target Audience: Beginner, Intermediate, Advanced

Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services
Darrah Westrup, Ph.D., Private Practice
Louise Hayes, Ph.D., Fellow of the APS College of Clinical Psychologists
Manuela O'Connell, Lic., Unviersidad Favaloro
Mara Lins, Ph.D., FACEFI (Faculty of Psychology CEFI-Center for Family and Individual Studies)
Russell Kolts, Ph.D., Eastern Washington University

The oppression of women is a central feature of all authoritarian forms of control worldwide. Many misogynistic leaders are corrupting democratic institutions and attacking women's rights, setting women back in their advances toward equity. Women need to search for effective ways to fight the global rise of authoritarianism. This means backing grassroots efforts to support women while engaging in values-based activism for many. We must be free to control our bodies, life choices, and personal values. Women must care for themselves and cultivate a sense of joy in living freely. This will be crucial as a difficult, complex, and protracted struggle for justice and equality lie ahead. We must also pay attention to the condition of women and girls beyond our borders, remembering that the threats to democracy and women's rights are connected to a rising threat of authoritarianism worldwide. This panel will discuss women's rights, authoritarianism's rise, and how a CBS perspective can help.

Educational Objectives:
1. Describe the difficulties and problems women experience in authoritarian systems.
2. Explain how CBS and prosocial activity can improve the situation of women who are losing equity.
3. Utilize information learned from the course to make positive change in their own systems of interest.

115. How to be Experiential in Acceptance and Commitment Therapy
Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Professional development, ACT
Target Audience: Beginner

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Kati Lear, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Brian Pilecki, Ph.D., Portland Psychotherapy

Acceptance and commitment therapy (ACT) is, at its core, an experiential treatment, but is frequently delivered in a non-experiential way. Therapy can easily drift into less experiential methods of learning including verbal discussion, insight, and explanations of experience. How do we do stay experiential in ACT and how do we know when we are spending too much time engaged in non-experiential modes of learning? This workshop will outline why experiential learning is central to ACT and review a simple model you can use to identify when you are in less or more experiential modes during therapy and easy methods to switch to more experiential modes. Examples will be provided for how to switch between different modes of learning. You will then have a chance to practice the model in breakout groups and get feedback. Finally, a structured method of practicing the model after the workshop will be reviewed.

Educational Objectives:
1. Differentiate more experiential modes of learning from modes that are less experiential.
2. Identify at least two strategies to shift to an experiential mode.
3. Explain the value of experiential learning as a core aspect of ACT.

116. Exploring the Future of Contextual Behavior Science: Idionomic Assessment and Process Based Intervention
Symposium
Components: *Conceptual analysis, Didactic presentation, Original data*
Categories: Methods/approaches for individual variation, Idionomic, Process Based Therapy
Target Audience: Intermediate, Advanced

Chair: Clarissa Ong, Ph.D., Boston University
Brandon Sanford, Ph.D., Medical University of South Carolina
Steven Hayes, Ph.D., University of Nevada, Reno
Stuart Law, M.A., UNR/iCelerate
Joseph Ciarrochi, Ph.D., Australian Catholic University

The list of empirical problems in the traditional psychiatric nosology is daunting including poor specificity and overwhelming comorbidity. A traditional alternative to syndromal classification has been functional analysis. In a PBT approach, the focus of intervention is no longer the signs and symptoms of psychiatric disorders but on the biopsychosocial processes of change that lead to clinically relevant outcomes. Such processes are defined as theoretically coherent, dynamic, progressive, contextually-bound, and modifiable evidence-based sequences of biopsychosocial events in the client and their interaction with their environment that can be changed in order to obtain desired outcomes. Detection of such processes and their interrelationships is in essence a form of functional analysis. This approach requires new methodological strategies including psychometric validation approaches designed for longitudinal assessment, statistical approaches that can conceptualize functional processes as idiographic networks of interacting elements, and assessment tools to determine functionally relevant skills necessary for intervention.

- The Idionomic Future of Contextual Behavioral Science
    Steven C. Hayes, Ph.D., University of Nevada, Reno

    Most of the concepts, methods, and analytic tools used in the behavioral sciences are normative and are based on group comparisons. That is true of measures (psychometrics), intervention outcomes (randomized controlled trials), and analyses (comparisons of central tendencies in groups as measured against metrics of between subject variability such as standard deviations). As the field has moved towards processes of change, however, it has become more and more evident that these concepts, methods, and tools cannot and do not apply to the analysis of processes of change. In this talk we will briefly review the assumptions that are violated by traditional normative concepts, methods, and analytic tools. We will present an overview of what we are calling an "idionomic" alternative, and explain why idionomic concepts, methods, and tools need to be a central part of the future of behavioral science if it purports to apply to the life trajectories of individuals.

- Developing an Item Pool to Assess Processes of Change in Psychological Interventions: The Process-Based Assessment Tool (PBAT)
    Joseph Ciarrochi, Ph.D., Australian Catholic University
    Steven C. Hayes, Ph.D., University of Nevada, Reno
    Baljinder Sahdra, Ph.D., Australian Catholic University
    Stefan. G. Hofmann, Ph.D., Philipps-University Marburg; Boston University

    Process-based therapy (PBT) focuses on treatment elements that target biopsychosocial processes of relevance to individual treatment goals. This focus requires new, more integrative and idionomic models that identify key processes of change, using high temporal density measurement applied at the level of the person. Standard measurement validation approaches are inadequate to this challenge. The present study develops and provides a preliminary validation of a process-based assessment tool (PBAT) -- an item pool meant for intensive longitudinal clinical assessment. Developed using the Extended-Evolutionary Meta-Model of PBT and evaluated using a machine-learning algorithm appropriate for the evaluation of individual items, we administered the PBAT online to a sample of 598 participants (290 male; 302 female; 6 unidentified. Mage = 32.6). Analyses revealed that the PBAT distinguishes between positive and negative processes, links in theoretically coherent ways to need satisfaction and thwarting, and links to clinically relevant outcomes of sadness, anger, anxiety, stress, lack of social support, vitality, and health. The PBAT provides a beginning step towards developing a process-based tool that allows clinicians and

researchers to select individual items or sets of items for individual-focused idionomic research and practice.

- Toward Empirical Process-Based Case Conceptualization: An Idionomic Network Examination of the Process-Based Assessment Tool
  Brandon T. Sanford, Ph.D., Medical University of South Carolina
  Joseph Ciarrochi, Ph.D., Australian Catholic University
  Stefan G. Hofmann, Ph.D., Phillips University of Marburg; Boston University
  Fredrick Chin, M.S., University of Nevada, Reno
  Kathleen M. Gates, Ph.D., University of North Carolina – Chapel Hill

Syndromal classification has failed to produce a progressive science of psychosocial intervention for mental and behavioral health issues. An idiographic application of processes of change could provide a viable functional analytic alternative to syndromal approaches if it could be linked to an idionomic approach, modeling idiographic effects first, and retaining nomothetic findings if they improve idiographic fit. The present study examined this possibility by using the Process-Based Assessment Tool (PBAT), a new assessment tool linked to the Extended Evolutionary Meta-Model (EEMM) of Process-Based Therapy. The PBAT and items assessing common clinical outcomes were assessed repeatedly in 50 individuals in an experience sampling format over a month's period yielding at least 60 measurement occasions per person. These data were then analyzed in an idionomic fashion using Group Iterative Multiple Model Estimation (GIMME). Analyses showed that the PBAT related to common clinical outcomes for virtually all participants in the individual complex networks identified by GIMME. Data showed that relationships had to be studied using an idionomic approach because participants' responses violated the ergodic assumptions underlying classical normative statistics. No overall group patterns were found and while subgroup relations did emerge, process to outcome relationships were dominantly idiographic. Idiographic networks were interpretable, however, using the broadened psychological flexibility approach of the EEMM. Idionomic network analysis of processes of change may provide a replicable form of empirical functional analysis.

- Replacing 'Destination: Normal'
  Stuart Law, M.A., BCBA, University of Nevada, Reno

Behavior analysts have historically given weight to the level of the individual both in their applied practices and their empirical methods. Though the field has derived knowledge from group-level analyses, idiographic methods and technologies have always been predominantly championed. Time-series analyses, which were safeguarded and canonized in the shadows of psychological science may soon be getting their day in the sun. At the same time, paternalistic notions regarding treatment directions for children and individuals with disabilities have continued to undergo scrutiny at a cultural level. With the rise of discussions regarding assent- based treatment, values-oriented curricula and evaluations of dignified risk-taking, the need to understand verbally-complex controlling variables is rising—along with the capabilities of relational curriculum and assessment. This session will preview a new learning system called 'GenArete', discuss some of its philosophical underpinnings, evaluate ongoing single-subject outcomes, and provide ideas for how to set the occasion for goals outside of broad normative comparisons.

Educational Objectives:
1. Describe the importance of an idiographic approach from a conceptual and statistical standpoint.
2. Utilize idiographic network outputs to develop a case conceptualization.
3. Describe the history of Applied Behavior Analysis with respect to a focus on the individual and use the 'GenArete' tool to assess assent based care.

118. Answering the Challenge of Trauma with the Contextual Behavioral Science of Compassion and Process Based Approaches: Compassion Focused SIG
Panel
Components: *Conceptual analysis, Didactic presentation, Literature review, Original data*
Categories: Clinical intervention development or outcomes, Processes of change, Trauma, PTSD, Compassion, EMDR, Clinical Behavioral Analysis
Target Audience: Beginner, Intermediate

Chair: Dennis Tirch, Ph.D., The Center for CFT
Paul Gilbert, Ph.D., University of Derby
Laura Silberstein-Tirch, Psy.D., Center for Compassion Focused Therapy
Talya Vogel, Psy.D., The Center for Compassion Focused Therapy

Troy DuFrene, M.A., BCBA, San Francisco Center for Compassion-Focused Therapies

The psychological sequelae of trauma are fast becoming one of the most significant health challenges on the planet. In the wake of a global pandemic, climate crisis, rising interpersonal and institutional violence, income inequality, and systemic racism, greater levels of trauma and psychiatric suffering are being reported the world over. This panel of experts, drawn from different schools of contextual behavioral thought, will examine ways that integrative, process-based, contextual interventions may better answer the clinical challenges of trauma. Compassion-focused approaches to evidence-based therapy will be emphasized, with particular attention paid to the role of shame in psychotherapy outcomes. CFT Founder Paul Gilbert will discuss compassion-focused, trauma-sensitive interventions, emphasizing working with shame-based difficulties. Laura Silberstein-Tirch will discuss Compassion-Focused ACT (CFACT) for relational trauma. Talya Vogel will present methods to integrate EMDR and triphasic/somatic approaches with ACT interventions. Finally, Troy DuFrene will review the role of clinical behavioral analysis in trauma-sensitive, compassion-focused therapies. Audience questions and a mindful, trauma-informed discussion will be facilitated by chair Dennis Tirch.

Educational Objectives:
1. Discuss a range of integrative contextual behavioral science interventions for the treatment of persons with trauma related difficulties.
2. Describe and demonstrate the essential features of contextual behavioral approaches to treating shame in a trauma-sensitive way.
3. Analyze and integrate CBS consistent elements of EMDR, CFT and triphasic/somatic approaches to the treatment of trauma.

119. Recent advances in message framing and rule-governed behavior in accordance with relational frame theory
Symposium
Components: *Literature review, Original data*
Categories: RFT / RGB / language, Methods/approaches for individual variation, Global Health Strategies, Valued living, Procrastination, Pliance
Target Audience: Intermediate

Discussant: Louise McHugh, Ph.D., University College Dublin
Alison Stapleton, B.A., University College Dublin
Gráinne Carthy, M.Phil, Technological University Dublin
Madison Gamble-Morrissey, M.S., University College Dublin

The present symposium comprises four papers on the topics of message framing and rule-governed behavior (RGB) in accordance with relational frame theory. Describing a recent systematic review, Paper 1 will highlight definitional problems and measurement issues associated with RGB that are hindering both the advancement of research and discussions of RGB within the CBS community. Paper 2 synergizes contextual behavioral science and behavioral economics' gain-loss framing to develop effective behavior change tools, providing a step-by-step guide for the implementation of powerful, idionomic message framing techniques. Incorporating considerations outlined in Paper 1, Paper 3 details findings from a recent experiment examining the functional distinction between plys (rules controlled by arbitrary speaker-mediated consequences) and tracks (rules controlled by natural consequences). Paper 4 describes a qualitative analysis of unhelpful self-rules, presenting practical recommendations for designing values-based interventions that both reduce academic procrastination while also increasing engagement in context. Together these papers will detail means of promoting multi-level, multi-dimensional, process-based, prosocial, and practical message framing and RGB work, emphasizing transdisciplinary innovation and collaboration.

- A systematic review of types of rule-governed behavior in accordance with relational frame theory: Inconsistencies and innovations
  Alison Stapleton, B.A., University College Dublin
  Deirdre Farrell, University College Dublin
  Conor McCloskey, B.A., University College Dublin

Elisa Tomezzoli, University College Dublin
Prof. Louise McHugh, Ph.D., University College Dublin

The conceptual and experimental analysis of rule-governed behavior (RGB) has been significantly hindered by both definitional and methodological problems. Although relational frame theory (RFT) has facilitated many advancements with regard to RGB, most present-day RFT-based operationalizations of RGB and its associated terms remain limited, imprecise, and often problematic. The present systematic review of pliance, tracking, and augmenting involved searches of PsycINFO, PsycArticles, Proquest Social Science Premium Collection, PubMed, Web of Science, and Scopus databases, yielding 37 manuscripts that met the eligibility criteria and were included in the review. Based on these synthesized data, this presentation will highlight inconsistencies in how we define and operationalize types of RGB. Strengths, limitations, and opportunities for advancement and refinement within the RGB literature will be signposted, providing attendees with a comprehensive overview of viable innovative avenues for conceptualizing and measuring RGB moving forward.

- Advancing how messages are framed for public health and well being: A synergetic CBS approach

Madison Gamble, University College Dublin
Prof. Louise McHugh, Ph.D., University College Dublin
Nigel Vahey, Ph.D., Technological University Dublin (TU Dublin)

Message Framing has gained a lot of attention in cognitive fields however contextual behavioral approaches have been underutilized. The implementation of ACT principles and relational frame theory to how messages are framed can help address important perennial and societal challenges such as vaccine hesitancy, decarbonization, and other focus points mentioned in the 2030 United Nations Department of Economic and Social Affairs Agenda for Sustainable Development plan. Drawing on recent innovations in contextual behavioral science (Hayes et al., 2020) and behavioral economics' gain-loss framing (Kahneman & Tversky, 2013), this presentation describes important conceptual and methodological considerations for increasing the effectiveness of public health messages and behavior change techniques underlying message framing. Similarities, differences, and the integration of these theories will be discussed, providing a step-by-step guide for the development of powerful message framing techniques tailored at the idionomic level to the individual.

- Outstanding issues in rule-governed behavior: Clarifying the roles of depressive symptomatology and the ply/ track distinction on contingency sensitivity

Conor McCloskey, BSc, University College Dublin
Alison Stapleton, B.A., University College Dublin
Sadhbh Collins, University College Dublin
Parisa Haghshenas Diarjani, University College Dublin
Sarah Kenny, University College Dublin

Rule-governed behavior is an aspect of relational frame theory that has been the subject of growing scrutiny in recent years. The functional distinction between pliance (rule-following under the control of social consequences) and tracking (rule-following under the control of natural consequences) has been questioned, as many studies which observed a distinction have failed to offer direct social consequences for rule-following itself. Furthermore, there is poor clarity over whether depressive symptomatology is a variable in the functional distinction of plys and tracks, with some research indicating that individuals with low depressive symptomatology do not behave differently when responding to plys or tracks. The present study uses a contingency switching match-to-sample task to test the distinction between plys and tracks, while also accounting for depressive symptomatology and generalized pliance and offering verbal consequences for rule-deviations. It is hypothesised that there will be a distinction between plys and tracks on insensitivity in the general population but not for individuals with low depressive symptomatology. Preliminary findings will be discussed.

- Is there more to academic procrastination than psychological avoidance? Incorporating problematic positive reinforcement into the CBS analysis

Gráinne Carthy, Technological University Dublin (TU Dublin)
Nigel Vahey, PhD, Technological University Dublin (TU Dublin)

Broadly speaking, academic procrastination is the unhelpful tendency to delay beginning and/or completion of academic tasks (Senécal et al., 2003). From a CBS perspective, this tendency to procrastinate is commonly conceptualised in terms of psychological avoidance and the behavioural rigidity

that it entails (Dionne et al., 2016). In other words, people engaging in procrastination have become in some sense, insensitive to the unhelpful consequences of delaying their engagement with academic tasks. Twelve Irish undergraduate students were interviewed online about their experiences of online learning and academic procrastination during the COVID-19 pandemic. These conversations often revolved around unhelpful self-rules, related to the idea that one should not engage with academic tasks until one feels mostly positively about those tasks; and in such cases there was a corresponding lack of values-based rules to counteract distracting self-rules. This presentation will provide a qualitative analysis further characterising these self-rules and the contexts in which they typically arise for undergraduate students. This analysis placed particular emphasis upon the functional distinction between distracting self-rules that are formulated in terms of negative reinforcement (away moves), versus positive reinforcement (towards moves) behaviours. This distinction highlighted multiple practical recommendations for designing values-based interventions that both reduce academic procrastination while also increasing undergraduate student engagement in context.

Educational Objectives:
1. Detail definitional problems and conceptual issues associated with message framing and rule-governed behavior in accordance with relational frame theory.
2. Describe recent advances in empirical work aiming to understand remediate rigid rule-governed behavior.
3. Discuss viable avenues for future explorations of message framing and rule-governed behavior both inside and outside research laboratories with particular reference to means of measurement.

120. A contextual behavioral perspective on eating, body image, and weight concerns
Panel
Components: *Conceptual analysis, Didactic presentation*
Categories: Health / behavioral medicine, Clinical intervention development or outcomes, Obesity, Weight Concerns, Body Image
Target Audience: Beginner, Intermediate, Advanced

Chair: Michael Levin, Ph.D., Utah State University
Discussant: Sarah Pegrum, Ph.D., The Beacon Centre
Jason Lillis, Ph.D., Brown Medical School/ California Northstate University
Kirstin Quinn Siegel, LMFT, Full Life Therapy
Dayna Lee-Baggley, Ph.D., Dalhousie University
Paula Freedman, Psy.D., HumanKind Psychological Services

Psychological distress related to weight, body image and eating issues are increasing in populations and acceptance-based approaches have been identified as potentially efficacious in helping to relieve suffering and help people gain emotional and physical health. In this panel discussion, five CBS clinical researchers and practitioners will come together to discuss developing, implementing and evaluating acceptance-based interventions for concerns related to eating, body image and weight loss. Topics will likely include: Utilizing ACT in relation to traditional approaches and views of weight and weight management; weight/body stigma and body image, calorie counting vs intuitive eating, weight loss vs healthy values-based living, and integrating approaches including Health at Every Size and Intuitive Eating with ACT.

Educational Objectives:
1. Explain key differences between traditional and acceptance-based intervention to address eating, weight, and body image related issues.
2. Describe advantages and disadvantages of organizing intervention goals on weight loss/weight management vs values-based living.
3. Identify future directions of CBS-based research and clinical practice for eating, weight, and body image concerns.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

129. Functional Analytic Psychotherapy (FAP): Grief, Therapist Suffering, and Therapeutic Opportunity
Workshop
Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Functional Analytic Psychotherapy (FAP), Grief
Target Audience: Beginner, Intermediate, Advanced

Barbara Kohlenberg, Ph.D., UNRSOM
Mavis Tsai, Ph.D., U. of Washington/Awareness, Courage & Love Global Project
Serena Wong, Ph.D., St. Joseph's Health Care London
Emerson Hardebeck, M.A., Antioch University, Seattle

Functional Analytic Psychotherapy (FAP): Grief, Therapist Suffering, and Therapeutic Opportunity When death touches meaningful relationships, hearts break open and lives are changed. In our FAP community, many were touched by the death of Robert ("Bob") Kohlenberg, some of us personally (daughter Barbara Kohlenberg; wife, Mavis Tsai) as well as colleagues, students, and clients. We will explore how Functional Analytic Psychotherapy (FAP), a treatment that uses functional analysis to foster authentic and healing relationships, can create and deepen moments of interpersonal connection with clients. We will pay special attention to opportunities for connection when therapists are experiencing their own grief and loss. We will explore how issues such as self-disclosure, and personal experiences with loss can inform work with clients. FAP is based on in-session opportunities to identify and shape more effective interpersonal repertoires, and we will invite our attendees to consider their own histories with respect to loss. FAP calls for therapeutic stances and techniques that no single orientation would predict, and provides a conceptual framework that will supercharge your next session.

Educational Objectives:
1. Practice the rules of Functional Analytic Psychotherapy which lead to the cultivation of in-session opportunities to create meaningful behavior change.
2. Identify your own therapist repertoires around grief, and gain a functionally precise understanding of how one's own experience can contribute to in-session opportunities for shaping interpersonally effective repertoires.
3. Implement the FAP principles of Awareness, Courage and Love beyond the therapy room to impact greater change and to increase sacred moments in your community.

130. The Art of Creating Transformational Metaphors in ACT
Workshop
Components: *Didactic presentation, Experiential exercises*
Categories: Clinical intervention development or outcomes, Professional development, Metaphors
Target Audience: Beginner, Intermediate, Advanced

Rikke Kjelgaard, M.Sc., Rikke Kjelgaard Consulting

As a practitioner it can be challenging to remember the various ACT metaphors yet alone know where to fit these inside the processes of psychological flexibility. While imagining yourself as a bus driver allowing various passengers on your bus might indeed be both powerful and helpful, sometimes practitioners are struggling to remember what they're supposed to say, when they're supposed to deliver the metaphor and why they're doing it in the first place. This can lead to unhelpful (and irrelevant!) storytelling instead of fostering transformational conversations. In this workshop you will learn how to create your own mighty metaphors and use the power of stories to both impact and transform the lives of your clients. You will learn the framework for building metaphors and how to flexibly tweak these to fit the various processes in ACT. You'll hear examples of inspiring stories and you'll get the opportunity to creatively transform a story of your own into your new favourite metaphor.

Educational Objectives:
   1. Define the framework by which metaphors are built on.
   2. Describe what metaphors fits what processes of psychological flexibility.
   3. Design and flexibly make use of a unique metaphor from your own learning history.

132. Clinicians' Perspectives on Clinical Behavior Analytic Case Conceptualization: Clinical Behavior Analysis SIG Sponsored

   Panel
Components: *Case presentation, Conceptual analysis, Didactic presentation*
Categories: Clinical intervention development or outcomes, Behavior analysis, Clinical Behavior
   Analysis
Target Audience: Intermediate, Advanced

Chair: Abbey Warren, Louisiana Contextual Science Research Group
Michael May, M.A., LPCC, Compassionate Behavioral Healthcare, LLC
Luisa Cañón, Psy.D., BCBA-D, Institute for Effective Behavioral Interventions / ACTto Thrive
Drew Carr, Ph.D., VA Sierra Nevada HCS
Emily Sandoz, Ph.D., University of Louisiana at Lafayette
Evelyn Gould, Ph.D., BCBA-D, LABA, Keck School of Medicine at USC

Clinical Behavior Analysis (CBA) could be understood as both an umbrella-term, subsuming a variety of different behavior-change approaches including Acceptance & Commitment Therapy (ACT), Behavioral Activation (BA), and Functional Analytic Psychotherapy (FAP), as well as a standalone framework for psychotherapy. This panel aims to examine how CBA clinicians bridge the gaps between complex theory (even metatheory), scientific principles, and their work - on the ground - in the consulting room. This panel is composed of individuals who are regularly providing clinical behavior analytic treatment to their clientele. How does the CBA clinician attend to context, behavior, and the relationship between the two - in-the-moment and on-the-fly? The focus of this panel will be to examine recorded case examples to aid in illustrating CBA conceptualizations in their various forms. Panelists will discuss the varying conceptualizations of CBA as well as what they see as the implications for clinical practice.

Educational Objectives:
   1. Define Clinical Behavior Analysis (CBA).
   2. Identify characteristics of a CBA case conceptualization when contrasted with other approaches to case conceptualization.
   3. Describe the process of functional analysis utilizing a video recording of a CBA session.

133. Accelerating Psychological Flexibility With Emotion Efficacy Therapy

   Workshop
Components: *Didactic presentation, Experiential exercises, Literature review, Original data, Role play*
Categories: Clinical intervention development or outcomes, Organizational / Industrial psychology,
   Coaching
Target Audience: Beginner, Intermediate

Aprilia West, Psy.D., MT, PCC, Aprilia West

Research suggests that 75% of therapy clients and between 25-50% of coaching clients struggle with their emotions, which can result in rigid, inflexible and contextually maladaptive behavior. Emotion Efficacy Therapy (EET) offers a brief, process-based protocol to help clients become more intentional, flexible and creative in their moments of choice, especially in the face of stress, challenge and pain. Integrating ACT, DBT and exposure therapy, EET targets the underlying processes hypothesized to contribute to low psychological flexibility: emotion avoidance, emotion dysregulation and distress intolerance. While EET is structured as a protocol, the skills can be used functionally and flexibly to help clients learn to:
         - Decode emotion triggers
         - Observe emotional STUF (sensations, thoughts, urges and feelings)

   - Surf emotion waves instead of reacting
   - Choose values-based action in moments of intense emotional activation
   - Regulate emotions when needed to act on what matters

Multiple studies suggest EET increases distress tolerance and decreases emotion avoidance and emotion dysregulation among diverse clinical populations. EET can be applied in an individual or group format.

Educational Objectives:
   1. List the emotion efficacy skills that increase psychological flexibility.
   2. Explain the importance of experiential learning to expand behavioral repertoires.
   3. Design an exposure-based skills practice with a client to facilitate experiential learning.

134. Values, Vulnerability, and Consensual Non-Monogamy
   Panel
Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review*
Categories: Clinical intervention development or outcomes, Professional development, CNM, ACT, FAP
Target Audience: Beginner, Intermediate, Advanced

Discussant: Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center
Mathias Funke, Dipl.-Psych., Private Practice
Matthew Skinta, Ph.D., ABPP, Roosevelt University
Stephanie Dreis, M.S., Catalyst Insight Collective, LLC
Sarah Levinson, LMSW, Creative Relating and NYC Cognitive Behavioral

This panel explores the topic of Consensual Non-monogamy (CNM), as lived and worked with through ACT and FAP principles. As relationship style diversity has become more openly discussed outside of monogamous structure, it may be increasingly important for therapists to have a grasp on basic information about how diverse relationships function. Experiential avoidance, acceptance, and values are as central to the success of diverse relationship styles as in monogamous relationships that most therapists are trained to work with. Further, interpersonal targets of FAP such as vulnerability and courageous risk-taking are lived differently when multiple intimate relationships coexist. Navigating jealousy, as well as unique social roles that arise within CNM relationships (e.g., metamours, polycules), and other topics will be considered as they arise in the therapy room. The panel will also explore the unique ethical and practice boundaries of living and working in communities when both the therapist and client may be in CNM relationships, and social and cultural differences in both language and practice that arise when considering sexual orientation diversity.

Educational Objectives:
   1. List different types of Consensual Non-Monogamy.
   2. Describe some specific challenges that might come up when working with CNM.
   3. Discuss how ACT and FAP principles relate to CNM.

142. Answering the Call for Compassion: CFT with Adolescents in a Pandemic Era: Ohio Chapter Sponsored
   Workshop
Components: *Didactic presentation, Experiential exercises, Role play*
Categories: Clinical intervention development or outcomes, Adolescents
Target Audience: Beginner, Intermediate

Chris Fraser, MSW, Positive Path Counseling

Adolescence is the developmental period for self-discovery and personal exploration. However, the COVID-19 pandemic continues to severely impact this development. During the pandemic, adolescent anxiety, depression, and suicide rates have skyrocketed. The call for compassion for adolescents is loud. We can respond by teaching teens compassionate mind skills.
 The high levels of social isolation that adolescents have been experiencing leaves them stuck in their heads with punishing self critical thoughts. There has also been intense conflicts in many adolescent

peer groups over the issues of vaccinations and mask wearing. The need to foster self-compassion at this time is paramount! Compassionate mind training helps teens build the resilience to manage great distress in this pandemic era.

We will work experientially in this workshop to learn practical CFT interventions and how to apply them virtually and in person. We will emphasize CFT chair work as a powerful tool for cultivating self compassion, defusion, perspective taking, and dealing with the challenging parts of ourselves.

Educational Objectives:
  1. Explain how the brain has evolved and how it can be "tricky".
  2. Describe why new brain and old brain loops can be problematic for adolescents.
  3. Explain how to utilize CFT chair work with adolescents.

143. Beyond Behavior-Behavior Relations: Ripening the use of the Matrix in a Clinical Context: Brazil Chapter Sponsored
     Workshop
Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Strategic planning*
Categories: Clinical intervention development or outcomes, Methods/approaches for individual
     variation, ACT Matrix
Target Audience: Intermediate, Advanced

Alan Pogrebinschi, M.Sc., Centro Brasileiro de Ciência Comportamental Contextual - CECONTE
Mônica Valentim, Ph.D., CECONTE - Centro Brasileiro de Ciência Comportamental Contextual
Tatiana Khafif, M.Sc., Instituto de Psiquiatria da Faculdade de Medicina da Universidade de São Paulo / CECONTE
Jorge Quintero, M.S., CECONTE

The traditional Matrix pertains several limitations, specifically when viewed from a contextual behavioral stand-point. In its most notorious use, the Matrix does not include environmental stimuli in its conception, making it oftentimes hard, for both clinicians and clients, to see beyond behavior-behavior relations. In this workshop, we aim to teach participants, in an immersive way, how to build a Squared Matrix and an Expanded Matrix, enabling them to independently decide when and how to intertwine different people's Matrixes and add environmental cues, respectively. Furthermore, participants will learn why and how the failure to explicitly include environmental stimuli to the Matrix can trick clinicians into getting stuck in the content of the client's speech instead of assessing their behaviors in a functional and contextual way. Participants will be prompted to plunge right into a series of experiential exercises to perfect their newly acquired Matrix skills. By the end of this workshop, participants will level up their use of the ACT Matrix in order to help clients get out of their minds and into their lives!

Educational Objectives:
  1. Describe the benefits of employing the Matrix in and advanced and contemporary way, as means to develop more comprehensive analyses and case conceptualizations.
  2. Demonstrate how to build Expanded and Squared Matrixes, in which both environmental stimuli and another person's Matrix can be included into the Traditional Matrix.
  3. Explain when and how to use the Expanded and Squared Matrixes instead of the Traditional Matrix, due to their experiential contact with the perks of their usage.

145. Developing the contextual practitioner: approaching supervision and consultation with competency and care
     Panel
Categories: Supervision and training, Professional development, Consultation, Competency
Target Audience: Intermediate, Advanced

Chair: Linda Nicholson, MClinPsyc, Ph.D., Australian National University
Eric Morris, Ph.D., La Trobe University
Robyn Walser, Ph.D., University California Berkeley; National Center for PTSD; TL Consultation Services

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

Manuela O'Connell, Lic., Unviersidad Favaloro
Francisco Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz
Darrah Westrup, Ph.D., Private Practice

Supervision is an essential element in developing and maintaining competence in contextual behavioral therapies, such as ACT, FAP, clinical RFT etc. It is important for supervisors to promote safe and effective practices while creating a context where learning and growth can occur. Supporting the development of competence for practitioners also necessitates skills in self-care and self-reflection. This has been particularly highlighted over the past two years with the challenge of COVID where psychological support is so highly sought after by the public, while practitioners are also navigating the way the pandemic has impacted on them personally. Further, how does the CBS supervisor care for themselves?
We will describe our experiences in supervising helpers to develop their competencies, at various stages of their familiarity with CBS. We will discuss the importance of identifying competencies of supervisors and how attending to and supporting self-care is essential. We will discuss how we can support supervisors in our international CBS community.

Educational Objectives:
1. Describe a range of supervision methods to support practitioner competency development.
2. Identify ways to foster self-reflection and psychological flexibility for supervisees.
3. Discuss the ways that they can support their self-care and identify the supports they need to supervise practitioners.

146. Learning from Each Other: Advancing the Dialog between Psychotherapists and Behavior Analysts: Clinical Behavior Analysis SIG Sponsored
    Panel
Components: *Conceptual analysis, Strategic planning*
Categories: Professional development, Behavior analysis, Inter-professional dialog
Target Audience: Intermediate, Advanced

Chair: Heather Garnos, M.S., Private Practice; New Harbinger Publications
Angela Coreil, Ph.D., Better Living Center for Behavioral Health & Behavior-Behavior.org
Troy DuFrene, M.A., BCBA, San Francisco Center for Compassion-Focused Therapies
Hannah Kaplan, M.A., Private
Lou Lasprugato, M.A., Sutter Health
Emily Sandoz, Ph.D., University of Louisiana at Lafayette
Michelle Zube, M.A., CB Consultants

Since the 1960s, Behavior Analysis and Clinical Psychology have moved largely in different directions, with one profession not deeply engaged with the other. ACT and FAP represent exceptions to this trend, often being seen as forms of clinical behavior analysis as distinct from conventional psychotherapy. ACBS is a unique environment where behavior analysts and psychotherapists can connect and share their particular perspectives, to the benefit of both. Psychotherapists may benefit from behavior analysis's strong focus on observable and measurable behavior change, evidence basis for interventions, and the use of data collection to evaluate treatment effects. On the other hand, behavior analysts may enhance their work by accessing psychotherapeutic approaches to addressing covert or subtle behaviors within emotionally charged situations and interpersonal dynamics. This panel discussion brings together both behavior analysts and psychotherapists with interest and experience in the other profession to promote the re-engagement of the two fields. Attendees will leave the discussion with a better understanding of the allied professions and how they can support one another.

Educational Objectives:
1. Describe at least three ways that principles and techniques from behavior analysis or psychotherapy can enhance and support practice of the other profession.
2. Explain appropriate scope-of-practice boundaries between the two professions.

The sessions below in green will be delivered live to the in-person audience in San Francisco. The Powerpoint and audio will be captured in a recording, and will be uploaded to the conference website for On Demand viewing within 48 hours of presentation.

3. Demonstrate effective ways for psychotherapists and behavior analysts to interact and collaborate.