ACBS Annual WORLD CONFERENCE X Washington, D.C. July 22-25, 2012



contextualpsychology.org

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Welcome from the ACBS President



Welcome to the 10th annual World Conference of the Association for Contextual and Behavioral Science (ACBS). While the conference is our tenth there are many 'firsts' to celebrate. The launch of the brand new Journal of Contextual Behavioral Science, the first meetings of several new ACBS committees, the first class of ACBS fellows, the first ACBS grant recipients, the first meeting of several new Special Interest Groups...and I could go on. In addition to these 'firsts' there are also many of the events you have come to know and love if you are a returning member, and we hope you enjoy if this is your first ACBS World Conference. Events include eleven pre-conference workshops; invited talks by world-class scholars; training and more training; panels and paper symposia; new IGNITE and Research and Program Development Forums; opportunities to connect with chapters, special interest groups, and committees that pique your interest; a poster session and social events. And of course it wouldn't be World Conference without the Follies. I wish you a week of learning and fun and connecting with a worldwide community of colleagues and friends.

On behalf of the conference committee and ACBS board of directors I want to offer you a warm welcome – we hope you have a wonderful time.

ACBS Board

Sincerely, Patty Bach, Ph.D.

President

Patty Bach, Illinois Institute of Technology

Past-President Robyn Walser, Palo Alto Veterans Administration

President-Elect Joseph Ciarrochi, University of Western Sydney

Secretary-Treasurer Daniel J. (D. J.) Moran, Pickslyde Consulting

Members at Large

Jason Luoma, Private Practice Akihiko Masuda, Georgia State University Matthieu Villatte, University of Louisiana, Lafayette Rikard Wicksell, Karolinska Institute

Student Representative Amie Langer, University of Iowa **Executive Director (non-voting)** Emily N. Rodrigues, ACBS

Incoming Board Members (2012):

President-Elect

Sonja Batten, United States Department of Veterans Affairs and Uniformed Services University of the Health Sciences

Members at Large

Mary Sawyer, One to One Counselling and Education Michael Twohig, Utah State University

Student Representative

Maureen Flynn, University of Mississippi

Want to get involved?

Volunteer to work with a Committee dedicated to forwarding our mission! http://contextualpsychology.org/volunteer

The Association for Contextual Behavioral Science (ACBS) is dedicated to the advancement of functional contextual cognitive and behavioral science and practice so as to alleviate human suffering and advance human well being.

Book Selling

Books will be for sale at the World Conference X on the lower level, down the hall from the Registration Desk. We'll be offering a **10% discount on all items sold in the bookstore** (discount taken during checkout). The bookstore will be operated by New Harbinger Publications and ACBS volunteers. Please be kind to our generous volunteers/staff selling books. We encourage Visa or MasterCard, but can accept cash as well (the ability to make change may be limited). Quantities are limited. Bookselling will be held on:

Monday, July 23	10:30am – 4:30pm & 8:30-9:30pm (author signing)
Tuesday, July 24	8:00am – 4:30pm
Wednesday, July 25	8:00am – 3:00pm

CE Credits & Certificates (with hours)

You need to sign in & out for each session you attend to earn CEs. The yellow sign in sheet will be near the session door. Fifteen minutes into the session we will mark the sign in sheets, crossing out those who have not signed in, so please do so in the first fifteen minutes of the session. If your name does not appear on the sign in sheet, please write it at the bottom of the page. You may need to complete an evaluation and post-test for each session you attend, in order to earn CEs. The evaluations will all be done online. You can complete your evaluations at http://contextualpsychology.org/survey or follow the QR code below.. This email will come to you from "ACBS". These online evaluations/ post-test must be completed by August 10. CE credits are NOT available for IGNITE sessions, Research and Program Development Forums, the opening session on Sunday evening, or Chapter/SIG/Committee meetings. We will email you a printable copy of your certificate by September 10. If you do not receive it, please email acbs@contextualpsychology.org

Association for Contextual Behavioral Science (ACBS) is approved by the <u>American Psychological Association</u> to sponsor continuing education for psychologists. ACBS maintains responsibility for this program and its content. ACBS will issue certificates of completion. CE rules require that we only issue credits to those who attend the entire workshop. Those arriving more than 15 minutes late or leaving before the entire workshop is completed will not receive CE credits.

ACBS is an approved provider of continuing education for MFCCs and/or LCSWs by the <u>California Board of Behavioral</u> <u>Sciences</u>, provider #PCE 4653.

This program has been approved by the National Board for Certified Counselors, NBCC Approval Number: SP-2055.

This program is approved by the <u>National Association of Social Workers</u> (Approval #886495791-1125) for Clinical Social Work continuing education contact hours.

<u>BCBA continuing education credits</u> are provided by Foxy Learning (<u>www.foxylearning.com</u>), OP-10-2021 is the BACB ACE Provider Number. *** Note BCBA credits are not available for all sessions, please visit <u>http://contextualpsychology.org/wc10_ce_credits</u> to view a schedule with the eligible sessions highlighted or pick up a copy at the registration desk.

<u>Refunds & Grievance Policies</u>: Participants may direct any questions or complaints to ACBS Executive Director, Emily Rodrigues, <u>acbs@contextualpsychology.org</u>

- If you need just a general certificate of attendance with hours attended, please sign in for each session you attend. You do not need to sign out. We will email you a certificate with the number of hours attended by August 10, 2012. (Fee required.)
- General certificates of attendance (without hours) will be made available (hard copy) by the registration desk beginning at Noon on Tuesday, July 24th.

Evaluations

• The General Conference Evaluations can be completed at <u>http://contextualpsychology.org/survey</u> or by following the QR code on this page. We appreciate your help in evaluating the conference & contributing to the improvement of future conferences.



To all CE & General Evaluations

Videotaping & Audio recording

• Some sessions at the conference may be videotaped, and will eventually go up on the ACBS website, http://contextualpsychology.org. If you are doing an exercise and the videographer requests to film you, feel free to say yes or no, as you like. If you agree, you may appear in the video on our website.

IGNITES and Research and Program Development Forums

What the heck are these? They're some new and interesting formats for presenting material as well as getting to work on the science of CBS.

The IGNITE presentation is a short, structured talk in which presenters present on ideas and issues they are most passionate about using a "deck" of 20 slides that auto-advance every 15 seconds (no exceptions).

Topics may be empirical, conceptual, philosophical, historical, or methodological. Presentation should be well-practiced and high energy (perhaps even... fun!).

Help cheer for these unusual talks by our very brave pioneers in the first year of this format. You can catch them during the second half of lunch on Monday or Tuesday afternoon.

Research and Program Development Forums consist of multiple 10-minute presentation (followed by approximately 20-30 minutes of discussion for each) of a research or program development project in the conceptual, preliminary, and/or planning stages presented to an audience with specific questions that will help guide or improve their project. *No presentation technology is allowed (e.g., powerpoint).*

What we are hoping for in R&PD Forum submissions is that the community can help develop all of those halfformed ideas for future research or intervention projects. What exactly were we looking for?

- those projects that keep wanting to creep up out of other things you're involved in, right at the time that you're way too busy to do anything about it
- those hunches that you've always wanted to move on, but were never clear on how to get started
- those protocols that you started writing twenty times, but keep getting stuck on
- those ideas that seem just crazy enough to work
- those needs you recognize, feel compelled by, or are in a good position to address, but are outside of your expertise

You can attend these forums Monday-Wednesday morning in the "Oakley" meeting room.

Special Thanks

Thank you to our WC10 program committee:

Emily Sandoz, Ph.D., University of Louisiana,	Danielle Moyer, University of Louisiana, Lafayette
Lafayette - Chair	Corey Porche, M.S., University of Louisiana,
Paul Atkins, Ph.D., Australian National University	Lafayette
Olga V. Berkout, M.A., University of Mississippi	Rob Purssey, Functional Contextual Psychiatrist,
Michael Bordieri, M.S. BCBA, University of Mississippi	Australia
Andrew Gloster, Ph.D., Technical University of	J. Vince Roca, Ph.D., Central Arkansas Veterans
Dresden, Germany	Healthcare System
Louise Hayes, Ph.D., University of Melbourne, Australia Emmie Hebert, University of Louisiana, Lafayette	Emily Squyres, University of Louisiana, Lafayette Jennifer Villatte, M.A., University of Nevada, Reno
 W. Jeffrey Henderson, Ph.D., Counseling and Psychiatric Services, University health Center, University of Georgia Kate Kellum, Ph.D., University of Mississippi Andreas Larsson, MSc, Leg Psycholog, Swansea University Samantha Marks, University of Louisiana, Lafayette Kate Morrissey, LCSW, Advantage Behavioral Health Systems, and Rubber Soul Yoga 	Members of the RFT track program subcommittee: Matthieu Villatte, Ph.D., University of Louisiana, Lafayette - Chair Louise McHugh, University College Dublin Francisco Ruiz-Jimenez, University of Almeria, Spain Sean Hughes, University of Ireland, Maynooth

Message from our WC10 Program Chair • Emily Sandoz, Ph.D.

When the position of Program Chair for the ACBS World Conference X was first mentioned to me in Parma last year, I immediately found myself reeling. I remember putting my hands on the table in the conference bookstore to steady myself. I had seen so many amazing things shift and change and grow since my first ACBS conference in London (2006). And it was becoming apparent to me over the course of that conference that we, as an organization, were uniquely poised to take our work to a new level. I reeled in wonder of what that might involve. I said yes. "Of course," I recall saying, "of course." I spent much of the rest of the conference scheming excitedly about what I might create.

It wasn't long before my excitement was matched and then surpassed by a sense of complete inadequacy for the task. The more ideas I had or received from others, the more inadequate I felt to carry them out. In a still, quiet moment of clarity, I suddenly recognized the part of the job



before me that was perhaps more important than my excitement or my productivity or all of the brilliant ideas put together. I asked for help. I started looking at all my lovely colleagues in terms of what their interests, expertise, passions and gripes might become if given a little room to grow. For months, every article, listserv post, and offhand comment I received as an invitation to wonder about what the person on the other side of it might contribute to the program. And the more I asked, the more people came forward.

The efforts of the folks who joined me on this journey have resulted in a program that I believe reflects the diversity, vitality, openness to ideas, and commitment to science that defines ACBS. I am proud of the work we accomplished together.

I had no idea what I was saying "yes" to when I answered "of course." Nor could I have imagined what a lovely opportunity I was being offered – the opportunity to fall in love with all of you and the work we share all over again. I hope you find some of that here this week.

Thank you,

Emily Sandoz University of Louisiana, Lafayette

Antitrust Policy (legal stuff!)

ACBS has a policy of strict compliance with federal and state antitrust laws. ACBS members cannot come to understandings, make agreements, or otherwise concur on positions or activities that in any way tend to raise, lower or stabilize prices or fees. Members <u>can</u> discuss pricing models, methods, systems, and applications, as well as certain cost matters that do not lead to an agreement or consensus on prices or fees to be charged. However, there can be <u>no</u> discussion as to what constitutes a reasonable, fair or appropriate price or fee to charge for any service or product. Information may be presented with regard to historical pricing activities so long as such information is general in nature and does not include data on current prices or fees being charged in any trade area. Any discussion of current or future prices, fees, discounting, and other terms and conditions of sale, which may lead to an agreement or consensus on prices or fees to be charged, is strictly prohibited. A price-fixing violation may be inferred from price-related discussions followed by parallel decisions on pricing by association members — even in the absence of an oral or written agreement.

Metro, Taxis, Luggage & Internet

Metro:

It's extremely convenient, easy, and inexpensive, and the White Flint station is right across the street from the hotel. The Metro Rail runs every 6 - 15 minutes out of the White Flint station depending on the time of day and day of the week.

(The last train going north, toward Shady Grove, is scheduled to leave the White Flint station at 12:31am, after midnight.)

Check out our webpage for more transportation info: <u>http://contextualpsychology.org/getting_there_getting_around_DC</u>

Going to DC:

Depending on where you're headed, from the conference hotel it should take you about 30-40 minutes on the Metro Rail to get downtown. If you're going downtown to eat, and it is a restaurant that takes reservations, I HIGHLY recommend getting your reservation well before. You can do so at http://www.opentable.com Penn Quarter is a neat area with a lot of restaurants (North and just slightly West of the Capitol Building), but there are many other options.

If you only have one evening, want to see "something scenic", and don't know what to do, I highly recommend the Jefferson Memorial at night (when it's dark... so eat dinner first). You'll want to take the Metro to the "Smithsonian" stop, then you can walk 20 minutes west & south to get to it. From the Jefferson you can see the White House & Washington Monument. If you walk a block north from the Smithsonian Metro stop, you can see the Capitol Building to your right.

Taxis in Maryland:

Orange Taxi: 1 (301) 912-0000 (serving Montgomery County, and all 3 major airports)

Montgomery County Taxi: 1 (240) 767-4488

Luggage:

If you need to check out of your hotel and bring your luggage to the conference with you on July 24 or 25, you may do so and store it near the conference registration desk (Timberlawn Room). Anything stored near the registration desk must be collected by 4:30pm or it will be locked up until the following day.

HOWEVER, we encourage you to ask at the hotel front desk first to see if they have space in their storage room (this will be easier for everyone, if they have space).

Please note: ACBS is not responsible for any lost or stolen items (but this has never happened before).

Internet:

Unfortunately there is no free wi-fi internet access in the Conference Meeting Space, however there is FREE Internet access in the Hotel Lobby for all (not only for those staying at the hotel).

ACBS World Conference 11 & 12!

Join us in 2013:

ACBS World Conference 11 Sydney, Australia (University of New South Wales) July 8-12, 2013 (pre-conference workshops July 8-9)

Join us in 2014:

ACBS World Conference 12 Minneapolis, Minnesota (Minneapolis Marriott) June 17-22, 2014

(pre-conference workshops June 17-18)



Sunday • July 22 • Evening

Registration

5:30pm-7:30pm (if you are unable to make it this evening, you may also collect your registration materials beginning Monday, July 23 at 7:30am)

Lower Level, Bethesda North Marriott Hotel & Conference Center

Opening Session, ACBS World Conference X

7:00pm-8:30pm

Grand Ballroom, Bethesda North Marriott Hotel & Conference Center

Welcome & Awards

Patricia Bach, Illinois Institute of Technology, Chicago, IL, USA; ACBS President Steven C. Hayes, University of Nevada, Reno Emily Sandoz, University of Louisiana, Lafayette; conference program chair Emily Rodrigues, ACBS, Executive Director

1. Understanding the Self from a Functional Contextual perspective

Louise McHugh, Ph.D., University College Dublin

The self is a concept that is widespread in modern psychology and has played either a central or supporting explanatory role in several major theoretical approaches to human behavior. Yet, for all its popularity as an explanatory concept, it has remained vague and ill-defined in operational terms. Recently, however, functional contextualistic behavior analysis has provided an account of human language and cognition characterised by precision, scope and depth that allows new insight into the origins and nature of the human sense of self. FC and more specifically Relational Frame Theory explain language as relationally framing and the self as the product of framing the behavior of oneself and others in accordance with deictic or perspective taking relations. The current talk will introduce the FC / RFT conceptualisation of the self, the burgeoning empirical literature that supports this conception and the implications this can have for our understanding ourselves and each other.



Poster Session #1 & Cocktail Social

8:30pm-10:30pm (posters may be removed as early as 10:00pm at the discretion of the presenter) **Grand Ballroom, Bethesda North Marriott Hotel & Conference Center** Abstracts for the Posters (and the poster files... as we receive them) can be found at <u>http://contextualpsychology.org/wc10_posters</u>

Behavioral Medicine

1. A Look at Body Mass Index, Experiential Avoidance, Mindfulness, Emotional Dysregulation, and Weight-related Excessive Behaviors in a College Population

Subtopic: Obesity

Tamara Loverich, Ph.D., Eastern Michigan University Matt Sabo, M.S., Eastern Michigan University Ashley Wiedemann, M.S., Eastern Michigan University

2. Implicit cognitive processes in people with seizures

Subtopic: IRAP, Non-epileptic attack disorder Lian Dimaro, B.Sc., University of Nottingham, UK Markus Reuber, M.D., Ph.D., University of Sheffield, UK Ian Brown, D.Clin.Psy., Nottinghamshire Healthcare NHS Trust, UK

David Dawson, D.Clin.Psy., University of Lincoln

3. ACT for Weight Loss Plan Adherence

Subtopic: Weight Loss Plan Adherence

- Julie E. Angiola, M.S., Ph.D. Candidate, Psychology Department, University of Wyoming and Geisinger Medical Center (Adult Behavioral Medicine Resident)
- Anne M. Bowen, Ph.D., School of Nursing, University of Wyoming
- 4. Do Telephone-Delivered Self-Management Interventions for Chronic Pain in Persons with Disabilities Promote Pain-Related Acceptance that Contributes to Treatment Gains?

Subtopic: Chronic Pain

Sarah J. Sullivan, University of Washington Dawn M. Ehde, University of Washington Judith Turner, University of Washington Tiara Dillworth, University of Washington

5. Application of the Six Core Processes of ACT to a Fitness Walking Program

Subtopic: Cardio-respiratory Fitness

- Neville Galloway-Williams, M.S., Virginia Polytechnic Institute and State University
- Emily C. Martin, M.S., Virginia Polytechnic Institute and State University

Richard S. Winett, Ph.D., Virginia Polytechnic Institute and State University

6. Adding Internet-delivered interventions to a pain management program: Experiences from a randomized controlled clinical trial Subtopic: Pain, Internet

Subtopic: Pain, Internet

Nina Bendelin, MSc, Pain and Rehabilitation Centre, Linköping, Sweden

Marie Blom, MSc, Pain and Rehabilitation Centre, Linköping, Sweden

Martin Södermark, Pain and Rehabilitation Centre, Linköping, Sweden

Clinical Interventions and Interests

7. Neuroticism, Symptoms of Psychological Distress, and Life Satisfaction: The Indirect Effects of Experiential Avoidance

Subtopic: Depression, Anxiety, Experiential Avoidance Thomas A. Altro, B.S., University of Central Florida Jonathan C. Mitchell, M.A., University of Central Florida Jeffrey E. Cassisi, Ph.D., University of Central Florida

8. Acceptance and Commitment Therapy with Adolescents: A Randomized Trial of Group Therapy

Subtopic: Adolescent group therapy ACT

- Sheri Turrell, Ph.D., Trillium Health Centre, Mississauga, Ontario, Canada
- Marci Vickar, M.A.Sc., OISE/University of Toronto, Toronto, Ontario, Canada
- Mary Bell, MSW, RSW, Trillium Health Centre, Mississauga, Ontario, Canada
- Catherine Huddleston, M.A.Sc., Trillium Health Centre, Mississauga, Ontario, Canada
- Linda Ivan, MSW, RSW, Trillium Health Centre, Mississauga, Ontario, Canada
- Sheryl Parks, MSW, RSW, Trillium Health Centre, Mississauga, Ontario, Canada

9. Anxious Attachment in Social Anxiety Disorder: Relationships between Anxious Attachment and Clinical Severity, Perceived Stress, Emotion Dysregulation, and Core Beliefs

Subtopic: Social Anxiety Disorder Alexandra Davidson, PGSP-Stanford Consortium James Gross, Ph.D., Stanford University Philippe Goldin, Ph.D., Stanford University

10. Examining the Psychometric Properties of the Valued Living Questionnaire

Subtopic: Measurement, Values

Brandon Sanford, M.S., Missouri State University Ann Rost, Ph.D., Missouri State University David Houghton, B.A., Missouri State University David Bauman, M.A., Forest Institute Bridget Beachy, M.A., Forest Institute

11. Effects of Expressive Writing on Values Concordance

Subtopic: Values Ann Rost, Ph.D., Missouri State University Brandon Sanford, M.S., Missouri State University

12. An Investigation into the Relationships Among Adult Child and Parent Experiential Avoidance, Mindfulness, Emotional Dysregulation, and Excessive Behaviors

Subtopic: Experiential avoidance

Tamara Loverich, Ph.D., Eastern Michigan University Matt Sabo, M.S., Eastern Michigan University

13. Are self-loathing and perfectionist beliefs (verbal relations) implicated in the onset of disordered eating?

Subtopic: Disordered eating behaviours

Amanda Tetley, Trent Doctorate in Clinical Psychology Nima Golijani-Moghaddam, Trent Doctorate in Clinical Psychology

David L Dawson, Trent Doctorate in Clinical Psychology Michael Rennoldson, Trent Doctorate in Clinical Psychology

14. Psychological Inflexibility, Personality, and Treatment Outcome Following a

Mindfulness-based Intervention for Stress Subtopic: Mindfulness

Megan S. Steven-Wheeler, D.Phil., The Catholic University of America

Carol R. Glass, Ph.D., The Catholic University of America

Kevin J. Crowley, M.A., The Catholic University of America

Robert K. Hindman, M.A., The Catholic University of America

David D. Maron, M.A., The Catholic University of America Elizabeth W. Hirschhorn, The Catholic University of America

15. PsyMate: An instrument for ecological, momentary assessment of behavior and its context

Subtopic: Assessment

Tim Batink, MSc, Maastricht University, School for Mental Health and Neuroscience, Division 2: Mental Health.

Inez Myin-Germeys, Prof. Dr., Maastricht University, School for Mental Health and Neuroscience, Division 2: Mental Health.

Marieke Wichers, Dr. (Assistant Professor), Maastricht University, School for Mental Health and Neuroscience, Division 2: Mental Health.

16. The implicit relational assessment procedure (IRAP) and the malleability of negative implicit cognition toward women.

Subtopic: IRAP

Kerry Sheldon, Ph.D, University of Nottingham Dr David L. Dawson, University of Lincoln Dr Nina Golijani-Moghaddam, University of Lincoln

17. Validation study of the Italian version of the Cognitive Fusion Questionnaire (CFQ)

Subtopic: Cognitive Fusion

Francesco Dell'Orco, M.A., IULM University, Milan -IESCUM, Parma

- Anna Bianca Prevedini, M.A., IULM University, Milan -IESCUM, Parma
- Annalisa Oppo, M.A., IULM University, Milan IESCUM, Parma

Giovanbattista Presti, Ph.D., IULM University, Milan - IESCUM, Parma

Paolo Moderato, Ph.D., IULM University, Milan - IESCUM, Parma

18. Investigating implicit attitudes to the therapeutic relationship and their impact on outcomes in therapy.

Subtopic: IRAP

Michael Oddi, University of Nottingham / University of Lincoln

Dave Dawson, DClinPsy, University of Lincoln

19. Implicit Relational Assessment Procedure: Assessing the Effectiveness of a Brief Cognitive-Behavioural Analogue Intervention in Relation to Restructuring Implicit Rape Supportive Verbal Relations.

Subtopic: IRAP

Anna Brown, MSc, University of Lincoln

Dr David Dawson DClinPsy, University of Lincoln Dr Nima Golijani-Moghaddam DClinPsy, University of Lincoln

20. Nonaggressive Rules and Provocation

Subtopic: Aggression

Andrew M. Sherrill, B.S., Northern Illinois University Kathryn M. Bell, Ph.D., Capital University Joseph Magliano, Ph.D., Northern Illinois University Alan Rosenbaum, Ph.D., Northern Illinois University Patricia Wallace, Ph.D., Northern Illinois University Aaron Briggs, Northern Illinois University

21. ACT - enhanced Parent Training for parents of ADHD children.

Subtopic: Children, ADHD, Parent Traning

Anna Bianca Prevedini, M.A., IULM University Milan-Italy; IESCUM Italy

Francesca Pergolizzi, PsyD, IESCUM Italy

Laura Vanzin, PsyD, Istituto Scientifico Eugenio Medea IRCCS – Bosisio Parini -Italy

Massimo Molteni, MD, Istituto Scientifico Eugenio Medea IRCCS – Bosisio Parini -Italy

Giovambattista Presti, Ph.D., IULM University Milan; IESCUM Italy

Paolo Moderato, Ph.D., IULM University Milan; IESCUM Italy

22. Psychological acceptance and impulsivity: Interaction predicts disordered eating behavior

Subtopic: eating behavior

Stephanie P. Goldstein, Drexel University James D. Herbert, Ph.D., Drexel University Evan M. Forman, Ph.D., Drexel University Adrienne Juarascio, M.S., Drexel University Breann Erford, Drexel University Amanda Barbieri, Drexel University

23. Experiential Avoidance, Anxiety Sensitivity, Coping and Smoking

Subtopic: Smoking and Expiriential Avoidance Vasos Pavli, University of Cyprus

24. Self-Compassion and Social Anxiety: The Mediating Role of Shame

Subtopic: Social Anixety Emily Winch, M.A., La Salle University Valerie Saxton, M.A., La Salle University Kimberly Aker, M.A., La Salle University Lienna Wilson, B.A., La Salle University LeeAnn Cardaciotto, Ph.D., La Salle University Edie Goldbacher, Ph.D., La Salle University

25. Acceptance and Commitment Therapy as an Alternative to Exposure: A Pilot Study in the Treatment of Veterans Diagnosed with PTSD.

Subtopic: PTSD

Katharine C. Sears, Ph.D., VA National Center for PTSD Varvara Mazina, BA, VA National Center for PTSD Amy Wagner, Ph.D., Portland VA Medical Center Robyn Walser, Ph.D., VA National Center for PTSD

26. Body-related acceptance as a potential mediator of body image dissatisfaction and eating pathology

Subtopic: Disordered Eating, Body Image, Acceptance

Alyssa Matteucci, Drexel University Adrienne Juarascio, M.S., Drexel University Evan Forman, Ph.D., Drexel University James Herbert, Ph.D., Drexel University

27. Quantitative Functional Evaluation: an Alternative to Categorical and Dimensional Approaches of Depression

Subtopic: Depression

Jean-Louis Monestès, Ph.D., Mental Health Services - CHU de la Réunion

UNDA

Jonathan Delsaux, M.D., Ph Pinel Hospital, CHU Amiens Matthieu Villatte, Ph.D., University of Louisiana, Lafayette Cyril Ferdynus, Ph.D., CHU de la Réunion Gwenole Loas, M.D., Ph.D., Ph Pinel Hospital, CHU Amiens Stéphane Rusinek, Ph.D., PSITEC, Lille 3 University

28. Aplication of Acceptance and Commitment Therapy in obsessive symptomathology: a case study

Subtopic: OCD

Abraham Álvarez-Bejarano, Universidad de Almería Sara de Rivas, Universidad Autónoma de Madrid

29. Utilizing Fluency-Building to Train Deictic Relational Responding in a Young Child with Autism

Subtopic: Perspective-Taking Brooke M. Berry, Fit Learning Kendra Brooks Rickard, Ph.D., BCBA, Fit Learning

30. ACT Goes to Hollywood: Lessons Learned from the Trenches When Developing Multimedia Enhancements of an Acceptance and Commitment Therapy-Based Online Treatment Program

Subtopic: Acceptance and Commitment Therapy Charles Raffaele, University at Albany Matthew R. Donati, University at Albany Christopher R. Berghoff, University at Albany Allyson Delprino, University at Albany Edward Hickling, Capital Psychological Associates John P. Forsyth, University at Albany

31. Psychological Inflexibility and Smoking in a sample of adolescents.

Subtopic: substance misuse Georgia Nathanail, University of Cyprus Maria Koushiou, University of Cyprus

32. When I feel your pain: Perspective taking and relational aggression among young adults

Subtopic: relational aggression, perspective taking Sarah E. Allen, University of Mississippi Olga V. Berkout, M.A., University of Mississippi Alan M. Gross, Ph.D., University of Mississippi 33. Contextual behavioral skills training in group for adults with Asperger syndrome: A pilot study

Subtopic: Asperger Syndrome, mindfulness, stress Johan Pahnke, Psychologist, Karolinska Institute Stockholm, KIND (Karolinska Institutet Center of Neurodevelopmental Disorders)/Dep. of Clin. Neuroscience Johan Bjureberg, Psychologist, Psychiatry Northwest, Stockholm Sven Bölte, prof., Karolinska Institute Stockholm, KIND (Karolinska Institutet Center of Neurodevelopmental Disorders) Jussi Jokinen, Ph.D., MD, Karolinska Institute Stockholm, Dep. of Clin. Neuroscience Tatja Hirvikoski, Ph.D., Psychologist, specialist in neuropsychology, Karolinska Institute Stockholm, KIND (Karolinska Institutet Center of Neurodevelopmental Disorders)/Dep. of Clin. Neuroscience

34. A therapeutical approach to subjective memory complaints in elderly people

Subtopic: elderly people

- Tomás Quirosa-Moreno, Ph.D., University of Almería (Spain)
- Enrique Gil-González, Ph.D, University of Almería (Spain) MªTeresa Lorente-Molina, M.A., University of Almería (Spain)

35. Does Values Clarification Impact salivary cortisol levels following a social stressor: A follow-up Study

Subtopic: Stress

Walter Louie, San Jose State University Benjamin Ramos, San Jose State University Justine Preza, San Jose State University Evelyn Shieh, San Jose State University Meghana Kotwal, San Jose State University Gabriella Alshafie, San Jose State University

36. A Multiple Mediation Analysis of ACT and CBT Self-Help Treatments for Anxious Suffering: What Are the Underlying Mechanisms of Action?

Subtopic: Bibliotherapy

Matthew R. Donati, University at Albany, SUNY Eric Petrone, University at Albany, SUNY Amanda R. Russo, University at Albany, SUNY Samantha Callahan, University at Albany, SUNY John P. Forsyth, University at Albany, SUNY

37. ACT for Insomniacs

Subtopic: Insomnia Guy Meadows Ph.D., The Sleep School

38. ACT with Yoga for Anxiety Pilot Study

Subtopic: Yoga Kate Morrissey, LCSW, Rubber Soul Yoga, Advantage Behavioral Health

Chad Drake, Ph.D., Universtiy of South Carolina, Aiken

Educational Settings

39. The Contributions of Religiosity, Perspective Taking, and Experiential Avoidance to Medical Trainees' Openness to Spirituality Discussions

Subtopic: Physician-patient communication Amy House, Ph.D., Georgia Health Sciences University

40. Developing an iPad App for designing and managing RFT trainings with autistic children

Subtopic: Autism, Relational Training Giovambattista Presti, Ph.D., M.D., IULM University, Milan Francesco Pozzi, IULM University, Milan Luciano Baresi, Politecnico of Milan Michele Amori, Politecnico of Milan Melissa Scagnelli, IULM University, Milan Edoardo Vannuttelli, Politecnico of Milan

Functional Contextual Neuroscience and Pharmacology

41. Relational Frame Theory and Executive Functioning: Preliminary Data

Subtopic: Neuropsychology, brain-behaviour relations, IRAP

Daniel Stark, MSc, University of Nottingham David Dawson, DClinPsy, University of Lincoln Dermot Barnes-Holmes, D.Phil, National University of Ireland, Maynooth

Organizational Behavior Management

42. ACT and Organizational well being in an intensive care unit: an exploratory open study

Subtopic: Psycological Flexibility

Francesco Dell'Orco, M.A., IULM University, Milan -IESCUM, Parma

Simonetta Protti, MD, A.O. della Provincia di Lodi Giovanbattista Presti, Ph.D., IULM University, Milan -

IESCUM, Parma

Lucio Raimondi, A.O della Provincia di Lodi Paolo Moderato, Ph.D., IULM University, Milan - IESCUM, Parma

43. Using ACT workshops in career transition: A pilot study

Subtopic: Psychological distress, coping with job loss Julie Ménard, Ph.D., University of Quebec at Montreal Eric Tremblay, M. Psy., André Filion and Associates inc.

Other

44. Beliefs About the Biological (vs. Nonbiological) Origins of Mental Illness and the Stigmatization of People with Mental Illness

Subtopic: Mental illness, substance abuse Patrick Sears, M.A., CADC, The Chicago School of Professional Psychology

45. Does Mindfulness and Psychological Flexibility predict Somatization, Depression, Anxiety and General Psychological Distress in a Non-clinical Asian American College Sample?

Subtopic: Mindfulness and Psychological Flexibility Amar Mandavia, Georgia State University Akihiko Masuda, Ph. D, Georgia State University

46. Is Experiential Avoidance a mediator of the association between Anxiety Sensitivity and Social Anxiety?

Subtopic: Social Anxiety

Elena Charalambous, MSc, University of Cyprus Georgia Panayiotou, Ph.D., University of Cyprus Georgina Christodoulou, University of Cyprus

47. Experiential avoidance and studyaholism:Relationship to motivation to valuing studying and mental health.

Subtopic: Workaholism

Jaqueline Pistorello, Ph.D., University of Nevada, Reno Jose Arauz, Suffolk University

48. Effects of select or reject controls on stimulus-class formation and transfer of function

Subtopic: Equivalence

William Ferreira Perez, M.D., Universidade de Sao Paulo, Brazil

Gerson Yukio Tomanari, Ph.D., Universidade de Sao Paulo, Brazil

49. The Role of Values in Obsessive-Compulsive Disorder Severity

Subtopic: OCD

Chad T. Wetterneck, Ph.D., University of Houston - Clear Lake

Eric B. Lee B.S., University of Houston - Clear Lake Angela H. Smith M. A., University of Houston John M. Hart, The Menninger Clinic

50. Validating the Functional Analytic Psychotherapy Intimacy Scale Therapist Version (FAPIS-T)

Subtopic: Functional Analytic Psychotherapy

Chad T. Wetterneck, Ph.D., University of Houston - Clear Lake

Gareth Holman Ph.D.,

Eric B. Lee B.S., University of Houston - Clear Lake Jared Broussard, University of Houston - Clear Lake

Performance-Enhancing Interventions

51. Mindfulness, conative processes and wellbeing.

Subtopic: Mindfulness

Simon Grégoire, Ph.D., Université du Québec à Montréal (UQAM)

52. The effect of cognitive defusion on attentional biases towards negative stimuli in high-anxiety participants

Subtopic: Cognitive Defusion

Christopher Wilson, Ph.D., Teesside University

53. Components Of Mindfulness As Predictors Of Sleep Quality: The Contribution Of Acceptance And Awareness

Subtopic: mindfulness, sleep quality, acceptance, college Christina Barrasso, BA, Kean University Karolina Kowarz, BA, Kean University Dasa Jendrusakova, M.A., Kean University Jennifer Block-Lerner, Ph.D., Kean University LeeAnn Cardaciotto, Ph.D., La Salle University

Prevention and Community-based Settings

54. ACT - enhanced classes on academic and studying skills in a university setting

- Subtopic: college students; drop-out prevention; study skills; groups
- Anna Bianca Prevedini, M.A., IULM University Milan; IESCUM Italy

- Francesco Pozzi, Ph.D., IULM University Milan; IESCUM Italy
- Francesco Dell'Orco, M.A., IULM University Milan; IESCUM Italy

D U N D C

Anna Missaglia, PsyD, IULM University Milan Vincenzo Russo, Ph.D., IULM University Milan; IESCUM Italy

Paolo Moderato, Ph.D., IULM University Milan; IESCUM Italy

55. Impact of Mindfulness versus Control instructions on stigmatizing behaviors with an HIV patient

Subtopic: Stigma

Gabriela L. Alshafie, San Jose State University Ruthie Ayzenberg

Professional Development

56. Do we practice what we teach: Psychological inflexibility and value incongruence in student health care providers

Subtopic: Psychological flexibility and value congruence in RNs, NPs, and clinical psychology students

- David Bauman, M.A., The School of Professional Psychology at Forest Institute
- Bridget Beachy, M.A., The School of Professional Psychology at Forest Institute
- Christopher Neumann, Ph.D., The School of Professional Psychology at Forest Institute

Kathryn Hope, Ph.D., RN, Missouri State University Kerri Miller, RN, DNP, ANP-BC, Missouri State University

Relational Frame Theory

57. The transfer of sameness and opposition contextual-cue functions through equivalence classes

Subtopic: Transfer of function

- William Ferreira Perez, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Daniel Caro, Nucleo Paradigma de Analise do Comportamento, Brazil
- Adriana Fidalgo, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Roberta Kovac, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Yara Nico, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil

58. Transfer of conditional control and the expansion of equivalence classes

Subtopic: Transfer of function

- William Ferreira Perez, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Adriana Fidalgo, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Yara Nico, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil
- Roberta Kovac, M.D., Nucleo Paradigma de Analise do Comportamento, Brazil

Supervision, Training, and Dissemination

59. The role of an ACT experiential workshop on clinical psychologists in training

Subtopic: training, experiential workshop, defusion Annalisa Oppo, D. Psych., Institute of Behavior,

Consumers, Communication, IULM University, Milan (Italy), Dep. of Psychology, University of Parma

Giovambattista Presti, M.D., Institute of Behavior, Consumers, Communication, IULM University, Milan (Italy)

Anna Bianca Prevedini, D. Psych., Institute of Behavior, Consumers, Communication, IULM University, Milan (Italy) Francesco Dell'Orco, D.Psych., Institute of Behavior, Consumers, Communication, IULM University, Milan (Italy) Paolo Moderato, Ph.D., Institute of Behavior,

Consumers, Communication, IULM University, Milan (Italy)

60. Becoming a Mindful Supervisor: Using mindfulness both as an intervention and supervisory-style Subtopic: Mindfulness

Kyle C. Horst, M.A. LMFT, Kansas State University Marcie Lechtenberg, M.A., Kansas State University Sandra Stith, Ph.D., Kansas State University

N

Theoretical and Philosophical Foundations

61. Evaluating the Impact of ACT and CBT Processes on Quality of Life: A Path Analysis Subtopic: Quality of Life

Allyson Delprino, University at Albany, SUNY Christopher R. Berghoff, University at Albany, SUNY Amanda Russo, University at Albany, SUNY Charles Raffaele, University at Albany, SUNY Matthew R. Donati, University at Albany, SUNY John P. Forsyth, University at Albany, SUNY

62. Acceptance and Mindfulness-Based Processes Fully Mediate the Relation between Worry and Quality of Life: A Multiple Mediation Analysis

Subtopic: Chronic Worry

Matthew R. Donati, University at Albany, SUNY Kristin N. Herzberg, University at Albany, SUNY Samantha Callahan, University at Albany, SUNY Krystal N. Cox, University at Albany, SUNY Eric Petrone, University at Albany, SUNY John P. Forsyth, University at Albany, SUNY

Program Detail • Monday • July 23

Monday Morning 7:00am

2. Mindfulness meditation group WORKSHOP (7:00-7:50am) Components: *Experiential exercises* <u>Categories: Performance-enhancing interventions,</u> <u>Clin. Interven. & Interests, Prevention & Comm.-</u> <u>Based, Beh. med., Edu. settings, Prof. Dev.,</u> <u>Mindfulness</u> *Target Audience: Beg. Interm. Adv.*

Target Audience: Beg., Interm., Adv. Location: Ballroom A

Jan Martz, M.D., Private Practice

In this early morning mindfulness group, I will be offering a guided meditation (sitting on chairs or on the floor), followed by a short walking meditation and a period of sitting in silence. The function will be to foster present moment awareness, self as context experience, acceptance and defusion processes as well as contacting personal values and preparing ourselves mindfully for a full conference day.

Educational Objectives:

- 1. Use awareness of body sensations to become more present, open and focused.
- 2. Identify thoughts as they happen and come back to present moment awareness.
- 3. Describe how to practice sitting in silence as a technique to use during therapy sessions.

3. Mindful Moving

WORKSHOP (7:00-7:50am) Components: Experiential exercises Categories: Prevention & Comm.-Based, Clin. Interven. & Interests, mindfulness of body practical skills for clinicians

Target Audience: Beg., Interm., Adv. Location: Ballroom H

NeLi (Janelle Louise) Martin, Private Practice Psychologist, Brisbane Australia

Centering awareness in the body rather than in the head / thinking mind is an integral practice of mindfulness. It establishes the platform from which thoughts can be observed and defusion is possible. It opens up the possibility of acceptance of what is occurring by first coming to know what is occurring in a non-conceptual way. This workshop will offer participants practice in the simple yet not easy practice of mindfulness of the body through the internal sense of touch, whilst the body is still as well as moving into and out of different postures. This offers a clear pathway to mindfulness in daily life. Participants will also have to opportunity to reflect and prepare something suitable for their clients. This has application generally for people interested in alleviating suffering and for those with diagnosed conditions including chronic pain.

Educational Objectives:

1. Describe the experience of awareness in the body whilst lying down.

- 2. Utilize breathing and movement techniques that can be used with clients.
- Compare techniques of meditation and movement to increase mindfulness.

Monday Morning 8:00am

A. 1st Annual Meeting of the ACBS SIG for the Advancement of Contextual Education Science CHAPTER/SIG MEETING (8:00-8:50am) Location: Forest Glen

Nick Berens, Fit Learning Tim Weil, University of South Florida

The First Annual Meeting of the ACBS SIG for the ACES will serve several functions. Of primary importance, will be the establishment procedures and policies that will ensure the fulfillment of ACES' mission. Secondarily, it will enable the membership to commune, collaborate, and contribute individual inputs to the mission. Finally, the first ACES SIG meeting will be remembered as a historical moment in education. It will be marked as a time when like minded individuals armed with the philosophical, theoretical, and scientific tools of CBS came together and began what will be a positive and radical transformation of educational practices across the globe.

B. New England ACT Chapter of ACBS Chapter Meeting

CHAPTER/SIG MEETING (8:00-8:50am) Location: Linden Oak

Lisa Coyne, Suffolk University

This is an opportunity for Chapter members (and those interested in joining the Chapter) to meet for an hour of planning, organizing, and networking.

Monday Morning 9:00am

4. Introduction to Functional Analytic Psychotherapy (FAP): Using Behavioral Principles to Create Intense and Curative Therapeutic Relationships WORKSHOP (9:00-Noon)

Components: *Conceptual analysis, Original data, Experiential exercises, Didactic presentation, Case presentation, Role play*

<u>Categories: Clin. Interven. & Interests, Theory &</u> <u>Philo., Therapeutic Relationship</u>

Target Audience: Beg.

Location: Grand Ballroom

Mavis Tsai, Ph.D., Independent Practice and U. of Washington

Robert J. Kohlenberg, Ph.D., ABBP, University of Washington

Increase the emotional intensity, interpersonal focus and impact of your treatment. Functional Analytic Psychotherapy (FAP) employs functional analysis to create deep, meaningful and healing therapeutic relationships by focusing on the subtle ways clients' daily life problems occur in the therapy session. FAP uses awareness, courage and love (behaviorally

defined) in the therapist-client relationship to produce significant change. Innovations in therapeutic rationales and treatment planning lead clients to go beyond presenting symptoms into their purpose and passion for living. FAP can be applied to a wide range of clinical problems, including: depression, anxiety, intimacy issues, personality disorders, problems of the self, and OCD. This workshop will include videotaped therapy segments and experiential exercises. FAP can be integrated into your current practice, and provides a conceptual and practical framework that will

help super-charge your next therapy session.

Educational Objectives:

- 1. Assess the ways clients' daily life problems are brought into the therapy session.
- 2. Apply five therapeutic rules to guide treatment plus concrete exercises to increase connection. intensity and effectiveness in your interventions.
- 3. Explain how some commonly used interventions can be inadvertently counter-therapeutic.

5. Mindfulness for Ten: New Group Strategies in Acceptance and Commitment Therapy WORKSHOP (9:00-Noon)

Components: Conceptual analysis, Original data, Experiential exercises

Categories: Clin. Interven. & Interests, Edu. settings, Group Psychotherapy

Target Audience: Beg., Interm.

Location: Ballroom A

Matthew S. Boone, MSW, Cornell University Counseling and **Psychological Services**

Cory Myler, M.S., Cornell University Counseling and **Psychological Services**

Acceptance and Commitment Therapy (ACT) easily lends itself to a group format. Most experiential exercises can be scaled to a group level, members can teach each other through modeling and discussion, and interactions with fellow group members can give clients a better understanding of how experiential avoidance and defusion affect their relationships. This experiential workshop will introduce clinicians to new group exercises adapted from familiar metaphors and individual and group exercises in the ACT literature. It will also help clinicians conceptualize bringing psychological flexibility processes, including mindfulness, to the "here and now" experience of group members. The exercises – including "The Butterfly," "Willingness with an Avatar," "Pick a Metaphor," and others – were developed and roadtested in the presenters' practice in college health, but they can easily be adapted to other populations. Furthermore, they can also be used as workshop material for budding ACT trainers. Strategies for successfully "selling" the exercises will be discussed, as well as effectively weaving them into group discussions and moment to moment interpersonal processes. Data from a small, uncontrolled pilot study

on an ACT group for depression and anxiety in college counseling will be presented.

Educational Objectives:

- 1. Describe two new ACT-consistent experiential exercises geared toward groups.
- 2. Design strategies for successfully implementing experiential exercises in groups.
- Discuss bringing mindfulness to the here and now, moment to moment experiences of group members.

6. Providing Supervision in ACT: Fundamentals and Practice

WORKSHOP (9:00-Noon)

Components: Experiential exercises, Didactic presentation, Role play

Categories: Superv., Train. & Dissem., Clin. Interven. & Interests, Supervision in ACT

Target Audience: Interm.

Location: Ballroom B

Sonja V. Batten, Ph.D., Office of Mental Health Services, VA Central Office

Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training

Supervision of trainees in Acceptance and Commitment Therapy is vital to learning to competently use this treatment model. In order to be an effective supervisor in this model, a context for establishing willingness to experience is fundamental. The supervisor needs to both model willingness and promote such behavior in supervisees in a way that is tangible and transferable to therapy sessions. Thus, working with the supervisee on personal acceptance and commitment, while also pointing to the parallel processes for the client can be a powerful training tool. Strategies for providing quality supervision that are ACT-consistent and compassionate will be presented. This workshop will begin with a discussion of overall supervision approach, expression of emotion in ACT-based supervision and a few do's and don'ts. Suggestions will be made for shaping the ability of therapists in training to willingly experience and express emotion, with clarification of appropriate supervisory boundaries. This didactic discussion will be followed by supervision role play and experiential exercises in which attendees will practice different ways of responding to challenging content in a supervisory setting.

Educational Objectives:

- 1. Discuss the theoretical basis for including emotions in the psychotherapy supervision process.
- 2. Describe how to focus on acceptance of emotion and thoughts, both within the supervisee's experience and the client's experience.
- 3. Describe how personal reaction to supervisees impacts the supervision process.

7. Integrating ACT into Coaching

PANEL (9:00-10:30am) Components: Conceptual analysis, Didactic presentation, Case presentation

Categories: Theory & Philo., Performance-enhancing, Coaching

Target Audience: Beg., Interm. Location: Ballroom C

Chair: Richard Blonna, Ed.D., William Paterson University Robert Archer C.Psychol, MSc, Career Coach in Private Practice

 Molly Froelich, M.A., Life Coach in Private Practice
 Roberto Bonanomi, Ph.D., ACT-Italy; Psychologist and Business Coach in Private Practice, Director of Master in Organizational And Business Coach - Scuol
 Ellen Ostrow, Ph.D., CMC, Lawyers Life Coach LLC

Coaching theory and practice revolve around helping to motivate clients to achieve their life and professional goals and live purposeful lives, driven by their values and those of their organizations. Coaching theory assumes that clients are whole, functioning people who are looking to improve their performance and their lives. Clients often seek coaching help because they are stuck in a rut and are not making progress at achieving their goals. Though not dysfunctional, they are often suffering from anxiety, worry, stress, and a host of other problems in addition to being stuck. Every day, they struggle with unhelpful thoughts and painful emotions that contribute to their becoming psychologically inflexible, stuck in a rut, and unable to meet their goals. While the presenting problems differ for clients seeking coaching from those needing therapy, both share the common problem of being psychologically inflexible and stuck in a rut. This panel will discuss how ACT principles and practices are being used by a sample of coaches to help their clients manage their emotions, get unstuck, and make progress in meeting their values-based goals.

Educational Objectives:

- 1. Compare the similarities and differences between coaching and therapy.
- 2. Describe how the six core ACT therapeutic processes are used with coaching clients.
- Compare and contrast the use of ACT principles and practices with at least three different types of coaching clients.

8. Promoting Behavior Change in Primary Care (and Other Brief Settings!) WORKSHOP (9:00-Noon)

Components: *Conceptual analysis, Literature review, Experiential exercises, Didactic presentation, Case presentation, Role play*

<u>Categories: Clin. Interven. & Interests, Beh. med.,</u> <u>Primary Care</u>

Target Audience: Beg., Interm.

Location: Ballroom F

Patricia J. Robinson, Ph.D., Mountainview Consulting Group Debra A. Gould, M.D., MPH, Community Health of Central Washington, University of Washington Department of Family Medicine

Increasingly, behavioral health clinicians provide services in brief settings, such as primary care, behavioral medicine clinics, in-patient units, jails, and juvenile detention centers. To succeed in these practices, clinicians need potent behavior change tools that (1) promote immediate change, (2) support team-based interventions, (3) enhance client experience of continuity of care among different systems of care and (4) apply equally well to a wide variety of behavioral problems. The ACT model for Promoting Psychological Flexibility meets these requirements. This workshop provides an overview of principles for successful implementation of the model, illustrations of individual and group applications and strategies for applying the model to promote primary care provider resiliency.

Educational Objectives:

 List principles for successful implementation of the Psychological Flexibility model in a primary care setting.

N D A

- 2. Describe a case in the primary care setting and the intervention methods used.
- 3. List ways to promote resiliency in providers who work in brief treatment settings

9. The Wisdom to Know the Difference WORKSHOP (9:00-Noon)

Components: Experiential exercises, Didactic presentation, Case presentation Categories: Clin. Interven. & Interests, Beh. med., addiction

Target Audience: Beg., Interm.

Location: Ballroom G

Kelly G. Wilson, Ph.D., University of Mississippi Solomon Kurz, University of Mississippi

Early evidence suggests that ACT can be useful for a wide variety of substance use disorders, including marijuana abuse, severe poly-substance abuse, methadone detoxification, and nicotine dependence. ACT has also shown good outcomes for many of the difficulties that often accompany substance use disorders, such as anxiety, depression, and axis-2 disorders.

Twelve-step involvement has been linked to good long-term outcomes in correlational research. In addition, treatment intended to facilitate 12-step participation has shown as good or better outcomes when compared to gold standard treatments such as CBT and Motivational Interviewing (i.e., see Project Match results). Twelve-step facilitation has not been systematically tested with difficulties outside substance addictions. The workshop will explore the practical application of the psychological flexibility model to addiction. Through exercises and didactic training, we will explore ACT interventions for addiction. In this workshop we will also explore the "how to" of assisting clients in taking advantage of the overlap between ACT and 12-step programs.

Although 12-step programs are not for everyone, the 12-step recovery community constitutes the single largest community-based self-help resource available for addicted individuals. We will give mention to others, but our comments regarding alternatives will be limited. We will focus on direct intervention

strategies that can help clients overcome obstacles to using this resource.



We will feature a segment called "But I Hate AA" where we will explore some of the most common objections to AA. We will describe the potential synergy of a ACT as treatment approach to a broad array of difficulties combined with the enormous community resource found in programs such as Alcoholics Anonymous.

Educational Objectives:

1. Describe the empirical basis for using ACT and 12-step with addictions.

2. Use ACT mindfulness and behavioral activation interventions to treat addiction.

3. Develop interventions that remove obstacles to using ACT in combination with 12-step resources.

10. Sizing up Selfing: Efforts to Assess Self-as-Context

SYMPOSIUM (9:00-10:30am) Components: *Conceptual analysis, Original data* <u>Categories: Other, Self-as-Context</u> *Target Audience: Beg., Interm., Adv. Location: Ballroom H*

Chair: Rob Zettle, Ph.D., Wichita State University Discussant: Hank Robb, Ph.D., Private Practice

- Watching, Evaluating, and Noticing You're Noticing: Perils in Constructing a Self-as-Context Measure Thomas G. Szabo, University of Nevada, Reno Tami Jeffcoat, University of Nevada, Reno Steven C. Hayes, Ph.D., University of Nevada, Reno
- A Behavioral Measure Of The Construction Of Self As Story, Process And Perspective Paul W. B. Atkins, Australian National University Robert Styles, Australian National University
- Developing a Quantitative Measure of Self-as-Context: Preliminary Findings Suzanne R. Gird, Wichita State University Robert D. Zettle, Ph.D., Wichita State University Blake K. Webster, Wichita State University Angie Hardage-Bundy, Wichita State University

Dimensions of selfing, particularly self-as-context, have proven to be perhaps the most elusive processes within the hexaflex to assess satisfactorily. This symposium will summarize recent efforts to develop adequate ways of measuring selfing and some of the perils and challenges that have been encountered in attempting to do so.

Educational Objectives:

- 1. Define self-as-context.
- 2. Describe the latest methods that have been developed to assess self-as-context.
- 3. List the perils and challenges involved in developing measures of self-as-context.

11. Deriving RFT: How to spread the visibility of our research and how to make its applications more accessible. PANEL (9:00-10:30am)

Components: Conceptual analysis

Categories: RFT, Superv., Train. & Dissem.,

Dissemination of RFT research and application Target Audience: Interm., Adv.

Location: Amphitheater

Chair: Matthieu Villatte, Ph.D., University of Louisiana Matthieu Villatte, Ph.D., University of Louisiana, Lafayette. Steve Hayes, Ph.D., University of Nevada, Reno. Ruth Anne Rehfeldt, Ph.D., Southern Illinois University Ian Stewart, Ph.D., University of Galway, Ireland Niklas Torneke, M.D., Private Practice, Sweden

RFT has long had the reputation as a very difficult theory to understand and yet, it has great potential for far-reaching impact, considering that language and cognition are involved in most human activities. Strongly rooted in behavior analysis, RFT is surprisingly not well understood in that community; it is also still ignored by most cognitive psychologists in spite of the efforts of RFT researchers to address questions as important as implicit attitudes, analogical reasoning, and Theory of Mind. Even within clinical psychology, where RFT has been applied most successfully through ACT, it appears that relatively few clinicians integrate RFT principles directly in their everyday practice.

This panel discussion will explore the strategies that RFT researchers and applied psychologists can develop to spread RFT in new areas and communities. The discussants will analyze what has worked and not worked so far, as well as new approaches to increase the interest for RFT and its visibility in the future.

Educational Objectives:

- 1. Describe two recent research studies on RFT.
- 2. Explain the relevance of RFT to applied areas.
- 3. List two new research studies based on RFT in the basic or applied setting.
- 12. Taking ACT to the trenches: Low cost interventions in community settings SYMPOSIUM (9:00-10:30am)

Components: Original data, Case presentation Categories: Prevention & Comm.-Based, Prevention & Comm.-Based, Superv., Train. & Dissem., Community-based interventions

Target Audience: Beg. Location: Brookside A

Chair: Fabian Maero, Fundacion Foro, Argentina Discussant: Fabian Maero, Fundacion Foro, Argentina

- Overcoming depression by living according to "Nuestros Valores": A treatment development study for depressed US Spanish-speaking Latinos.
 - Anahi Collado-Rodriguez, University of Maryland
 - S. Castillo, University of Maryland
 - F. Maero, Fundacion Foro, Buenos Aires
 - L. MacPherson, University of Maryland
 - C.W. Lejuez, University of Maryland
- Exploring positive youth development in Ugandan youth

Christopher F. Drescher, University of Mississippi Eu Gene Chin, University of Mississippi Laura R. Johnson, University of Mississippi Julie S. Johnson-Pynn, Berry College

• ACT for chronic pain: Protocol development for use in a community methadone program

MONDAY

Jonathan Weinstein, Ph.D., Montefiore Medical Center

In this symposium we will explore the use of ACT principles in different interventions in community settings. We will focus on low-cost, broadly applicable interventions that focus on personal growth, interventions that can be effective and efficient with minimum therapist training and resources.

Educational Objectives:

- 1. Describe the use of ACT principles in two different community interventions.
- 2. List the nuances and difficulties inherent of working in community settings.
- 3. Discuss the pros and cons of working with isolated ACT processes.
- 13. Perspective-Taking: Training Deictic Relational Responding in Various Populations SYMPOSIUM (9:00-10:30am)

Components: Original data, Case presentation Categories: RFT, Clin. Interven. & Interests, Prevention & Comm.-Based, Schizophrenia, Autism, Intellectual Disability, Deictic Frames, Perspective-Taking

Target Audience: Interm.

Location: Brookside B

Chair: John O'Neill, University of South Florida Discussant: Louise McHugh, Ph.D., University College Dublin

- Training Deictic Relational Responding in People Diagnosed with Schizophrenia John O'Neill, University of South Florida Tim Weil, Ph.D., BCBA, University of South Florida
- Multiple Exemplars Training to Promote Deictic Relational Responding: Implementation in Adults with Intellectual Disability in a Health Care Setting Roberto Cattivelli, Ph.D., Università di Parma Federica Berardo, Università di Parma Francesco Fioriti, M.A., Institute Ospedaliero di Sospiro Serafino Corti, Ph.D., Instituto Ospedaliero di Sospiro Nocola Maffini, LEAVES, Private practice, Italy
- Improving Perspective Taking Skills in Autism: Deictic Relational Responding Training based on the "I-You" Relation

Federica Berardo, Università di Parma Roberto Cattivelli, Ph.D., Università di Parma Amber Candido, M.A., University of Nevada Vanessa Artoni, M.A., University of Parma Silvia Perini, Ph.D., University of Parma

The ability to take perspective is an essential mediator in the development and maintenance of all interpersonal relationships. Functional Contextualism posits that perspective-taking abilities develop through multiple exemplar of operationally conditioned deictic relations (I-You, Here-There, and Now-Then) and suggests that these skills are maintained in such a fashion. It follows then, that populations with low levels of social interaction might exhibit deficits in this area. This symposium will present deictic relational responding protocols which investigate the acquisition of perspective-taking skills in 1) adult males with Schizophrenia, 2) adults with an Intellectual Disability, and 3) children with an Autism Spectrum Disorder. Discussion will include the potential benefits of training in perspective-taking,

implications for the acquisition/remediation and generalization of skills, limitations of past/present studies, and directions for future research.

Educational Objectives:

- 1. Describe the role of deictic relations in the development of perspective-taking skills.
- 2. Design protocols for training of deictic relational responding with respect to various populations.
- 3. Identify limitations of past/present studies and directions for future research.
- 14. Orienting to Values with Every Step: Weaving Values Moves into Clinical Practice

WORKSHOP (9:00-Noon) Components: Experiential exercises, Didactic presentation, Case presentation, Role play Categories: Clin. Interven. & Interests, Difficult clients Target Audience: Beg., Interm. Location: Forest Glen

Jennifer Plumb Vilardaga, M.A., University of Nevada Reno

On our best days, living a values-consistent life takes intention, focus, and practice. On our worst days, we may stray very far from our valued path. Values work in clinical practice can feel the same. With some clients or on particularly good days, our values interventions can feel meaningful, empowering, and serve to move things forward. On not-so-great days or with certain client presentations, we may feel stuck or be in conflict with our clients. This workshop is intended to help beginner or intermediate clinicians improve their understanding of values at a theoretical and practical level, broaden their repertoires for conducting specific values interventions, and practice conducting therapy from a values stance throughout the therapeutic process and when conducting behavioral interventions. Specifically, attendees will conduct a values work self-assessment, develop values-oriented case conceptualizations of difficult clients, and create and practice values-oriented therapy moves by conducting role plays with other attendees.

Educational Objectives:

- 1. Describe the CBS approach to values and conceptualize client behavior problems with respect to values.
- Develop, role play and critique metaphors, exercises and other in-session behaviors intended to engender values-consistent therapeutic moves.
- 3. Implement behavioral interventions from a values-oriented stance.

15. Using ACT to improve parental support in treatment of children and adolescents SYMPOSIUM (9:00-10:30am)

Components: Conceptual analysis, Literature review, Original data, Didactic presentation Categories: Clin. Interven. & Interests, Other,

children, family, parents

Target Audience: Interm. Location: Glen Echo

Chair: Can Dis Dis Dis Sci Syu N I Ma Sei Lin Ka

Chair: Camilla Wiwe, Behavior Medicine Pain Treatment Service, Karolinska University Hospital Discussant: Joseph Ciarrochi, School of Social Sciences and Psychology University of Western Sydney

> Parents of pediatric pain patients – Depression, pain reactivity and psychological flexibility.

Marie Klinga, Behavior Medicine Pain Treatment Service, Karolinska University Hospital Linda Holmström, Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Children Womens Health, Karolinska Institute Rikard Wicksell, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute

- Effects of a parent support program on child treatment response in chronic debilitating pain Camilla Wiwe, Behavior Medicine Pain Treatment Service, Karolinska University Hospital
 Marie Klinga, Behavior Medicine Pain Treatment Service, Karolinska University Hospital
 - Rikard Wicksell, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute
- Using an ACT-based workshop to improve parental support

Karen M. O'Brien, The Geneva Foundation Amy R. Murrell, The University of North Texas Corey Cohrs, The University of South Florida

Despite the increase in research on ACT, interventions aimed at improving psychological flexibility in children and adolescents remain scarce. The importance of family factors has been known for a long time, although the implications for the relationship between e.g. symptoms and disability are still relatively unclear. Parents are commonly included in the treatment of young patients, emphasising education and contingency management. However, psychological barriers may prevent the parent from implementing such strategies. From an ACT perspective, interventions aimed at increasing parental psychological flexibility can improve parent management.

The present symposium contains three studies that have addressed parental psychological flexibility. In the first study, pre-treatment data was used to explore the relevance of parental psychological flexibility for child and parent health, as well as the relation between symptoms and disability among children with chronic pain. The second and third study, have evaluated the efficacy of a brief ACTbased parental support program both indicating the utility of this approach. Implications of these results will be discussed.

Educational Objectives:

- 1. List the differences between acceptance and mindfulness techniques and tradiontal behavioral parenting training.
- 2. Describe a technique to use with parents that blends traditional behavioral parenting training and acceptance and mindfulness.

3. Describe the findings from one such ACT -based parenting intervention.

16. ACT online for University and College Students

SYMPOSIUM (9:00-10:30am) Components: *Original data, Case presentation* Categories: Clin. Interven. & Interests, Edu. settings,

online intervention, students, self-help, prevention Target Audience: Beg., Interm., Adv.

Location: Linden Oak

Chair: Raimo Lappalainen, Professor, Ph.D., Department of Psychology, University of Jyväskylä, Finland Discussant: Emily Sandoz, University of Mississippi

 ACT via Internet: A randomised, controlled pilot trial of a web-based ACT program for the prevention of mental health problems for University students

Fredrik Livheim, Licenced Psychologist, FORUM -Research Centre for Psychosocial Health, Department of Clinical Neuroscience, Karolinska Institute, Stockholm, Sweden

- Annie Pettersson, Department of Psychology, Karlstad University, Sweden
- Maisa Abd, Department of Psychology, Karlstad University, Sweden
- Arto Hiltunen, Ph.D., Department of Psychology, Karlstad University, Sweden
- The acceptability and effectiveness of an ACT-based Self-Help online intervention for University students Päivi Lappalainen, M.A., Department of Psychology, University of Jyväskylä
 Panajiota Päsänen, M.S., Department of Psychology
 - Panajiota Räsänen, M.S., Department of Psychology, University of Jyväskylä
- ACT on college life: A web-based ACT program for the prevention of mental health problems among college students

Michael E. Levin, M.A., University of Nevada, Reno Jacqueline Pistorello, Ph.D., University of Nevada, Reno Steven C. Hayes, Ph.D., University of Nevada, Reno John Seeley, Ph.D., Oregon Research Institute

Many studies indicate that internet- or web-based interventions in combination of some personal contact are effective in reducing psychological problems and in increasing quality of life. There are many reasons why ACT-based self-help online interventions may be useful for university and college students. For example, internet is frequently used by students and easy access to internet may overcome many of those barriers associated with face-to-face interventions. It could be argued that ACT-based interventions are especially suitable for web-based solutions. Because they are not problem specific, same intervention principles can be applied for prevention and for different kind of psychological problems. This symposium will present three internet-based programs for university and college students. The main aim of the symposium is to present data and discuss experiences related to applying ACT when developing web-based solutions for students.

Educational Objectives:

1. Describe how to set up a study to investigate effects of ACT over Internet and some possible pitfalls.

- 2. Describe how to prevent and treat psychological problems among student populations.
- 3. Explain how ACT can be adapted to web-based interventions.

17. Innovative Treatment Technologies Forum RESEARCH & PROGRAM DEVELOPMENT FORUM (9:00-10:30am)

Components: Clinical Interventions and Interests, Prevention and Community-Based Interventions Categories: Internet-Based Interventions, Smoking Cessation, Adolescents, Social anxiety, Social phobia, Internet, Substance abuse

Target Audience: Beg., Interm., Adv. Location: Oakley

- Evaluating the adaptation of an ACT smoking cessation manual to internet-based format Stella Nicoleta Savvides, Ph.D. Cand, University of Cyprus
 - Over the past few years, research has shown that internet-based interventions are more cost effective, cater to individuals who are unable/unwilling to attend weekly treatment sessions with a therapist, and are promising in terms of improving attrition rates, a major problem with most treatment trials. Moreover, internet-based interventions use technology that has the potential to attract youth (interactive games, animation, video clips etc.) and thus may reach and engage a wider range of adolescents than traditional face-to-face interventions. ACT is an empirically-based intervention that uses acceptance and mindfulness strategies and has been shown to increase psychological flexibility. ACT for smoking cessation in youth presents with promising results, however more research is still needed. Moreover, traditional interventions (e.g. psychoeducation, CBT) for smoking cessation have limited success for adolescent groups who are not particularly motivated or in contact with the benefits of quitting. The aim of the present study is to investigate the usefulness and effectiveness of an ACT internet-based smoking cessation intervention program for high school and vocational school student smokers. This intervention will be compared to a previously evaluated internetbased psychoeducational smoking cessation program applied in the Netherlands. Students who agree to participate in the program will be randomly assigned either the ACT-based or the psychoeducational internet-based intervention. Participants will be asked to complete questionnaires relating to process and outcome measures pre-, during and posttreatment. The projects' goals are to a) develop and evaluate an internet-based screening tool to identify youth who are either interested in smoking cessation but are unable to be reached for a face-to-face intervention, or are simply not interested in one, b) adapt and evaluate an ACT internet-based intervention for smoking cessation, and c) compare the usefulness and effectiveness of this intervention compared to a previously evaluated psychoeducational internet-based smoking cessation program.
 - 1. The manual used for the creation of the Internet-based intervention is an eight-week/session intervention. The intervention we are comparing the Internetbased intervention to is much shorter. What should be reserved and what should be removed from the ACT manual?

2. Should a pilot study be included to initially deem which parts of the sessions should be included in the intervention?

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- 3. How is it best to adapt the ACT manual to the Internet? Should more games be included? How do we prevent this from being only a game? When valuable information is given, how do we make sure they do not simply click on the next button until they get to the end? How do we keep it interactive and interesting and still give them all the information they need?
- 4. Which are the most appropriate outcome measures to include in the Internet-based intervention? More importantly, which are the most appropriate process measures to include? The measures should be short and to the point as adolescents lose interest when they are asked too many questions. Which are the best measures to use to keep attrition rates low?
- ACT-based Internet Self-Help Interventions The role of therapist support? Marina Gershkovich, B.A., Drexel University

James Herbert, Ph.D., Drexel University Evan Forman, Ph.D., Drexel University

- Social anxiety disorder (SAD) is one of the most prevalent psychiatric disorders in United States. Although evidenced-based behavioral treatments are available, less than 20% of those with SAD receive treatment. The disparity between the number of individuals affected and those obtaining treatment is due to a number of factors, including limited accessibility to therapists practicing evidence-based interventions, geographic factors, and financial cost. Internet-based interventions may be utilized to overcome some of these barriers. Guided Internetbased therapeutic interventions have been demonstrated to be effective for social anxiety. The optimal role (if any) of the therapist in such programs, including the amount of therapist time necessary for effective treatment, remains unclear. The purpose of the proposed study is to assess the efficacy and acceptability of a novel Internet selfhelp ACT-based intervention for the treatment of SAD in adults, and to assess the role of minimal therapist support delivered through the videoconferencing platform Skype on treatment outcome. The intervention program is derived from an ACT-based therapy that utilizes traditional behavioral interventions (e.g., exposure) within the context of a model emphasizing mindfulness and psychological acceptance. Participants will be randomized to two groups: Internet self-help intervention only versus Internet self-help intervention plus weekly Skype check-in. Both groups will receive an Internet-based self-help intervention consisting of eight weekly modules. The therapist support group will also receive minimal therapist support delivered through Skype.
- 1. What are some ways of conveying the more subtle aspects of ACT in a web-based format? How to build and incorporate an automated system of assessing participants' understanding of the concepts?
- In measuring treatment outcome, what is the best way to objectively quantify improvement within the ACT framework (if the focus is not on symptom relief)?
- "Texting" ACT: How might mobile phone technology be used to improve outcomes following residential treatment for opiate dependence?

Angela Stotts, Ph.D., University of Texas Medical School at Houston

William Norwood, Ph.D., University of Houston-Clear Lake

Jennifer Potter, Ph.D., University of Texas Health Science Center - San Antonio

Residential treatment programs are increasingly choosing detoxification rather than agonist replacement therapy (i.e., methadone, buprenorphine) for opiate dependent clients. Unfortunately, success rates for opiate detoxification are very low due, in part, to the physical and psychological consequences of opiate withdrawal. Few behavior therapies have been designed to address the distressing experiences specific to opioid withdrawal. In previous research, an Acceptance and Commitment Therapy (ACT) intervention delivered during outpatient methadone detoxification demonstrated promise with success rates at the end of treatment almost double those associated with Drug Counseling. At one-month follow-up, however, the majority of participants regardless of intervention condition had returned to opiate use. Support during the post-treatment period is critical for this population yet resources for continued intervention are limited. Novel, inexpensive, technology-based interventions may be the answer. There are some data to support texting interventions for smoking cessation. We would like to discuss the feasibility of designing an ACT-based texting intervention to improve outcomes following opiate detoxification.

- 1. How might we communicate ACT processes via short text messages?
- 2. How much exposure to ACT prior to discharge would be needed for brief text messages to be meaningful for clients?
- What format might work best for delivering ACT in an existing (non-ACT focused) residential treatment program (weekend workshops? Weekly groups? Groups directed by self-help book – for example, "Wisdom to Know the Difference" by K. Wilson)?
- 4. Would it make sense to initially limit the age range of subjects to youth presumably more familiar with the technology?
- 5. What processes might be the best, easiest, or most difficult to capture or communicate with text messages?

Monday Morning 10:45am

18. Are Anxiety Treatments Focusing on the Wrong Outcomes?: A Debate

PANEL (10:45-Noon)

Components: *Conceptual analysis* Categories: Clin. Interven. & Interests, Theory &

<u>Philo., Anxiety</u> Target Audience: Interm. **Location: Ballroom C**

Chair: Lindsay M. Martin, M.A., Drexel University Jonathan B. Bricker, Ph.D., University of Washington Michelle G. Craske, Ph.D., UCLA Evan M. Forman, Ph.D., Drexel University John P. Forsyth, Ph.D., SUNY Albany

Since their inception nearly five decades ago, behavioral therapies for anxiety have primarily focused on reducing clients' anxiety symptoms. Interestingly, the data suggest that individuals who do not improve in terms of subjective anxiety reports do actually improve in other respects, such as willingness, quality of life, and behavioral avoidance. Questions arise: which outcomes matter the most, and which treatments are best to address these? To move the field forward into the next fifty years, is now the time to shift beyond anxiety reduction toward a broader set treatment processes and outcomes? Should new developments in behavioral therapy for anxiety target these broader processes and outcomes in order to better respond to their clients' needs? The panel of experts will debate the merits of such a paradigm shift as well as make recommendations and predictions about the future of behavioral therapies for anxiety.

Educational Objectives:

- 1. Discuss the treatment targets of Traditional Cognitive Behavioral Therapy and Acceptance and Commitment Therapy.
- 2. List the limitations of the current treatment target paradigm of reducing anxiety.
- 3. Explain the merits of a potential new paradigm focusing on a broader set of anxiety processes and outcomes.
- 19. Back to the Future II: Current Directions and Perspectives in RFT, ACT and CBS SYMPOSIUM (10:45-Noon)

Components: Conceptual analysis

Categories: RFT, Related FC approaches, Current Issues in RFT

Target Audience: Interm. Location: Ballroom H

Chair: Sean Hughes, National University of Ireland Maynooth Discussant: Joseph Ciarrochi, School of Social Sciences and Psychology University of Western Sydney

- Giving it All Away: What Lessons Can RFT Learn from Bill Gates and Steve Jobs? Sean Hughes, National University of Ireland Maynooth Dermot Barnes-Holmes, National University of Ireland Maynooth
- What Does the Future Hold for Mid-level Processes in ACT?

Yvonne Barnes-Holmes, Ph.D., National University of Ireland Maynooth

Mairead Foody, National University of Ireland Maynooth

RFT as an Evolutionarily Sensible Account, and Vice Versa

Steve C. Hayes, University of Nevada, Reno

This symposium will offer a collection of cross-cutting talks that each examines a different issue relevant to the future of RFT/ACT and CBS. We begin by exploring the current and potential coupling of RFT and mainstream psychological science, with a view towards integrating the functional approach with other intellectual domains. Thereafter, we focus our attention on the role and influence that mid-level terms play in ACT and the need for a more symbiotic relationship between clinical and basic research practice. Finally, we close by taking a journey into our evolutionary past and examine one potential explanation for the emergence and development of arbitrarily applicable relational responding. When

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knitted together, these three talks paint a broad picture of issues central to the development of RFT in the coming years.

Educational Objectives:

- 1. Identify three avenues to better integrate the functional contextual approach with mainstream psychological science.
- 2. Discuss the advantages and disadvantages of using mid-level terms in ACT.
- 3. Critique the evolutionary model offered for arbitrarily applicable relational responding.

20. Flexing Our Psychological Muscles in the Classroom: Applying ACT Processes in Educational Settings PANEL (10:45-Noon)

Components: Didactic presentation Categories: Edu. settings, Education Target Audience: Beg., Interm., Adv.

Location: Amphitheater

Chair: Regan M. Slater, University of Mississippi

- Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center
- Jacqueline Pistorello, Ph.D., Counseling Services, University of Nevada, Reno

Timothy M. Weil, Ph.D., BCBA, University of South Florida

William D. Newsome, M.A., BCBA, LBA, University of Nevada, Reno

This panel will focus on the ways in which contextual behavioral science principles are being incorporated in a variety of educational settings. Panelists work with students ranging from elementary school to graduate school. Panelists will address such questions as, how can psychological flexibility and contextual behavioral science be applied in educational settings? How can psychological flexibility processes be implemented to broaden students' knowledge beyond curricula, and to address students' specific needs? How can psychological flexibility processes be incorporated to enhance teaching skills? Each panelist will focus on these questions with regard to their particular education setting, as well as future directions and new applications.

Educational Objectives:

- Discern ways in which psychological flexibility and contextual behavioral science are being implemented in a variety of educational settings.
- 2. Incorporate the psychological flexibility model to address specific needs of students and broaden students' education beyond curricula.
- 3. Utilize psychological flexibility processes to enhance teaching skills.

21. College Student Health and Flexibility: Considering Academic, Sociocultural, and Psychological Challenges SYMPOSIUM (10:45-Noon)

Components: Literature review, Original data Categories: Edu. settings, Performance-enhancing, Edu. settings, College Students' Well-Being Target Audience: Beg., Interm., Adv. Location: Brookside A Chair: Amber Kennison, B.S., University of Louisiana, Lafayette

Discussant: Thomas G. Szabo, University of Nevada, Reno

 Do not Disturb: Body Image Disturbance and Body Image Flexibility in a College Sample

Emily Squyres, University of Louisiana, Lafayette

- Gina Quebedeaux, University of Louisiana, Lafayette
- Shelley Greene, University of Louisiana, Lafayette
- Emily Sandoz, Ph.D., University of Louisiana, Lafayette
- Movin on Up: Psychological Flexibility of Low Income and First Generation College Students

Amber Kennison, B.S., University of Louisiana, Lafayette Danielle Landry, University of Louisiana, Lafayette Emmie Hebert, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette

 ACT on Campus: Facilitating Psychological Flexibility for College Adjustment Brooke Benoit, University of Louisiana, Lafayette Emmie Hebert, University of Louisiana, Lafayette Gina Quebedeaux, University of Louisiana, Lafayette Shelley Greene, University of Louisiana, Lafayette Emily Sandoz, University of Louisiana, Lafayette

Psychological adjustment in college is complicated by multiple transitions across a range of domains, making college adjustment among the most challenging periods in the lives of many. College students must develop healthy ways of coping with academic, sociocultural, and psychological challenges if they are to reap the full benefit of the college experience. The psychological flexibility model may offer a way of conceptualizing healthy college adjustment, and in turn, promote empirically-based treatment development targeting college adjustment. The papers in this symposium approach psychological adjustment in college students from the perspective of psychological flexibility. The first paper considers body image disturbance, an all-too-common source of distress among college students, in terms of its relation to body image flexibility. The second paper explores psychological flexibility in first-time freshmen who are coping with the challenge of being first generation or low income college students. The third paper evaluates the impact of a semester-long experiential course targeting psychological flexibility.

Educational Objectives:

- 1. Relate body image flexibility and body image disturbance among college students.
- 2. Consider the course of psychological flexibility over the first semester of college for students with sociocultural challenges.
- 3. Explore preliminary data on the effectiveness of flexibility-based interventions in college students.

22. ACT and intimate relationships SYMPOSIUM (10:45-Noon)

Components: *Conceptual Analysis, Experiential exercises, Didactic presentation, Case presentation*

<u>Categories: Clin. Interven. & Interests, Performance-</u> <u>enhancing, Theory & Philo., Other, Sex education,</u> <u>sex coaching, couples therapy, couples issues with</u>

deployed military Target Audience: Beg., Interm., Adv.

Location: Brookside B

Chair: Richard Blonna, William Paterson University Discussant: Aisling Curtin, M.Sc., ACT Now Ireland & St. Patrick's University Hospital

• Sex-ACT: Using acceptance and commitment therapy to help clients manage sexual concerns, problems, and worries

Richard Blonna, Ed.D, William Paterson University

 Acceptance and Commitment Therapy for Couples: Choosing Love and Meaning in

Relationship

- Elizabeth Gifford, Ph.D., Center for Health Care Evaluation
- Robyn Walser, Ph.D., National Center for Post Traumatic Stress Disorder
- Using Acceptance and Commitment Therapy (ACT) with the Passionate Marriage Approach to Treat Relationship Problems in the Deployed Environment Megan A. Connell, PsyD, US Army

This symposium will address a variety of issues related to intimate relationships, viewed through the lens of Acceptance and Commitment Therapy. The first presentation describes ways in which ACT principles and practices may serve to promote healthy sexuality. The second pertains to ways in which ACT may foster the development of meaningful relationships. The third presentation offers a conceptualization combining ACT and the Passionate Marriage Approach in the individual treatment of couples' issues, specifically in the deployed setting.

Educational Objectives:

- 1. Identify three principles of case conceptualization in ACT for couples.
- 2. Identify the four core concepts of the Passionate Marriage Approach.
- 3. Describe how practitioners can use ACT principles and practices to help clients manage common sexual concerns, problems, and worries.

23. Beefy Behaviorism, Training Clinical Expertise, & Big Data

INVITED LECTURE (10:45-Noon) Components: *Conceptual Analysis, Didactic*

presentation

Categories: Clin. Interven. & Interests, Superv., Train. & Dissem., Dissemination & Implementation

Target Audience: Beg., Interm., Adv.

Location: Glen Echo

Chair: Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Kelly Koerner, Ph.D., Evidence-Based Practice Institute

This talk will be an invitation to think together about how we could, individually and collectively, better harness the power of clinical behavior analysis to train clinical expertise and work together to collect Big Data. Using examples from Acceptance and Commitment Therapy, Behavioral Activation, Dialectical Behavior Therapy, Emotion-Focused Therapy and Functional Analytic Therapy, I will



illustrate how research on functionally defined change processes can be linked with therapist training designed to build expertise. By adding tools to collect practice-based data, therapists get immediate feedback on how interventions work, and collectively we could more rapidly identify, share, and implement what therapists need to improve client outcomes. I hope to preview with you an early

prototype using cool new information visualization tools to bring home the potential that lies in such selforganizing collaboration.

Educational Objectives:

- 1. Describe the advantages of evidence-based procedures relative to evidence-based packages.
- 2. Describe the requirements for developing expertise (deliberate practice with feedback).
- 3. Describe the advantages of Big Data for clinical and research purposes.

24. Mindfulness and Acceptance-Based Treatment in a Jail Setting: Theory, Measurement and Treatment Evaluation from the GMU Inmate Studies SYMPOSIUM (10:45-Noon)

Components: Original data

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Theory & Philo., Other, Jail-based</u> <u>interventions</u>

Target Audience: Beg.

Location: Linden Oak

Chair: Elizabeth Malouf, M.A., George Mason University Discussant: Jai Amrod, Algoa Correctional Center

- Reliability and Validity of the Mindfulness Inventory Nine Dimensions (MIND): a Comprehensive Assessment Tool for Mindfulness and its Mechanisms of Action Vienna R. Nightingale, Ph.D., George Mason University Edward A. Witt, Ph.D., George Mason University
- A Pilot RCT of a Values-Based Mindfulness Group Intervention with Jail Inmates Elizabeth Malouf, M.A., George Mason University Kerstin Youman, Ph.D., George Mason University
- What is Mindful Self Judgment, and Can It Be Useful?

June P. Tangney, Ph.D., George Mason University

The GMU Jail Study Project has conducted a pilot implementation in a county jail setting of a mindfulness and acceptance-based intervention, the Re-Entry Values and Mindfulness Program (REVAMP). By fostering acceptance, mindfulness and valuesidentification, REVAMP aims to prepare a diverse group of inmates for re-entry into the community. The

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three talks of this symposium relate to different facets of this project, spanning theory, measurement and treatment implementation. First, Vienna Nightingale will discuss the development of a novel measure of dispositional mindfulness: the Mindfulness Inventory: Nine Dimensions (MIND). This measure was developed in order to provide a comprehensive measure mindfulness as well as its mechanisms of action related to behavior change. Next, Elizabeth Malouf will discuss implementation and preliminary results of a pilot RCT of the REVAMP treatment. Finally, June Tangney will discuss a theoretical and treatment issue pertinent to a jail-inmate population: conceptualizing and addressing self-judgment in the context of mindfulness treatment. Together, these three presentations address theoretical and practical issues associated with mindfulness measurement and treatment, focusing on a sample of jail inmates.

Educational Objectives:

- Discuss special considerations for implementing a mindfulness and acceptance-based intervention in a jail setting.
- Compare the Mindfulness Inventory: Nine Dimensions to existing measures of mindfulness.
 Describe mindful celf indement
- 3. Describe mindful self judgment.

25. Body I mage and Eating Disorders Forum RESEARCH & PROGRAM DEVELOPMENT FORUM

(10:45-Noon)

Components: Prevention and Community-Based Interventions, Clinical Interventions and Interests Categories: Eating Disorders, Body Image, Disordered Eating, Dancers, Children

Target Audience: Beg., Interm., Adv. Location: Oakley

- ACT to prevent eating disorders Patricia Nicolaou, Ph.D. Cand., University of Cyprus Maria Karekla, Ph.D., University of Cyprus
 - Eating Disorders (ED) constitute a serious public health issue that affects mainly women and appears typically in adolescence or early adulthood. At a local level, this will be the first, systematic, early intervention effort with youth aged 15-18 at risk for ED. At an international level, this will be the first study to apply and compare an ACT based prevention program for EDS in its delivery modality. One of the most important theoretical limitations found was the fact that etiologic models of eating pathology were not used to guide the design of the prevention program (Stice & Shaw, 2004). The proposed program will be designed based on the psychological inflexibility (Merwin et al., 2011) model of development of eating disorders. More specifically, the project's goals are a) to develop and evaluate an internet-based screening tool to identify adolescents and young adults who are at high risk for ED, b) to develop and evaluate a secondary prevention program based on Acceptance and Commitment Therapy (ACT) which will be delivered to high-risk individuals. This study will assess youth recruited from high schools in terms of risk for developing an eating disorder. Individuals identified as high risk for EDs from this assessment will be asked to participate in the prevention program. Those who agree to participate will be randomly assigned either to the internet based intervention or the wait-list control

group. During and at treatment end, participants will be asked to complete process and outcome measures. Discussion for methodology can be beneficial in regards to choosing process and outcome measure as well as control group.

- 1.What is the best way to measure the process of change in regards to psychological flexibility?
- 2. Do you have any suggestions in regards to which process measures we should include in the study?
- 3. In terms of the control group what would you consider to be the best option? A wait list control group or another psycho educational prevention program?
- Dancing Beyond What We See in the Mirror: Prevention of Body Image Inflexibility in Young Dancers

Shelley Greene, University of Louisiana, Lafayette Emily K Sandoz, Ph.D., University of Louisiana, Lafayette

- Body image dissatisfaction has been flagged as an area of struggle for many women in Western cultures today. Certain sports and activities have a stronger emphasis on a lean physique for better performance and appearance. For dancers, there is an immense amount of pressure to achieve perfection in their performance as well as in their appearance. Specifically this involves a short, thin torso and long, thin and lean legs. It is not surprising that dancers are at increased risk for developing disordered eating patterns. Body image flexibility may involve the skills necessary for dancers to maintain careers in dance without developing disordered eating. This program development forum will explore the potential utility of a primary prevention program to train body image flexibility as part of training in dance. Discussion will focus on questions such as:
- 1. What age group of dancers should we target for such an intervention and what challenges might complicate interventions at certain levels?
- 2. Would certain formats be more effective considering the population and the setting? What unique benefits and challenges might come with a one-time workshop? A weekly or monthly small group? Individually-based?
- 3. What training might be necessary for dance instructors to be able to apply the principles of psychological flexibility in their dance classes?
- 4. What challenges might come with marketing such an intervention to different dance studios?

Monday Lunch 12:00pm-1:15pm

Monday Lunch Events 12:15pm

C. Evolution Science SIG CHAPTER/SIG MEETING (12:15pm-1:00pm) Location: Ballroom A

Steven C. Hayes, Ph.D., University of Nevada, Reno David Sloan Wilson, Ph.D., Evolution Institute

The purpose of this meeting is to discuss how to foster an interconnection between contextual behavioral science and evolution science. It will launch the newly formed ACBS EvoSIG. We hope to have David Sloan Wilson as our honored guest; he will give some informal remarks at the beginning of the meeting. Following this and other introductory comments we will have an open discussion about

issues and projects that will help nest CBS within its EvoS home.

D. ACT in Sierra Leone, West Africa CHAPTER/SIG MEETING (12:15pm-1:00pm)

Location: Ballroom G

Beate Ebert, Hanna Bockarie, Jennifer Nardozzi, Ross White

You can talk to Leonean therapists and to ACTtrainers, who have been in the country; you

■ can ask questions about the project, see what it would involve to participate yourself as a trainer or supporting the project in any other way. Those interested in projects in other developing countries also welcome to attend and share ideas/experiences. Bring your lunch!

E. ACT Italia: The Italian ACBS Chapter

CHAPTER/SIG MEETING (12:15pm-1:00pm)

Location: Timberlawn

Giovanni Miselli, Anna Bianca Prevedini

Present the activity of the Italian Chapter of ACBS, meet and welcome new members and offer the opportunity to actively commit and collaborate to the development of CBS and ACT in Italy. We would like also to invite ACBS international members who are interested in collaboration on research projects, trainings and workshops in Italy, publish books in Italian to attend the meeting. If you have been to Worldcon in Parma you had a taste of the Italian experience! ...and if you have not yet... this is your chance!!!

Monday Lunch Event 12:30pm

26. Our First Ever IGNITES! Check Them Out! IGNITES (12:30pm-1:00pm)

Components: Didactic presentation

<u>Categories: Clin. Interven. & Interests, Superv., Train.</u> <u>& Dissem., Prof. Dev., Theory & Philo., Other,</u> <u>Dance/Song, Obesity, Mindfulness</u>

Target Audience: Beg., Interm.

Location: Ballroom C

- Substance Abuse, ACT, Medications, and the Reduction of Stigma Stacey C. Conroy LICSW, MPH, LADC1, Hope House Boston; Boston Healthcare for the Homeless
- The Use of Dance and Song to Elucidate the Six Core Processes of ACT Kate Morrissey, LCSW, Advantage Behavioral Health Systems, and Rubber Soul Yoga, Athens GA
 - W. Jeffrey Henderson, Ph.D., University of Georgia
- Getting to the heart of the beast: Should obesity be included in the DSM5?
 Emily Squyres, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette
- Should I Scratch My Butt? D.J. Moran, Ph.D., BCBA-D, Pickslyde Consulting

Monday Afternoon 1:15pm

27. Acceptance and Values in Behavioral Medicine

WORKSHOP (1:15-4:15pm) Components: *Experiential exercises*, *Didactic presentation*

<u>Categories: Beh. med., Clin. Interven. & Interests,</u> <u>Prof. Dev., Related FC approaches, Health</u> <u>Behaviors</u>

Target Audience: Beg., Interm., Adv. Location: Grand Ballroom

JoAnne Dahl, Ph.D., University of Uppsala Jennifer Gregg, Ph.D., San Jose Sate University Jason Lillis, Ph.D., Brown University Medical School

Throughout the world there is a growing focus on long-term, chronic medical problems and the behavioral and psychological factors that influence them. Health conditions such as obesity, diabetes, heart disease, and chronic pain affect more and more humans each day, and responses to these problems can greatly impact morbidity and mortality. In this workshop we will explore the shift in behavioral medicine from a focus on symptom reduction to creating vitality in the face of lifestyle factors, stigma, poor health, and chronic and terminal illness. Skillbuilding will be focused on analysis and change at each level: the individual, the group, and the world, through the open-hearted use of mindfulness and values work, with experiential exercises and training in practical application to a medical setting.

Educational Objectives:

- 1. Conceptualize health behaviors functionally.
- Develop acceptance- and values-based interventions at the level of the individual, group, and planet.
- 3. Apply principles of Acceptance and Commitment Therapy to health behaviors and medical populations.

28. Inside This Moment: Using the Now to Promote Rapid and Radical Change WORKSHOP (1:15-4:15pm)

Components: Experiential exercises, Didactic presentation, Role play Categories: Clin. Interven. & Interests, Mindfulness Interventions

Target Audience: Interm., Adv.

Location: Ballroom A

Kirk Strosahl, Ph.D., Central Washington Family Medicine

Transformative clinical moments often involve "quantum shifts" in the client's perspective on a particular problem, now seen in a larger life context. Inducing this type of shift requires that the clinician be able to use present moment processes in an impactful way. This workshop will explore the various ways present moment opportunities can be recognized and utilized to promote instantaneous change. Attendees will learn how to track verbal and non-verbal behaviors that signal shifts of awareness and then link them to a change oriented conversation. Experiential exercises and live role demonstrations with willing audience members will be used to demonstrate key methods for promoting radical change inside the moment.

Educational Objectives:

- 1. Describe the clinical evidence for rapid, transformative change as the model outcome of cognitive behavioral therapy.
- 2. Analyze several distinctive ways that present moment processes manifest themselves in both positive and negative ways during the clinical conversation.
- 3. Demonstrate core clinical methods for eliciting shifts in present moment awareness and perspective on self-narratives.

29. Developing Your Skills as an ACT Trainer, Part 1

WORKSHOP (1:15-2:45pm)

Components: Conceptual analysis, Experiential exercises, Didactic presentation, Role play

Categories: Superv., Train. & Dissem., Prof. Dev., Becoming an ACT trainer

Target Audience: Beg., Interm., Adv. Location: Ballroom B

Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training Division

David Gillanders, PsyD, University of Edinburgh / NHS Lothian

Russ Harris, M.D., ACT Mindfully Institute, Inc

Tobias Lundgren, Ph.D., University of Stockholm Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center, PC

In a discussion format, we will conduct a needs assessment for trainer development. We will help trainers identify common places where trainers can get stuck in workshops, conduct an assessment of their own strengths and weaknesses as a trainer, and help them develop plans for self-development as a trainer. This needs assessment will provide the material for the second part of the workshop to be conducted on a later day of the conference. In this second session, experienced trainers will develop a workshop that responds to the training needs identified in part 1 of this workshop series. If someone plans to attend part 2 of the workshop, it would also be helpful to go to part 1 in order to provide input into what will be in part 2.

Educational Objectives:

- 1. Identify personal experiential barriers to providing exercises and other material in workshops.
- 2. Assess your strengths and weaknesses as a workshop provider.
- 3. List common barriers to workshop delivery.
- 30. Therapist Emotion, Cognition & Behavior in Session

PANEL (1:15-2:45pm)

Components: Conceptual analysis, Didactic presentation, Case presentation

Categories: Clin. Interven. & Interests, Theory & Philo., Interpersonal & Emotional Elements In Therapy Target Audience: Interm.

Location: Ballroom C

Chair: Mark Sisti, Ph.D., Founder & Director Suffolk Cognitive Behavioral & Adjunct Clinical Supervisor Yeshiva Ferakuf University

Bob Kohlenberg, Ph.D., University of Washington Kelly Wilson, Ph.D., University of Mississipi Jill Bresler, Ph.D., NYU

Dennis Tirch, Founder Center for Mindfulness & Compassion Focused CBT, Adjunct Assistant Clinical Professor, Weill Cornell Medical College Kathryn Rheem, Ed.D, Director of Washington Baltimore Center for EFT & Member International Center for Excellence in EFT (ICEEF)

NDA A roundtable discussion across several diverse psychotherapeutic EBP's, regarding the psychotherapeutic relationship. A general review of the past two decades emerging interpersonal emphasis and its potential for trans-theoretical and trans-diagnostic conceptualization by CBT's, Third Gen CBT's and contemporary relational psychodynamic theories. A particular point of discussion will be the potential place and use of moment-to-moment "therapist reactions" both in case conceptualization and as potential point of intervention. Also reviewed will be the methods for increasing therapist selfemotional awareness, and the opportunities, challenges and pitfalls that these reactions represent. Video vignettes to illustrate these interpersonal exchanges will also be presented. Representative EBP's & theories will include; ACT, Compassion Focused Therapy, Emotion Focused Therapy and contemporary relational-psychoanalytic.

Educational Objectives:

- 1. Identify and conceptualize emotional-behavioral opportunities arising within the therapeutic relationship from several theoretical standpoints.
- 2. Increase awareness of, and broaden intervention options associated with the emotional information arising within the moment-tomoment client/therapist interaction.
- 3. Describe and predict the potential benefits and pitfalls of implementing this type of therapeutic emphasis.
- 31. Deactivation Therapy, (MDT): Contextual **Evidenced Based Treatment for Adolescents** and Extension of ACT WORKSHOP (1:15-2:45pm)

Components: Original data, Case presentation, Role play

Categories: Clin. Interven. & Interests, Performanceenhancing, Mindfulness and meditation

Target Audience: Beg. Location: Ballroom C

Jack Apsche, Walden University

The workshop will focus on MDT as a contextual treatment for adolescents who have issues with oppositional and aggressive adolescents. Mode Deactivation Therapy (MDT), a contextual approach, has been shown to be effective with this population in a series of treatment research and case studies, a Meta analysis and mediation analysis.

The MDT case conceptualization methodology will be presented in the workshop and will include assessments and functional analysis.

The following are the steps that will be presented didactically and experientially in the workshop. 1) Mindfulness. To be fully in the moment. To practice a variety of Buddhist inspired techniques to be aware of self and be aware of self and environment in the moment. 2) Acceptance. To accept self as who, what and where you are in life, including accepting pain, fear and suffering. To accept that the human condition is flawed and we all experience pain and suffering as part of it. 3) Cognitive Defusion. To allows the thoughts that

imprisoned the adolescent to occur without resistance. To not experience experiential avoidance from painful thoughts. 4) Emotional Defusion. To identify the exact area in the body of the pain and a complete description of the pain, numbness or "nothingness." The adolescent describes where exactly he feels emotional feelings that are attached to painful thoughts. 5) Balancing the Functional Alternative Beliefs (FAB) by Validate, Clarify, and Redirect (V-C-R). Most likely the FAB will also be a functional alternative to either a life interfering or treatment interfering belief.

Educational Objectives:

- 1. Identify and implement multiple aspects of an MDT Case Conceptualization.
- I identify and implement validation, clarification and redirection (VCR) with oppositional adolescents.
- 3. Create and practice and lead specific mindfulness and meditation exercises for adolescents.
- 32. Using the heart and the head: How to empower your experiential practice with RFT WORKSHOP (1:15-4:15pm)

Components: Didactic presentation, Case presentation, Role play

Categories: Clin. Interven. & Interests, RFT,

Experiential practice, RFT, ACT, basic principles Target Audience: Interm., Adv.

Location: Ballroom G

Matthieu Villatte, Ph.D., University of Louisiana, Lafayette.

Third wave CBT models emphasize the use of experiential techniques with the purpose of minimizing the harmful consequences of language and deceptive contingencies. By reconnecting clients to their own experience, they become able to distance themselves from ineffective rules, to see beyond short term and variable consequences, and to adopt behaviors that lead to deep and lasting sources of satisfaction.

In the past decade, numerous techniques coming from a variety of traditions have been integrated into cognitive and behavioral treatments and are now considered fundamental to the success of these interventions. However, choosing, creating, and delivering experiential techniques with maximum impact requires complex skills that are rarely taught explicitly in manuals. With its functional account of language, Relational Frame Theory (RFT) offers practical guidelines to help clinicians make the best use of verbal processes involved in experiential practice.

In this workshop, participants will learn: 1) How RFT makes sense of experiential practice. 2) How to use RFT principles to choose, build, and deliver experiential techniques with maximum effectiveness. 3) How to develop an experiential practice without using formal exercises and techniques.

A short and accessible theoretical presentation will be followed by concrete examples of experiential techniques and analyses of clinical vignettes and videos. Participants will then have the opportunity to practice RFT based skills through role plays.

Educational Objectives:

- 1. Apply RFT to your experiential practice.
- Utilize RFT principles to choose, build, and deliver experiential techniques with maximum effectivenes.
- 3. Develop an experiential practice without using formal exercises and techniques.

33. ACT with Love

WORKSHOP (1:15-4:15pm) Components: *Experiential exercises, Didactic presentation, Role play*

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Relationship Issues

Target Audience: Beg., Interm., Adv.

Location: Ballroom H Russ Harris, M.D., Private practice

This workshop is loosely based on my self-help book for relationship issues, ACT With Love. ACT is very effective with relationship issues. (I base this statement not just on my own clinical experience, but on that of anecdotal evidence from numerous other therapists I have trained). This workshop looks at how we can simply and effectively apply the ACT model in relationship issues – whether one or both partners attend sessions! The workshop is both didactic and experiential. Experiential components focus on compassion, acceptance and forgiveness of a partner. Attendees will also get the opportunity to practise some simple exercises in pairs, to learn some useful defusion techniques for couples.

Educational Objectives:

- 1. Apply a simple model of ACT to relationship issues.
- 2. Adapt classic ACT exercises to couples.
- 3. Utilize a simple technique for developing compassion for your partner.

34. Where We are Today: Contextual Behavioral Science and Applied Behavior Analysis with Children, Adolescents, and Families PANEL (1:15-2:45pm)

Components: Conceptual analysis

<u>Categories: Related FC approaches, Children,</u> <u>Adolescents, and Parents</u>

Target Audience: Beg., Interm.

Location: Amphitheater

Chair: Danielle N. Moyer, University of Louisiana, Lafayette Mitchell A. Abblett, Ph.D., Judge Baker Children's Center Lisa W. Coyne, Ph.D., Suffolk University Louise Hayes, Ph.D., University of Melbourne Amy R. Murrell, Ph.D., University of North Texas Timothy M. Weil, Ph.D., BCBA, University of South Florida

The area of contextual behavioral science grew from the field of behavior analysis and the two remain interconnected today. Contextual behavioral science is rapidly growing into an internationally recognized approach for the prediction and influence of human behavior. The body of empirical evidence for acceptance and commitment therapy for adults has extended across an array of areas including, but not limited to, chronic pain, psychosis, anxiety, and depression. More recently, however, this approach has been increasingly applied to the behavior of children and families. This panel intends to explore the research findings in this area with particular focus on how contextual behavioral science might enhance traditional applied behavior analysis. After a brief introduction to the theoretical and philosophical underpinnings of contextual behavioral science, we will focus on specific implications for children, adolescents, and families. A significant portion of time will be protected for audience questions after the initial discussion.

Educational Objectives:

- 1. Discuss the current state of contextual behavioral approaches for children and families.
- 2. Compare functional contextual approaches for children and families to the traditional behavioral philosophies that they are based on.
- 3. Apply a broader range of strategies to applied work with children, adolescents, and parents.

35. The Utility of Brief Defusion, Mindfulness and Acceptance Interventions

SYMPOSIUM (1:15-2:45pm)

Components: Original data, Didactic presentation Categories: Performance-enhancing interventions,

Clin. Interven. & Interests, Brief ACT component intervention

Target Audience: Beg., Interm.

Location: Brookside A

Chair: Nic Hooper, Ph.D., Middle East Technical University, Northern Cyprus Campus

- Discussant: J. T. Blackledge, Ph.D., Morehead State University
- A comparison of cognitive restructuring versus defusion as coping strategies for negative thoughts Andreas Larsson, Swansea University Nic Hooper, Ph.D., Middle East Technical University, Northern Cyprus Campus Louise McHugh, Ph.D., University College Dublin
- The effects of mindfulness on distress and anxiety related to hallucination-like experiences Elisabeth O'Neill, Swansea University Andreas Larsson, Swansea University Louise McHugh, Ph.D., University College Dublin
- An acceptance intervention for spider fearful participants coping with spider related content

Nic Hooper, Ph.D., Middle East Technical University, Northern Cyprus Campus Louise McHugh, Ph.D., University College Dublin Emily K Sandoz, Ph.D., University of Louisiana, Lafayette

The major criticism of Cognitive Behavior Therapy (CBT) is that there has been N D A insufficient research investigating the processes that produce clinically relevant improvement in clients. The importance of research investigating each of the Acceptance and Commitment Therapy processes can therefore not be underestimated. The current symposium presents three papers which investigate the processes of defusion, mindfulness and acceptance in non clinical populations (i.e., typical adults dealing with spider fear, delusions and unwanted thoughts, respectively). The results from all three studies are encouraging from an ACT perspective, albeit a little preliminary. Potential improvements for this area of ACT research will be discussed in an interactive fashion with the audience members.

Educational Objectives:

- 1. Discuss the importance of brief ACT interventions.
- 2. Predict pitfalls to be avoided when running research of this kind.
- 3. Be creative in the design of ACT component based research.

36. Lights, Camera, ACTion!

WORKSHOP (1:15-2:45pm) Components: Experiential exercises, Didactic presentation, Case presentation, Role play

Categories: Clin. Interven. & Interests, Prof. Dev., Depression and Anxiety

Target Audience: Beg. Location: Brookside B

Jennifer L. Patterson, Psy.D, MidAmerican Psychological Institute

Greg T. Oswald, M.A., MidAmerican Psychological Institute Daniel J. Moran, Ph.D., MidAmerican Psychological Institute

This workshop is based on ACT in Practice: Case Conceptualization in Acceptance and Commitment Therapy (Bach & Moran, 2008). This workshop will provide a step-by-step framework for functionally conceptualizing client behavior problems, and will discuss application of specific ACT interventions. There will be liberal use of video clips of mock therapy cases, showing ACT in practice. Attendees will become familiar with the six core ACT principles of defusion, self-as-context, acceptance, values, committed action, and contacting the present moment, and will become able to conceptualize clinically relevant behaviors as functional response classes, and discriminate when they are amenable to an ACT approach. There will be a slide presentation, plus demonstrations, large group exercises and case-based practice. Participants will be provided with handouts to use with their clients for assessment and homework assignments to augment in session interventions. Worksheets will also be

distributed for the participants to use to facilitate ACT case formulation.

Educational Objectives:

1. Identify value-directed behavior as a clinical aim, its relationship to psychological flexibility, and clinical approaches to engender such behavior.

 Utilize the ACT Case Conceptualization model to assist in assessing clinically relevant behaviors and develop related treatment plans.
 Apply specific ACT interventions based on the case formulation.

37. Comparing multiple ways of doing the same thing: Generating values, assessing deictic relations, correcting false memories, and doing the IRAP

SYMPOSIUM (1:15-2:45pm)

Components: Original data

Categories: RFT, Clin. Interven. & Interests, Theory & Philo., Lab-based methods, IRAP, deictic, values Target Audience: Beg., Interm.

Location: Forest Glen

Chair: Desiree Carnathan, University of Mississippi Discussant: Chad E. Drake, Ph.D., University of South Carolina Aiken

 Asking About What Really Matters: A Comparison of Different Methods of Generating Values-Related Stimuli

Ashlyne Mullen, University of Louisiana, Lafayette Emily K. Sandoz, Ph.D., University of Louisiana, Lafayette

Victoria K. Boudoin, University of Louisiana, Lafayette Emmie R. Hebert, University of Louisiana, Lafayette Shelley Greene, University of Louisiana, Lafayette

 Assessing Deictic Relations: A Comparison of Two Measures

Lee Ward Schaefer, University of Mississippi Michael Bordieri, University of Mississippi Kerry C. Whiteman, University of Mississippi Karen Kate Kellum, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi

- Using Assistive Technology in Behavioral Research: A Comparison of IRAP Input Methods Lauren Fassero, University of Mississippi Joi Tucker, Alcorn State University Karen Kate Kellum, Ph.D., University of Mississippi Maureen Flynn, M.A., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi
- Correcting False Memories in the DRIFT Paradigm Paul M. Guinther, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center Michael J. Dougher, Ph.D., University of New Mexico

Refining our measures and methods allows researchers to develop ever more useful tools for further research as well as clinical applications. This symposium includes 4 evaluations of various ways of doing the same thing. The first presentation provides a comparison of different methods of influencing the context to facilitate the generation of values-related stimuli. The second provides a comparison of two methods of assessing performance on deictic relational responding tasks. The third will discuss the DRIFT paradigm and methods of correcting false memories. The final provides a comparison of IRAP performance using a variety of input devices (i.e., standard keyboard, switch interface, and simplified keyboard). The symposium will explore methods for conducting such research, implications, and future research questions.

Educational Objectives:

- 1. Compare and contrast methods of generating values-related stimuli.
- 2. Compare and contrast methods of assessing deictic relations.
- 3. Discuss potential benefits of using assistive technology in basic and analog research.

38. ACT as primary group intervention for transdiagnosed veterans SYMPOSIUM (1:15-2:45pm)

Components: *Conceptual analysis, Experiential exercises, Case presentation*

Categories: Clin. Interven. & Interests, Theory & <u>Philo., MHC, PTSD, SA, drop-in group</u> *Target Audience: Interm.*

Location: Glen Echo

Chair: Robert P. O'Brien, Ph.D., Central Texas Veterans Health Care System

Discussant: Sonja, V. Batten, Ph.D., VACO

- ACT as a primary group intervention Robert P. O'Brien, Ph.D., Central Texas Veterans Health Care System
- ACT as primary group intervention for PTSD and Substance Abuse

James E. Finkelstein, Psy.D., Baltimore VAMHCS

 Weekly Drop-In Act Group for Transdiagnosed Veterans

Iris Taber, Ph.D., HSP, South Texas Veterans Health Care System-Kerrville Division

• Riding the ACT Bicycle in Groups for MST, Anger, or Depression

Kevan McCutcheon, Ph.D., VAMC Cleveland, Ohio

This symposium will present four different group formats for applying ACT to transdiagnosed veterans. Across multiple settings (MHC, IOP and residential facility, urban and rural underserved) and with a variety of diagnoses, ACT will be discussed as flexibly applicable by relying on its core modules of acceptance, mindfulness and values-based change. By focusing more on inclusionary and universal behavior principles, and less on traditional exclusionary and eliminative factors, we will propose a more efficient use for group interventions.

Educational Objectives:

- 1. Describe patient exclusionary criteria and format a transdiagnostic ACT group in a general outpatient setting.
- 2. Apply ideas about flexible use of ACT processes to similar group therapy situations.
- 3. Identify common group interventions for PTSD and S/A veterans.

39. ACT and Psychological Flexibility in the Workplace: Latest Research and Applications From the United Kingdom

SYMPOSIUM (1:15-2:45pm)

Components: *Conceptual analysis, Original data, Didactic presentation*

<u>Categories: Prevention & Comm.-Based, Org. Beh.</u> <u>Management, Workplace mental health</u> *Target Audience: Beg., Interm., Adv. Location: Linden Oak*

Chair: Paul Flaxman, Ph.D., City University London Discussant: Frank Bond, Ph.D., Goldsmiths, University of London

- Psychological Flexibility, Sleep Quality, and Leisure Time Needs Satisfaction Among British Workers Paul Flaxman, Ph.D., City University London Mia Soderberg, University of Gothenburg and Sahlgrenska University Hospital
- ACT-Based Training in the Workplace: Examining Mindfulness and Behavioral Processes of Change Paul Flaxman, Ph.D., City University London Mia Soderberg, University of Gothenburg and Sahlgrenska University Hospital Professor Frank Bond, Ph.D., Goldsmiths, University of London

Joda Lloyd, Ph.D., Goldsmiths, University of London

 Feel the Feeling: An Interpretative Phenomenological Analysis of Therapists' Experience of Workplace Acceptance and Commitment Training Matthew Wardley, DPsych, Renal Service, The Royal London NHS Trust Paul Flaxman, Ph.D., City University London Professor Carla Willig, Ph.D., City University London

There is growing interest in the role of psychological flexibility and ACT in enhancing the psychological health and effectiveness of working populations. This symposium reports on the latest ACT research involving British workers. The first two papers report findings from a recently completed program of research that was funded by the UK's Economic and Social Research Council. The opening paper describes an innovative exploration of the links between psychological flexibility and employees' evening leisure experiences. The second paper reports a longitudinal evaluation of a group-based ACT intervention delivered to UK public sector workers. The findings of this particular workplace intervention study support the view that increasing mindfulness skills within ACT interventions can facilitate goaldirected behavioral change. The final paper offers a more in-depth qualitative exploration of therapists' experiences of participating in ACT-based training in the workplace. The symposium has been designed to offer conference delegates an insight into some of the latest investigations and practical applications of the ACT model in workplace settings.

Educational Objectives:

- 1. Discuss the utility of the ACT model for improving employees' psychological health and behavioural functioning at work and during leisure time.
- 2. Discuss the use of mindfulness strategies to facilitate values-based behavioral change in brief ACT-based worksite training programs.
- 3. Assess the degree to which mental health workers reported experiences of ACT training in

the workplace overlap with ACT's intervention model.

40. Using CBS to Rethink "Alternative" Treatments Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (1:15-2:45pm)

Components: Relational Frame Theory, Clinical Interventions and Interests, Theoretical and philosophical foundations, Prevention and Community-Based Interventions, Performance-enhancing interventions

<u>Categories: Music therapy, psychological</u> <u>flexibility, Yoga, Equine Facilitated</u> <u>Psychotherapy</u>

Target Audience: Beg., Interm., Adv. Location: Oakley

- Studying music and psychological flexibility: Conducting research from a Relational Frame Theory perspective
 - Brenton Abadie, University of Louisiana, Lafayette David R. (Rick) Perkins, Ph.D., University of Louisiana, Lafayette
 - Music has multiple effects and functions in people's lives, both among those who actively participate in its production and those who listen to musical performances. There are several ways in which studying music is of interest to our research group. One goal is to study the therapeutic effects of music, with a particular emphasis on using music as a tool for enhancing psychological flexibility. In addition, we are interested in ways that music affects interpersonal experience. Finally, we have an interest in developing methods for studying the effects of music from the perspective of Relational Frame Theory. Our ultimate goal is the collection of relevant empirical data. Keeping this in mind, several questions have been generated:
 - 1. What are some ways in which music can enhance psychological flexibility, and how do we understand this from a Relational Frame perspective?
 - 2. How can we study the ways that humans interact with music, and the ways in which these interactions are similar and different from language?
 - 3. Can "getting lost" in music ever serve the function of promoting a more general psychological flexibility, and how can this be studied?
 - 4. How can we study the ways that the structural components of music (rhythm, melody, harmony, etc.) interact with other components such as lyrics to produce a psychological experience?
 - 5. How can the study of music contribute to the study of Relational Frame Theory as a whole, and what research methods could potentially enhance the larger conceptual relevance of the study of music?
- Yoga and ACT for Anxiety Kate Morrissey, LCSW, Rubber Soul Yoga, Advantage Behavioral Health

Chad Drake, University of South Carolina Aiken

This pilot study explores a group approach incorporating both ACT and yoga to address the needs of clients who self identify as having struggled with anxiety. Two six-week groups were conducted (N =8 and N =6) with two hour groups incorporating one half ACT interventions and one half doing yoga and applying the principles from the first half of group. Outcomes were measured using the AAQ-II, GHQ, VLQ-M measures and a weekly evaluation of treatment. Mixed outcomes from the groups are being explored. In this research and development forum, we are working to move from the pilot studies to cultivating a longer-term research agenda for the ongoing development of the group utilizing yoga in combination with ACT interventions.

1. How might the research design be modified to incorporate a control condition given the constraints of a small clinical practice?

 What measurement instruments/strategies may be best with this sample in this situation?
 What ACT metaphors and exercises may be more

appropriate for this project?

4. Any other feedback on the project?

• A Horse Is a Horse, Except When It's A Therapist: Contextual Behavioral Science as a Theoretical Framework for Equine Facilitated Psychotherapy

Lisa Wegener, University of Louisiana, Lafayette Empirically supported research in the area of equine

- facilitated psychotherapy (EFP) has provided evidence for a firm foundation for this rapidly growing alternative method as an effective and efficacious treatment for psychological rehabilitation. Such positive preliminary outcome data has demonstrated the strengths in utilizing the universal machinery of the equine to facilitate improved outcomes for clients. Thus far, there is no clear, widespread, established theoretical framework that purports specific psychological processes underlying the positive outcomes. This incohesiveness of EFP's underlying mechanisms of change delays progress in research and treatment development. Psychological flexibility, may provide the missing link in EFP between treatment and outcome as EFP's mechanism of change. The purpose of this forum is to facilitate a discussion on the possible role of psychological flexibility in EFP.
- 1. Are the skills acquired through EFP skills/components of psychological flexibility?
- 2. If EFP results in increases in psychological flexibility, is it ACT? Would the instructors of EFP benefit from explicit training in the ACT model?
- 3. Trainers, would you welcome EFP Instructors into your workshops and classes?
- 4. What kind of research agenda would be necessary to explore psychological flexibility as a mechanism of change in EFP? What are the first steps?

Monday Afternoon 3:00pm

41. ACTin' bad: Antisocial behavior from an ACT perspective

SYMPOSIUM (3:00-4:15pm)

Components: Conceptual analysis, Literature review Categories: Clin. Interven. & Interests, Theory & Philo., antisocial behavior, acceptance and commitment therapy, behaviorism Target Audience: Beg., Interm., Adv.

Location: Ballroom B

Chair: Olga V. Berkout, M.A., University of Mississippi Discussant: Lisa Coyne, Ph.D., Suffolk University

 Child Psychopathology: Understanding Callous-Unemotional Traits From a Behaviorist's Viewpoint Timothy M. Weil, Ph.D., BCBA, University of South Florida Victoria Hoch, University of Nevada, Reno

- The Value of Values in Designing an Early Intervention for Children with CU Traits
 - Eleni Karayianni, Ph.D., Department of Psychology, University of Cyprus
 - Alexandros Lordos, Developmental Psychopathology Lab, Department of Psychology, University of Cyprus
 - Maria-Zoe Hadjicharalambous, Developmental Psychopathology Lab, Department of Psychology, University of Cyprus
 - Kostas Fanti, Developmental Psychopathology Lab, Department of Psychology, University of Cyprus
- Self-Compassion and Acceptance and Commitment Therapy with the Incarcerated Jai Amrod, Ph.D., Algoa Correctional Center, Jefferson City, Missouri

Working with individuals engaging in antisocial and socially deviant behavior presents unique challenges to clinicians and researchers. An acceptance and commitment therapy (ACT) functional contextualist perspective may greatly benefit scholars and therapists struggling to overcome these difficulties. This symposium will discuss the potential benefit of values in work with youth exhibiting maladaptive behavior, the use of ACT and self compassion with incarcerated individuals, and temperamental variables and terms associated with antisocial behavior research from a behaviorist perspective. Perspectives from a diverse set of speakers will be presented.

Educational Objectives:

- 1. Discuss traits as causes of behavior and the role that language might play in clinical application.
- 2. Examine the role of values and feasibility of applying ACT to children with conduct difficulties and callous-unemotional traits.
- 3. Implement a self-compassion practice as part of ACT in a prison setting.

42. Understanding Compassion In Context: Functional Contextual, Evolutionary, and Clinical Dimensions of The Science of Compassion

PANEL (3:00-4:15pm)

Components: *Conceptual analysis, Literature review* Categories: Clin. Interven. & Interests, Theory &

Philo., Related FC approaches, Compassion and Functional Contextualism

Target Audience: Beg., Interm., Adv.

Location: Ballroom C

Chair: Dennis Tirch Ph.D., Weill Cornell Medical College, New York, NY

Paul Gilbert Ph.D., FBPsS, OBE, Mental Health Research Unit, Kingsway Hospital, Derby, UK

Steven Hayes, Ph.D., University of Nevada, Reno

Kelly G. Wilson, Ph.D., University of Mississippi, Oxford

John P. Forsyth, Ph.D., State University of New York, Albany Roger Vilardaga, M.A., University of Nevada, Reno

Acceptance and Commitment Therapy (ACT), Compassion Focused Therapy (CFT) and other forms of CBT are beginning to recognize that compassion may represent an active psychotherapy process variable; an important component of well-being; and a value inherent in the psychological flexibility model. As the science of compassion (and self-compassion)

advances, contributions from evolutionary psychology, relational frame theory (RFT), and applied clinical research are beginning to point the way toward a comprehensive, contextual account of compassion as an emergent evolutionary set of human behaviors that is essential for both the psychological health of the individual and the survival of the species. This panel will involve an open discussion of various perspectives on compassion, drawn from such sources as an RFT account of empathy, multi-level selection theory, outcome research, affective neuroscience, and Buddhist philosophy. Our conversation will engage cofounders of ACT, the founder of CFT, and researchers and theorists in the science compassion in an open and challenging exploration of the nature of compassion, it's importance for human well-being, and the development of new interventions that can deploy the power of self-compassion to further the cause of the alleviation of human suffering. This will be taking place at a time when compassion is increasingly entering the cultural discussion of psychotherapy, in an effort to maintain the link between compassionate practice and fundamental scientific principles and research.

Educational Objectives:

- 1. Explain the range of state the art psychological perspectives upon compassion.
- 2. Compare and integrate functional contextualist and evolutionary models of compassion.
- 3. Implement and design compassion focused interventions that are ACT consistent and serve to enhance psychological flexibility.

43. Standing on the Shoulders of Giants: Enhancing ACT Through Exploration of Contributions from Philosophy and Behavioral Science SYMPOSIUM (3:00-4:15pm)

Components: Conceptual Analysis, Literature Review, Original data, Experiential exercises, Didactic presentation

Categories: Clin. Interven. & Interests, Theory & Philo., Existentialism, Philosophical Foundations, Clinical Data-based decision making, FAP

Target Audience: Beg., Interm.

Location: Ballroom F

Chair: John O'Neill, University of South Florida Discussant: Tom Szabo, M.A., BCBA, University of Nevada, Reno

How existentialism deepens our understanding and practice of ACT?

Jelena Kecmanovic, Ph.D., Hood College

- Combining ACT and FAP in a Behavior Analytic Perspective: Toward development of a flexible decision making protocol to implement ACT/behavioral tactics based on directed observed data
 - Roberto Cattivelli, Ph.D., University of Parma, Istituto Ospedaliero di Sospiro
 - Valentina Tirelli, M.A., University of Parma, Learning Centre TICE
 - Roberto Cavagnnola, M.A., Instituto Ospedaliero di Sospiro

Nicola Maffini, M.A., Leaves, Private Practice, Italy

This symposium will examine ties between ACT and existential philosophy, phenomenology, and functional analytic psychotherapy by highlighting contributions of these fields to our current conceptualization of behavior and by exploring applications of these theories to clinical practice. Relationships between the ACT perspective and the theoretical ideas of Nietzsche, Heidegger, Kierkegaard, and Sartre will be discussed, followed by an examination of how the existential-phenomenological approach to therapy may inform ACT-specific processes including defusion, self-as-context, and present moment experience. Finally, results from an intervention study which combined elements of Functional Analytic Psychotherapy and ACT to change clinically relevant behavior outside of the therapy room will be given. Implications for clinical practice and future research will be considered.

Educational Objectives:

- 1. Implement in clinical settings a decision making protocol to analyze direct observed data.
- 2. Apply the Phenomenological Method in an ACT consistent method in therapy.
- 3. Integrate existentialism into ACT.

44. How to Conduct Meaningful Research in Clinical Practice Settings PANEL (3:00-4:15pm)

Components: Conceptual analysis

Categories: Prof. Dev., practice-based research,

Target Audience: Beg., Interm., Adv.

Location: Amphitheater

Chair: Jennifer Villatte, M.A., University of Nevada, Reno Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Kelly Koerner, Ph.D., Evidence-Based Practice Institute R. Trent Codd III, Ed.S., Cognitive-Behavioral Therapy

Center of WNC, PA Maria Karekla, Ph.D., University of Cyprus

Practice-based research, research done by scientistpractitioners in non-academic settings as part of their routine work, offers exciting opportunities to study dissemination and implementation questions in settings where patient needs come first. In this panel, we will describe how we overcame barriers to conducting research in our own non-academic settings, highlighting practical how-tos and ways to leverage collaboration that we hope will encourage and inspire your own research efforts. Trent Codd will discuss research designs which may be utilized by the private practitioner to examine meaningful clinical questions despite the constraints their setting provides. Maria Karekla will discuss and present examples of how data may be easily and manageably collected and transformed into either group or single case studies in a small outpatient clinical setting. Kelly Koerner will describe how therapists in an online international learning community work together to do training and implementation research, and practicebased treatment development and evaluation research. Jason Luoma will describe the dissemination

and intervention development research he has done in his clinic and the ways in which his site balances making money with research that does not directly

generate revenue. In addition to sharing details and tips based on their own experiences, panelists will foster discussion with audience members about overcoming the barriers to research in their own settings.

Educational Objectives:

 Design research studies that can be feasibly conducted in clinical practice settings.
 Collect, analyze, and share data from practice-based research.
 Organize your business time and resources to support non-revenue generating research.

to support non-revenue generating research activities.

45. Investigating Physical and Verbal Mindfulness Techniques in ACT and the Use of the IRAP in Clinically Relevant Domains such as OCD and Suicidal Ideation SYMPOSIUM (3:00-4:15pm)

Components: Original data

Categories: Clin. Interven. & Interests, RFT, Other, IRAP, Mindfulness, Experimental

Target Audience: Interm.

Location: Brookside A

Chair: Emma Nicholson, National University of Ireland Maynooth

Discussant: J. T. Blackledge, Ph.D., Morehead State University

- An Empirical Investigation of Physical and Verbal Mindfulness Techniques in ACT
 - Mairead Foody, National University of Ireland Maynooth Yvonne Barnes-Holmes Ph.D., National University of Ireland Maynooth
 - Dermot Barnes-Holmes Ph.D., National University of Ireland Maynooth
- Comparing Implicit Cognitive Processes in the Context of Disgust -Propensity and -Sensitivity in the Etiology of OCD in a Clincal and Non-Clinical Sample
 - Emma Nicholson, National University of Ireland Maynooth

Dermot Barnes-Holmes Ph.D., National University of Ireland Maynooth

- The IRAP as a measure of implicit attitudes to death and suicide: A pilot study
 - Ian Hussey, National University of Ireland Maynooth Dermot Barnes-Holmes Ph.D., National University of Ireland Maynooth

This symposium will investigate the physical and verbal mindfulness techniques in ACT and will explore the use of the IRAP in clinically relevant domains such as OCD and suicidal ideation. The processes at work in mindfulness remain largely understudied as do the implicit cognitive processes of disgust responding and suicidal ideation. The work presented in this symposium will aim to fill these gaps in the literature and explore the distinction between physically-based mindfulness techniques and psychologically-based techniques and the utility of the IRAP as a measure of clinically relevant constructs such as disgust – propensity and -sensitivity in OCD and suicidal ideation among those suffering from self-harm.

Educational Objectives:

- 1. Distinguish between physical and verbal mindfulness techniques.
- 2. Demonstrate the utility of the IRAP in clinically relevant domains
- Compare implicit cognitive processes across clinical and non-clinical samples

46. Behavioral and Mental Health Services in Interdisciplinary Primary Care INVITED LECTURE (3:00-4:15pm)

Components: Conceptual analysis, Didactic presentation

Categories: Clin. Interven. & Interests, Beh. med., Org. Beh. Management, Theory & Philo., Department of Veterans Affairs; interdisciplinary primary care Target Audience: Beg.

Location: Brookside B

Antonette M. Zeiss, Ph.D., Department of Veterans Affairs

The Department of Veterans Affairs provides health care to over 6 million Veterans, with Primary Care services offered in two settings: 1) Patient Aligned



Care Teams (PACTs) interdisciplinar y, Veterancentered teams that include mental health professionals as well as Primary Care

Providers committed to holistic care for each Veteran; and 2) Home Based Primary Care Teams (HBPCs) also interdisciplinary teams, which deliver primary care services at home, for home-bound Veterans and their caregivers; these teams also include mental health professional staff. This presentation will: 1) Provide an overview of VA as a health care system. 2) Review the concept of interdisciplinary care and distinguish it from multidisciplinary care. 3) Describe the mental and behavioral services provided in VA's PACTs and HBPCs and the systemic structures and processes which support this care. 4) Discuss both successful outcomes and challenges in providing such care.

Educational Objectives:

- 1. Define interdisciplinary health care and describe its benefits.
- Describe the VA system of health care and how mental and behavioral health services are provided in primary care.
- Describe the processes that support successful outcomes and the challenges in providing interdisciplinary mental health services in primary care settings.

47. Transformation of Function Through **Relational Networks: Strategies and** Establishment of Functions SYMPOSIUM (3:00-4:15pm)

Components: Original data Categories: RFT, Clin. Interven. & Interests, Children Target Audience: Interm.

Location: Forest Glen

Chair: Jacob Daar, Southern Illinois University Discussant: Ian Stewart, Ph.D., National University of Ireland

- A Self-Control Procedure Using Conditional Discrimination Training and Transformation of Functions with Children Autumn N. McKeel, M.S., BCBA, Southern Illinois University Mark R. Dixon, Ph.D., BCBA, Southern Illinois University
- Transformation of Function on a Simulated Horse Race Gambling Game Seth Whiting, M.S., Southern Illinois University Mark R. Dixon, Ph.D., BCBA, Southern Illinois University
- Transformation of Discriminative Function Through Relational Networks: The Impact of Derived Stimulus Relations on Stimulus Control of Behavior Samantha Florentino, BCaBA, University of South Florida Tim Weil, Ph.D., BCBA, University of South Florida

The present research evaluates effective interventions that can be used to establish the transformation of functions through discriminative stimuli. Specifically, the experiments have identified the effectiveness of the use of contextual cues related to establishing functions. Possible interventions, such as a selfcontrol procedure or a computer simulated task, are discussed, as well as a comparison as to when and how relational frames are established. Results from the studies and potential future research will be discussed.

Educational Objectives:

- 1. Implement a self-control training procedure through transformation of functions.
- 2. Alter preferences through transformation of functions.
- 3. Identify/analyze whether it is necessary to acquire a function prior to or after establishing networks.
- 48. Building Flexibility with Food, Body, and Self: Contextual Behavior Science and **Disordered Eating**

SYMPOSIUM (3:00-4:15pm) Components: Conceptual Analysis, Literature Review, Original data, Case presentation

Categories: Clin. Interven. & Interests, Theory & Philo., RFT, Eating disorders, obesity

Target Audience: Beg., Interm., Adv. Location: Glen Echo

Chair: Nick Reetz, Southern Illinois University- Carbondale Discussant: Lucene Wisnewski

• Acceptance and Commitment Therapy for Anorexia Nervosa: Rationale, treatment description, and a case report

Mary L. Hill, M.A., Georgia State University Akihiko Masuda, Ph.D., Georgia State University Hailey Melcher, Georgia State University

 CBT and ACT: Clinical case conceptualization and treatment of EDNOS patients Katia Manduchi, ACT-Italia, Italv Giovambattista Presti, IULM University (Milan, Italy)

Paolo Moderato, IULM University (Milan, Italy)

 The role of values in the treatment of eating disorders and obesity Adrienne Juarascio, M.S., Drexel University Alyssa Matteucci, Drexel University Evan Forman, Ph.D., Drexel University

ONDA This symposium will focus on different aspects of contextual behavior science in disordered eating. The first paper discusses an ACT program developed for the treatment of anorexia nervosa. Rationale for the program, therapy protocol, and case discussion will be presented. The second paper explores EDNOS with ACT and CBT protocols, and contents that psychological flexibility might be the key to addressing EDNOS in the future. The final paper focuses on the role of using values in the treatment of eating disorders and obesity. Values-based interventions show promise in these areas where moderate success rates and high relapse rates are often found.

Educational Objectives:

- 1. Conceptualize how disordered eating can be studied through research on relational responding.
- 2. Describe the role and significance of values in the treatment of eating disorders and obesity.
- 3. Describe a treatment protocol for an ACT intervention for eating disorders.

49. Brief group, mobile, and Internet ACTinterventions for increasing well-being SYMPOSIUM (3:00-4:15pm)

Components: Original data, Case presentation

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, brief intervention, group, Internet, mobile, exercise, pain, well-being

Target Audience: Beg., Interm., Adv.

Location: Linden Oak

- Chair: Raimo Lappalainen, Professor, Ph.D., Department of Psychology, University of Jyväskylä, Finland
- The role of Acceptance and Commitment Therapy (ACT) in encouraging a physically active lifestyle Anu Kangasniemi, M.S., LIKES - Research Center for
 - Sport and Health Sciences, and Department of Psychology, University of Jyväskylä, Finland Raimo Lappalainen, Ph.D., Department of Psychology, University of Jyväskylä, Finland

Janne Kulmala, M.A., LIKES - Research Center for Sport and Health Sciences, Jyväskylä, Finland

- Harto Hakonen, M.A., LIKES -Research Center for Sport and Health Sciences, Jyväskylä, Finland
- Tuija Tammelin, Ph.D., LIKES Research Center for Sport and Health Sciences, Jyväskylä, Finland
- Designing ACT-based mobile application for improving wellbeing
 - Essi Sairanen, M.S., Department of Psychology, University of Jyväskylä, Finland

Tero Myllymäki, M.S., Department of Psychology, University of Jyväskylä, Finland

Välkkynen Pasi, Ph.D., VTT Technical Research Centre of Finland, Tampere, Finland

Aino Ahtinen, M.S., VTT Technical Research Centre of Finland, Tampere, Finland Lappalainen Raimo, Ph.D., Department of Psychology, University of Jyväskylä, Finland

 Brief internet interventions for patients on waitinglist for treatment
 Tobias Lundgren, Ph.D., Psychology department, University of Stockholm, Sweden
 Max Boeling, University hospital, Århus, Denmark

Olle Sundin, Psychology department, University of Stockholm, Sweden

Jonthan Kotschack, Psychology department, University of Stockholm, Sweden

Developing low intensity preventative interventions as well as brief psychological interventions is essential when we are dealing with common health problems that are stressing national economy. They are costeffective and often also ideal from the client's point of view. It seems that many clients want their psychological intervention to be as brief as possible. There are several studies investigating the effectiveness of short-term interventions and brief therapies and the results have been very encouraging. Acceptance and Commitment Therapy has been shown to be effective as a brief intervention. The purpose on this symposium is to present three brief interventions for increasing wellbeing. Effects of an ACT-based group intervention for encouraging a physically active lifestyle will be presented. Experiences and preliminary findings of developing an ACT-based internet application for treatment of pain and stress and a mobile intervention for improving wellbeing will be shown.

Educational Objectives:

- 1. Apply ACT group intervention when encouraging physically passive persons to develop a more active lifestyle.
- 2. Design mobile and internet ACT interventions for increasing quality of life and wellbeing.
- Use the effects of ACT on physical activity, pain, stress and general wellbeing to improve client wellbeing.

50. Novel Applications of CBS Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (3:00-4:15pm)

Components: Clinical Interventions and Interests, Performance-enhancing interventions, Organizational behavior management, Professional Development Categories: Sexual Orientation, ACT therapists as

research group participants Target Audience: Beg., Interm., Adv.

Location: Oakley

• Charting a Course: Contextual Behavioral Science for Understanding, Preventing, and Addressing Difficulties With Sexual Orientation

Samantha K. Marks, University of Louisiana, Lafayette Despite widespread efforts to de-pathologize and de-

stigmatize homosexuality over thirty-five years ago, the quality of care available to individuals seeking psychotherapy for issues related to sexual orientation still varies widely. Issues like sexual identity, affiliation, discrimination, and stigma remain a unique challenge for many clinicians. This is largely due to a lack of empirical literature on the subject. Continued scientific progress in this area may depend on the development of a sound analysis of issues related to sexual orientation. This clinical forum will explore the potential utility of interventions based in psychological flexibility to address difficulties with sexual orientation. Discussion will focus on questions such as:

- 1. Is there any reason to believe that certain formats might be most effective in building flexibility with struggles related to sexual orientation?
- 2. What might the role of prevention be in addressing difficulties with sexual orientation?
- 3. What unique challenges might we face with individuals who do not identify with a particular sexual orientation?
- 4. Are certain steps necessary to build empirical support for the role of psychological inflexibility in difficulties with sexual orientation before pursuing flexibilitybased treatment development in this area?
- Qualitative research: participative and co-operative inquiry as opportunities to gather data from the depths experiential learning.
 - Martin Wilks, Chartered Counselling Psychologist, Independent Practitioner in private practice
 - A call to open up the ACT community's research efforts to the rich possibilities inherent in the qualitative research designs and in particular those which call for the temporary establishment of a small, intentional peer-community of participative researchers who come together to investigate a research question of mutual professional and personal interest. Typically, such a project proceeds as an upward spiral of inquiry: an initial question is explored at an initial meeting and data is gathered between meetings by putting the question to test in daily working life. At a series of subsequent meetings, that data is pooled, processed and digested, new questions formulated and new data gathering projects designed. Conclusions maybe collated, summarised and presented in creative ways: a new treatment protocol, an album of songs, a practice manual, or personal journal accounts.
 - Honouring this way of working will also represent a broadening of our way of knowing in the ACBS community; a recognition that empiricism is but one perspective on meaning making. The personal, experiential involvement of a clinician in an inquiry group exploring the effectiveness of ACT to address their own addictions, for example, could access personal and empathic insights of a different order to the pre and post measures of an RCT and lead us to a more integral (Wilber, 2000) understanding of the ubiquitous challenge of addiction.
 - 1. How does co-operative inquiry 'sit' with
 - a) the aspirations of a peer-learning community such as the ACBS
 - b) the 'truth criteria' of functional contextualism
 - 2. How does research according the co-operative inquiry model guard against 'inquiry group' collusion?
 - 3. What institutional challenges does participative/cooperative research present when considering how an individual's graduate research work is to be assessed? Suggest creative workarounds to these challenge?

4. Suggest some novel, creative forms for presenting cooperative inquiry research outcomes with particular reference to how these might contribute on the therapy front-line?

Monday Afternoon Plenary 4:30pm

51. Exposure therapy for anxiety disorders: From fear reduction to fear enhancement INVITED LECTURE (4:30-5:45pm)

Components: Conceptual Analysis, Original data Categories: Performance-enhancing interventions,

<u>Clin. Interven. & Interests, anxiety disorders</u> Target Audience: Interm.

Location: Grand Ballroom

Chair: James D. Herbert, Ph.D., Drexel University Michelle G. Craske, Ph.D., UCLA



Some models of exposure therapy for anxiety disorders emphasize fear reduction throughout exposure trials as an immediate goal and an index of long term symptomatic improvement. However, the evidence indicates that neither the degree by which fear reduces nor the end-of-exposure fear level predict therapeutic outcome. Developments in the

theory and science of fear extinction, and learning and

memory, indicate that 'performance during training' is not commensurate with learning at the process level. Inhibitory learning is recognized as being central to extinction processes that are believed to occur during exposure therapy, and to fear responding following completion of exposure therapy. The current presentation will focus on Ň D evidence from our laboratory pertaining to methods for enhancing inhibitory learning during exposure therapy and its retrievability after exposure therapy. These methods often involve fear enhancement rather than fear reduction, and include labeling of emotional states versus cognitive restructuring, as individuals are exposure to fear relevant stimuli. The relevance of these findings to traditional CBT and ACT will be discussed.

Educational Objectives:

- 1. Explain the role of fear reduction throughout exposure therapy.
- 2. Describe extinction based models of exposure therapy.
- 3. Utilize the value of fear enhancement and affect labeling during exposure therapy.

Monday Evening 8:00-10:30pm

Chapter/SIG Expo, Poster Session #2, and Book Signing

Chapter/SIG Expo & Cocktails

8:00pm - 10:30 pm (posters & Chapters/SIGs may wrap up at 9:00pm or later, at their discretion) Grand Ballroom

A cash bar will be available.

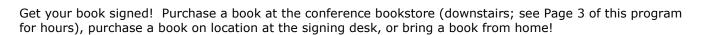
Silent Auction 8:00pm - 10:00 pm Grand Ballroom

The Chapter s and SIGs will be holding a silent auction this year. Look for the pink bidding pages at the Chapter and SIG tables. Write down your name, email, and bid (US Dollars) to get one of the funny or serious items up for bid. The highest bid "wins" the item. The bidding will conclude at 10pm, with the winners immediately announced. *All proceeds will go to the Developing Nations Training Fund.*

A cash bar will be available.

Book Signing

8:30pm - 9:30 pm Grand Ballroom



We'll have these fabulous authors in attendance for signing in the front of the Grand Ballroom.

8:30pm-8:50pm

Richard Blonna, Ed.D., William Paterson University Paul Gilbert, Mental Health Research Unit, Kingsway, Derby Kelly G. Wilson, Ph.D., University of Mississippi

8:50pm-9:10pm Matt McKay, Ph.D., Wright Institute & New Harbinger Publications Robert (Bob) Whitaker, journalist David Sloan Wilson, Ph.D., Evolution Institute

9:10pm-9:30pm **Russ Harris**, **M.D.**, ACT Mindfully Institute, Inc **Steven C. Hayes**, **Ph.D.**, University of Nevada Reno

Poster Session #2

8:00pm - 9:30 pm Grand Ballroom

Abstracts for the Posters (and the poster files... as we receive them) can be found at http://contextualpsychology.org/wc10 posters

Behavioral Medicine

1. Exercise behavior and the Acceptance & Action Questionnaire for Exercise (AAQ-Ex) Subtopic: Exercise and physical activity Sarah B. Staats, B.A., Wichita State University Robert D. Zettle, Ph.D., Wichita State University





MONDAY

2. The short form of the Chronic Pain Acceptance Questionnaire: Factor Structure and Convergent Validity

Subtopic: Chronic Pain

John Baranoff, M Clin Psych, University of Queensland Stephanie Hanrahan, Ph.D, University of Queensland Dilip Kapur, MBBS, Flinders Medical Centre Jason Connor, Ph. D, University of Queensland

3. Restore Hope to HIV and TB Patients

Subtopic: People Living with HIV/AIDS and TB

Christian Vonjoe, Health Education Division - Ministry of Health and Sanitation, New England Ville, Medical Stores Freetown

Clinical Interventions and Interests

4. PTSD Intensive Outpatient Program at Togus VAMC: Changes in Mindful Awareness and Acceptance on the Philadelphia Mindfulness Scale (PHLMS)

Subtopic: Mindfulness or PTSD

Erica L. England, Ph.D., VA Maine Healthcare System (Togus VAMC)

- Jerold Hambright, Ph.D., VA Maine Healthcare System (Togus VAMC)
- Kevin Polk, Ph.D., VA Maine Healthcare System (Togus VAMC)

5. Veteran Improvement Following 5-Day ACT Treatment for PTSD: Pre- and Post-Test Differences Based on Commuter Status

Subtopic: PTSD

Abby Hurley, M.A., Wheaton College Marjorie Crozier, M.A., LaSalle University

6. Sport Anxiety and Aspects of Mindfulness in Athletes: Implications for Mindful Sport Performance Enhancement (MSPE)

Subtopic: Mindfulness, Sport Psychology, Anxiety

Timothy R. Pineau, M.A., The Catholic University of America

Carol R. Glass, Ph.D., The Catholic University of America Keith A. Kaufman, Ph.D., The Catholic University of America

7. Psychological inflexibility and experiential avoidance as a predictor of posttraumatic stress disorder (PTSD) in war Veterans

Subtopic: PTSD

Eric C. Meyer, Ph.D., VA VISN 17 Center of Excellence for Research on Returning War Veterans

Richard Seim, Ph.D., VA VISN 17 Center of Excellence for Research on Returning War Veterans

Jonathan Tekell, Baylor University

Matthew Woodward, VA VISN 17 Center of Excellence for Research on Returning War Veterans

Nathan A. Kimbrel, Ph.D., VA VISN 17 Center of Excellence for Research on Returning War Veterans

Marc I. Kruse, VA VISN 17 Center of Excellence for Research on Returning War Veterans

8. The effect of cognitive defusion on self relevant negative thought : Examining the impact of "I think that" phrase.

Subtopic: defusion

Yuki Shigemoto, graduate student of psychology, Doshisha University

Muto Takashi, Department of Psychology, Doshisha University

9. The Automatic Thoughts Questionnaire-Believability Scale as a Measure of Cognitive Fusion

Subtopic: depression

Suzanne R. Gird, M.A., Wichita State University Robert D. Zettle, Ph.D., Wichita State University Blake K. Webster, M.A., Wichita State University Alexandra L. Wagener, M.A., Wichita State University

Charles A. Burdsal, Ph.D., Wichita State University

10. A Preliminary Study on Examining the Effects of Creative Hopelessness

Subtopic: Creative Hopelessness, Change Agenda, Rule-governed behavior

- Mie Sakai, Graduate School of Psychology, Doshisha University
- Takashi Muto, Department of Psychology, Doshisha University
- Akihiko Masuda, Department of Psychology, Georgia State University

Naoko Kishita, Graduate School of Psychology, Doshisha University, Research Fellow of the Japan Society for the Promotion of Science

11. Preliminary results of an ACT-based group program for patients with anxiety disorders

Subtopic: Anxiety

Nina Stoeckel, Ph.D., Geisinger Medical Center Hope C. Mowery, Ph.D., Geisinger Medical Center Linda F. Brown, Ph.D., Indiana University Bloomington Charlotte Collins, Ph.D., Geisinger Medical Center

12. Mindfulness, Psychological Flexibility, and Quality of Life: The Mediating Role of Rumination

Subtopic: Rumination

Daniel Millstein, Yale University, Department of Psychology David Klemanski, Yale University, Department of Psychology

13. WorkACTive: Design of an ACT based inpatient intervention for Return To Work

Subtopic: Return to work / Vocational Psychology

Sigmund Gismervik, M.D., Ph.D. candidate, Norwegian University of Science and Technology

Egil Fors, MD, Ph.D., Norwegian University of Science and Technology

Marius Fimland, Post Doc., Norwegian University of Science and Technology

14. "Mi Amiga Dolores": Culturally Informed Acceptance and Commitment Therapy for Puerto Rican adults with Fibromyalgia

Subtopic: Culture

- Yari Colon, Ph.D., VA Caribbean Healthcare System
- Mayra Berrios-Hernandez, Ph.D., VA Caribbean Healthcare System
- Karina Navas-Martinez, Ph.D., VA Caribbean Healthcare System

Iris Abreu-Colon, M.A., VA Caribbean Healthcare System

15. Beyond the disciplining parent: building parental acceptance

Subtopic: parenting

Oana Gavita, Ph.D., Babes-Bolyai University

16. Relationships between acceptance-related constructs, anxiety, and speaking performance in public speaking anxiety

MONDAY

Subtopic: Public Speaking Anxiety, Defusion, Acceptance, Awareness Lisa Glassman, M.S., Drexel University Alyssa Matteucci, Drexel University Evan Forman, Ph.D., Drexel University James Herbert, Ph.D., Meltem Izzetoglu, Ph.D., Drexel University Lauren Bradley, Drexel University

17. Do Social Psychology constructs such as Need for Cognitive Closure have utility in treatment component matching in ACT? A Preliminary analysis Subtopic: Treatment development

Taleisha Jones, San Jose State University Jennifer Gregg, Ph.D., San Jose State University

18. The Use of Acceptance and Commitment Therapy to Reduce Distress Caused by Auditory Hallucinations and Increase Value-Based Living with Individuals Diagnosed with Schizophrenia in a Community Mental Health Clinic: A Pilot Study

Subtopic: Schizophrenia Aaron Fett, M.A., Palo Alto University Julia Hernandez, M.S., Palo Alto University

19. Understanding and Caring of Children at Ankur Counseling Center, Nepal

Subtopic: Children

Chhori Laxmi Maharjan, Friends of Needy Children/Ankur Counseling Center, Nepal

20. An Interactive Health Communication Application as a platform for disseminating ACT: A pilot study

Subtopic: Web-based application Arne Lillelien, Vestre Viken HF, Norway Trym Nordstrand Jacobsen, Molde DPS, Norway Didrik Heggdal, Vestre Viken HF, Norway Deede Gammon, Oslo University Hospital, Norway

21. Attitudes and Internalized Homophobia in Gay and Lesbian College Students

Subtopic: GLBT Mickey White, B.S., University of North Texas Amy Murrell, Ph.D., University of North Texas

22. A Review of Acceptance and Commitment Therapy with Anxiety Disorders

Subtopic: Anxiety Katie Sharp, University of Kansas

23. A parent of a child with disabilities : A case presentation.

Subtopic: Parent having a child with disabilities Shinji Tani, University of Ritsumeikan Kotomi Kitamura, Osaka Univirsity of Human Sciences

24. Resiliency Training for About-to-be-Deployed Submariners

Subtopic: Military, PTSD, Anxiety

Robert Astur, Ph.D., University of Connecticut Jacqueline Pistorello, Ph.D., University of Nevada-Reno Steve Hayes, University of Nevada-Reno Lisette Roman, Connecticut College Bryan Still, Naval Submarine Base, New London

25. The Role of Experiential Avoidance and Other Related Constructs in Anxiety Disorders

Subtopic: Experiential Avoidance Brian Pilecki, M.A., Fordham University Dean McKay, Ph.D., Fordham University Patrick Milgram

26. A Transdiagnostic Group Therapy Treatment for Emotional Dysregulation: Preliminary Investigation of a New Protocol

Subtopic: Emotion Dysregulation, Group Therapy, Transdiagnostic Interventions

Amynta Hayenga, Wright Institute

Patricia Zurita Ona, The Berkeley Cognitive and Behavioral Therapies Clinic

27. An investigation of the structural and predictive validity of the Acceptance and Action Questionnaire-II among treatment seeking substance users

Subtopic: Substance Use, AAQ-II

Kenneth M Carpenter, Ph.D., Columbia University/New York State Psychiatric Institute

Magdalena Kulesza, Ph.D., Lousiana State University

Frank W. Bond, Ph.D., Goldsmiths, University of London Laura Feder, Psy.D., Rutgers University

Frances Levin, M.D., Columbia University/New York State Psychiatric Institute

Edward V. Nunes, M.D., Columbia University/New York State Psychiatric Institute

28. Using Acceptance and Commitment Therapy in the rehabilitation of women on long-term sick leave due to mental illhealth and/or pain: A preliminary randomized controlled trial

Subtopic: Return to work

Anna Finnes, M.S., University of Uppsala, Sweden Carina Wennman, M.S., Uppsala academic hospital, Sweden.

29. Integrating Acceptance and Commitment Therapy (ACT) into traditional Cognitive Behaviour Therapy (CBT)

Subtopic: Depression

Leandra Hallis, M.A., Psy. D. cand., Douglas Mental Health University Institute

Frédérick Dionne, Ph.D., Centre universitaire de Québec (Canada)

Bärbel Knäuper, Ph.D., McGill University Luisa Cameli, Ph.D., The Emotional Health CBT Clinic

30. ACT for Insomniacs

Subtopic: Insomnia Guy Meadows Ph.D., The Sleep School

31. Developing therapeutic Self-service in South Africa

Subtopic: Developing Nations Yoav Van der Heyden, Private Practice

32. ACT for Sierra Leone

Subtopic: youth trauma/rape Hannah Bockarie, DONBOSCO Fambul

Educational Settings

33. Can a short ACT intervention targeting defusion from self-judgments undermine the negative effects of shame on academic performance?

Subtopic: Shame

Brian D. Cooper, University of Nevada, Reno Julian Bartke, University of Nevada, Reno Steven C. Hayes, Ph.D., University of Nevada, Reno

Functional Contextual Approaches in Related Disciplines

34. Emotion Regulation and Socialization in Racial-ethnic Minority Families

Subtopic: Children and families Marie-Christine Andre, Suffolk University Lisa Coyne, Suffolk University Jadig Garcia, Suffolk University Alysha Thompson, Suffolk University Xheni Vaqari, Suffolk University Angela Burke Currie, Suffolk University

Other

35. Validation of the Chronic Pain Acceptance Questionnaire (CPAQ) in Iranian patients with chronic pain

Subtopic: chronic pain

Fatemeh Mesgarian, MSc, Shahed University Ali Asghari, Ph.D., Shahed University Mohammad Reza Shaeiri, Ph.D., Shahed University

36. Acceptance and pain-related interference in Iranian women with chronic pain

Subtopic: chronic pain

Fatemeh Mesgarian, MSc, Shahed University Ali Asghari, Ph.D., Shahed University Mohammad Reza Shaeiri, Ph.D., Shahed University

Performance-Enhancing Interventions

37. Using ACT in the workplace

Subtopic: Emotion-regulation

Oana Gavita, Ph.D., Babes-Bolyai University

Prevention and Community-based Interventions

38. Brief ACT Workshops for Parents in Community Settings

Subtopic: Parents

Alexis Llewellyn, Ph.D., Katy Center for Psychology & Counseling Services

Candice Baugh, M.A., LMHC, NYU School of Medicine

39. Significant correlation between social anxiety disorder and higher education: results from a community sample

Subtopic: Social Anxiety Disorder

Marsha Chinichian, B.S., Michelle G Craske, Ph.D., University of California, Los Angeles

- Taylor Harris, B.A., Michelle G Craske, Ph.D., University of California, Los Angeles
- Halina Dour, M.A., Michelle G Craske, Ph.D., University of California, Los Angeles

40. Increasing global freedoms: preliminary insight into the role of psychological flexibility in helping behaviour

Miles Thompson, DClinPsy, Institute of Management Studies, Goldsmiths, University of London Frank Bond, Ph.D., Institute of Management Studies,

Goldsmiths, University of London

41. Parenting and psychological flexibility in adolescents: a six-year longitudinal study

MOND

Subtopic: adolescents; parenting; psychological flexibility

Kathryn Williams, B.A., University of Wollongong Joseph Ciarrochi Ph.D., University of Western Sydney

Patrick Heaven Ph.D., Australian Catholic University

42. Evaluation of Bicyclists' Behavior Before and After a Share the Road Campaign

Subtopic: University populations Mariel Parman, University of Mississippi Karen Kate Kellum, University of Mississippi Kelly G. Wilson, University of Mississippi

Professional Development

43. Relational Insight Meditation as a Practice for Therapists Interested in Enhancing Psychological Flexibility

Subtopic: Mindfulness

Lori Ebert, Ph.D., Duke University Medical Center Gregory Kramer, Ph.D., Metta Foundation

Relational Frame Theory

44. What kind of "non-verbal" intelligence predicts relational flexibility? : The relationship between performance on IRAP and Das-Naglieri Cognitive Assessment System (DN-CAS)

Subtopic: IRAP

- Asako Sakano, Graduate school of psychology, Doshisha University
- Takashi Muto, Department of Psychology, Doshisha University

Naoko Kishita, Doshisha University, Research Fellow of the Japan Society for the Promotion of Science

Tomu Ohtsuki, Faculty of Human Sciences, Waseda University

45. Experimental analysis of cognitive defusion from RFT perspective:Effect of contextual control over transformation of stimulus function

Subtopic: cognitive defusion

Tomu Ohtsuki, Ph.D., Waseda University Naoko Kishita, M.A., Doshisha University Takashi Muto, Ph.D., Doshisha University

46. Are people more accepting of others than they are of themselves? An IRAP Study of perfectionism, acceptance & perspective taking.

Subtopic: IRAP Rachel Lowdon, NHS Lothian David Gillanders, University of Edinburgh Massimo Tarsia, NHS Lothian

47. Coherence as a Generalized Conditioned Reinforcer

Subtopic: Rule Governed Behavior

MONDAY

Desiree Carnathan, B.A., University of Mississippi Michael J. Bordieri, M.S., University of Mississippi Karen Kate Kellum, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi

Supervision, Training, and Dissemination

48. Preliminary study of therapist training for acceptance and commitment therapy (ACT) therapists in Japan Subtopic: Anxiety

Takashi Mitamura, Ph.D., Department of Psychology, Doshisha University Takashi Muto, Ph.D., Department of Psychology, Doshisha University

49. Assessing the effectiveness of ACT training in Sierra Leone

Subtopic: Low and Middle Countries Ross White, Ph.D., DClinPsy, University of Glasgow Corinna Stewart, University of Glasgow Beate Ebert, commit + act

50. A Training Program in Third-Generation Psychotherapy based on Contextual Behavioral Science

Subtopic: dissemination, training Lic. Juan Pablo Coletti, Fundacion Foro

Theoretical and Philosophical Foundations

51. The Impact of Acceptance, Suppression, and Cognitive Reappraisal of Emotion on Hunger, Desire, Craving, and Eating Behavior

Subtopic: Obesity and eating behavior

Jill Stoddard, Ph.D, Alliant International University, CSPP Jacqueline W. Israel, B.A., Alliant International University,

CSPP

Niloo Afari, Ph.D., University of California, San Diego

52. Characteristics of behavioral variability in experiential avoidance students.

Subtopic: AAQ

- Aiko Oya, Graduate School of Psychology, Doshisha University
- Kazuha Nakase, Undergraduate School of Psychology, Doshisha University
- Takashi Muto, Department of Psychology, Doshisha University

53. Experiential Avoidance Relates to Sensitivity to Punishment and High Risk Driving Behavior

Subtopic: High Risk Driving Anthi Loutsiou, Univeristy of Cyprus Georgia Panayiotou, Univeristy of Cyprus

54. Acceptance and Mindfulness-Based Processes Fully Mediate the Relation between Worry and Quality of Life: A Multiple Mediation Analysis

Subtopic: Chronic Worry

Matthew R. Donati, University at Albany, SUNY Kristin N. Herzberg, University at Albany, SUNY Samantha Callahan, University at Albany, SUNY Krystal N. Cox, University at Albany, SUNY Eric Petrone, University at Albany, SUNY John P. Forsyth, University at Albany, SUNY

EXPO

55. Contextual behavioural science needs you to become a trainer!

Subtopic: Training (ACT Peer reviewed trainer process) David Gillanders, Chair ACBS Training Committee, University of Edinburgh

56. MSc Global Mental Health, University of Glasgow

Subtopic: Recruiting Students

Ross White, Ph.D., DClinPsy, University of Glasgow

57. Doctoral Programs in Psychology at the University of Mississippi

Subtopic: Recruiting Students

Solomon Kurz, B.A., University of Mississippi Karen Kate Kellum, Ph.D., University of Mississippi Kelly G. Wilson, University of Mississippi

58. University of Louisiana at Lafayette Master's Program in Psychology

Subtopic: Recruitment

Emily K. Sandoz, Ph.D., University of Louisiana at Lafayette Matthieu Villatte, Ph.D., University of Louisiana at Lafayette David R. Perkins, Ph.D., University of Louisiana at Lafayette

59. ACBS - SIG for the Advancement of Contextual Education Science

Subtopic: SIG Information/Recruiting

ACBS SIG for the Advancement of Contextual Education Science, ACBS

60. FoxyLearning: Awesome Online Learning for Contextual Behavioral Science

Subtopic: Training

Eric J. Fox, Ph.D., FoxyLearning LLC Daniel J. Moran, Ph.D., FoxyLearning LLC

61. Postdoctoral Fellowship at the University of Texas MD Anderson Cancer Center, Department of Behavioral Science

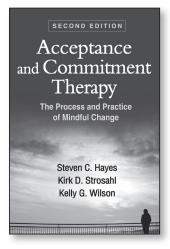
Subtopic: Recruiting

Janice A. Blalock, Ph.D., University of Texas MD Anderson Cancer Center

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Acceptance and Commitment Therapy SECOND EDITION

The Process and Practice of Mindful Change

Steven C. Hayes, PhD, University of Nevada, Reno

Kirk D. Strosahl, PhD, Central Washington Family Medicine, Yakima

Kelly G. Wilson, PhD, University of Mississippi

"A 'must read' for everyone in the field of psychotherapy or behavior therapy....One of those rare books grounded in both creative, innovative theory and solid data." —David H. Barlow, PhD

"A landmark contribution. The authors offer a sophisticated and wise approach to human transformation, one that has been validated by clinical research and honed by a wide range of clinical applications." **—Tara Brach, PhD, author of** *Radical Acceptance*

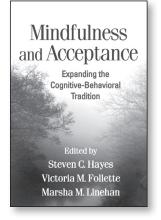
Since the original publication of this seminal work, acceptance and commitment therapy (ACT) has come into its own as a widely practiced approach to helping people change. This book provides the definitive statement of ACT—from conceptual and empirical foundations to clinical techniques—written by its originators. ACT is based on the idea that psychological rigidity is a root cause of a wide range of clinical problems. The authors describe effective, innovative ways to cultivate psychological flexibility by detecting and targeting six key processes: defusion, acceptance, attention to the present moment, self-awareness, values, and committed action. Sample therapeutic exercises and patient—therapist dialogues are integrated throughout.

NEW TO THIS EDITION

- Reflects tremendous advances in ACT clinical applications, theory building, and research.
- Psychological flexibility is now the central organizing focus.
- Expanded coverage of mindfulness, the therapeutic relationship, relational learning, and case formulation.
- Restructured to be more clinician friendly and accessible; focuses on the moment-bymoment process of therapy.

Also from Steven C. Hayes

New in Paper



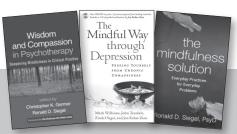
Mindfulness and Acceptance

Expanding the Cognitive-Behavioral Tradition Edited by Steven C. Hayes, PhD Victoria M. Follette, PhD, University of Nevada, Reno

Marsha M. Linehan, PhD, University of Washington, Seattle

"Addresses a new set of behavior therapies developed over ten years. The book covers nontraditional themes such as mindfulness, acceptance, values, spirituality, being in a relationship, focusing on the present moment, and emotional deepening....Novice readers can learn some basic techniques that are part of the ACT model....The book includes chapters for using ACT for specific purposes.... I enjoyed reading the book. I recommend it." —*Milton H. Erickson Foundation Newsletter*

2011, Paperback (© 2004), 319 Pages, ISBN 978-1-60918-989-1, \$25.00 SPECIAL DISCOUNT PRICE: \$20.00 © E-book Available



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Program Detail • Tuesday • July 24

Tuesday Morning 7:00am

52. Integrating Aikido and ACT for Treating PTSD and Other Painful Private Experiences WORKSHOP (7:00-7:50am)

Components: *Experiential exercises, Didactic presentation*

Categories: Clin. Interven. & Interests, PTSD Target Audience: Beg., Interm. Location: Ballroom A

Frank J. Gallo, Ph.D., Brattleboro Retreat and Western New England University William J. Matthews, Ph.D., Brattleboro Retreat and University of Massachusetts Amherst

Aikido is a traditional Japanese martial art that employs several processes for meaningful living including centering, relaxing, keeping weight underside, and extending energy.

Resembling Acceptance and Commitment Therapy (ACT), Aikido emphasizes a daily practice of living moment-to-moment, noticing painful private experiences that show up, entering and being with them instead of avoiding, making contact and having compassion for them instead of hurting, letting them go and doing what matters instead of fighting. In this experiential workshop, participants integrate Aikido and ACT for treating posttraumatic stress disorder (PTSD) and other painful private experiences through sensorimotor, cognitive, and emotional processing involving becoming willing to have pain show up, giving it form, motion, and sound, and relating to it differently, becoming free to engage personal values. Flexible, centered breathing practice rounds-out the experiential training, which includes a didactic presentation of a nine-session treatment protocol for uniformed service professionals or others suffering with PTSD.

Educational Objectives:

TUESDAV

- 1. Identify the components of a protocol that integrates Aikido and ACT for the treatment of PTSD and other painful private experiences.
- Demonstrate experiential exercises that involve sensorimotor, cognitive, and emotional processing of trauma memories and other painful private experiences.
- 3. Implement sensorimotor exposure-based interventions adapted for a mindfulness and acceptance-based model for treating PTSD and other painful private experiences.

53. ACT and Yoga: Using yoga to optimize your clinical practice

WORKSHOP (7:00-7:50am)

Components: *Conceptual analysis, Literature review, Experiential exercises, Role play*

<u>Categories: Performance-enhancing interventions,</u> <u>Clin. Interven. & Interests, Therapist Burn-out</u>

Target Audience: Beg.

Location: Ballroom H

Colleen Ehrnstrom, Ph.D., Department of Veterans Affairs

Kate Morrissey, LCSW, Advantage Behavioral Health Systems, and Rubber Soul Yoga, Athens GA

There is a strong consensus in our community that exercises and skills that build awareness and focus in the body have a significant influence on the mind. The research on body-focused skill sets (MBSR, yoga, biofeedback) is growing, as is the mainstream attention to such skills. This workshop will review the latest research on yoga and the synergy with the clinical practice of ACT. It will provide a theoretical model of the mind-body connection via yoga. The majority of the workshop will focus on experiential exercises designed to teach participants how to learn and practice breath and yoga exercises. These exercises will be taught in a non-competitive, supportive environment. Exercises will involve learning yoga breath, focus, and body postures. Techniques will be taught by an internationallyrenowned certified yoga instructor who also has a master's degree in counseling, training in Reiki, and a plethora of training and experience with coaching. The exercises will be taught from both the perspective of the therapist and the client, with recommendations of when to incorporate yoga and yoga-inspired exercises into your clinical work. Specific focus will be on how these exercises support and enhance the ACT hexaflex.

Educational Objectives:

- 1. Utilize the synergy between yoga and psychotherapy, based on the most recent research, in your practice.
- 2. Discuss how yoga can support and optimize the ACT hexaflex.
- Recreate a minimum of 3 postures/exercises for both practitioner and client that can be utlized to support treatment.

Tuesday Morning 8:00am

F. MAC (Mid-Atlantic Chapter) Meeting CHAPTER/SIG MEETING (8:00-8:50am)

Location: Ballroom B

Mary Atwater, Private Practice

Everyone interested in getting involved with the Mid-Atlantic chapter is welcome and encouraged to attend!

G. Social Work ACT SIG Meeting CHAPTER/SIG MEETING (8:00-8:50am)

Location: Ballroom C

Matthew Boone, Cornell University Julie Hamilton, LMSW, ACSW, CAADC

This will be the first meeting of the ACBS Social Work Special Interest Group. All are welcome, including those from outside the social work profession. The SIG will decide on logistical concerns like electing officers for the future, but the majority of time will be devoted to dreaming about what the SIG can accomplish inside ACBS and in the broader mental health community.

H. Stigma SIG Meeting CHAPTER/SIG MEETING (8:00-8:50am)

Location: Ballroom G

Jason Luoma, Portland Psychotherapy Clinic, Research, & Training Center

Matthew Skinta, UCSF AIDS Health Project

The Stigma Special Interest Group supports research, education, and clinical practice on stigma. For example, areas to be address include (but are not limited to) researching psychological mechanisms related to stigma, devising ways to intervene with various stigmatized populations (e.g., individuals who struggle with mental illness, members of the HIV/AIDS community, GLBT individuals, individuals who struggle with obesity), and educating the community (college, psychological, clincial, etc.) about stigma. For information about the SIG or how to join, go to:

http://contextualpsychology.org/stigma_sig

All are welcome at this meeting, whether a member of the SIG or not. We will be discussing whatever issues that members are interested in sharing and providing an update on our current activities as they relate to stigma. The goal is to facilitate collaboration and information sharing in order to support the mission of the SIG. From our last meeting, at least one research collaboration was formed that has resulted in data collection and a paper to presented at this conference.

I. Research in Clinical Practice SIG CHAPTER/SIG MEETING (8:00-8:50am)

Location: Brookside B

Jennifer Villatte, University of Nevada, Reno Kelly Koerner, Evidence-Based Practice Institute

Please join us for the annual meeting of the Research in Clinical Practice Collaborative SIG. The Collaborative is designed to bridge the gap between clinical practice and applied science. Our mission is to help members gather data that informs clinical decision making and that contributes to the clinical evidence base. Members of this SIG contribute their unique expertise, clinical experience, research questions, and skills in order to facilitate practical implementation of research practices, monitor treatment progress, implement evidence-basedpractices, and generate practice-based-evidence. During this meeting, we will discuss progress on collaborative projects and plan initiatives for the coming year. All are welcome.

J. ACBSBeNe Chapter Meeting

CHAPTER/SIG MEETING (8:00-8:50am) Location: Glen Echo

Jacqueline A-Tjak, PsyQ, outpatient facility

For Belgian and Dutch World Conference participants we want to give opportunity to meet with other Dutch speaking participants. It is meanly a social gathering, although it is possible to ask questions to the ACBS BeNe boardmembers who will be there also. All are welcome.

K. Colorado (soon to be Rocky Mountain) Chapter ACBS Meeting CHAPTER/SIG MEETING (8:00-8:50am)

Location: Linden Oak

Brooks Witter, M.A., LPC, Private Practice & Living Well Transitions

A meeting of members and interested prospective members seeking to develop the practice and research of contextual behavioral science in the Colorado/ Rocky Mountain region. Our mission is focused on fostering development of functional contextual behavioral practice, science, and community service within our region.

L. Deutschsprachige ACBSIer und ACTivisten - SIG CHAPTER/SIG MEETING (8:00-8:50am)

Location: Timberlawn

Claudia Drossel, Ph.D., VA South Central Mental Illness Research, Education & Clinical Ctr

Consider this police officer's exchange with a driver: "There's been an accident ahead, Sir. I'm afraid the road has been closed, and you have to turn around." The driver nods agreeably, "Okay." When the passenger asks, "What did he say," the driver answers, "We must turn around." Even if we are not thinking of two languages, this example adapted from Hervey et al., 1995, easily illustrates what is meant by "lost in translation." The passenger does not have access to context (the accident) and function (the politeness and formality of the officer when making the request).

Context and function are the keystones (or "A" and "O" in German) for the use of metaphors in ACT and for language in general. More important than the metaphor itself, or the literal content of language, is its impact on behavior. The German-speaking ACBS SIG is a meet-and-greet for conference attendees interested in understanding the behavioral sciences generally and ACT specifically within a German language context. In anderen Worten: Ein bisschen Zeit zum persönlichen Kennenlernen und Austausch von Erfahrungen/Informationen rund um die kontextuellen Verhaltenswissenschaften und ACT im deutschen Sprachraum.

Tuesday Morning 9:00am

54. Using FAP to Train ACT

WORKSHOP (9:00-Noon) Components: *Experiential exercises, Didactic presentation, Role play* <u>Categories: Superv., Train. & Dissem., Clin. Interven.</u> <u>& Interests, FAP and ACT Supervision and</u>

<u>Consultation</u>

Target Audience: Interm. Location: Grand Ballroom

Joanne Steinwachs MSW, Private Practice, Denver Mavis Tsai, Ph.D., University of Washington One of the powerful tools in Functional Analytic Psychotherapy (FAP) is the focus on the clinically relevant behaviors of both the client and the therapist. In this workshop we will show how to use FAPs focus on clinically relevant behaviors (CRBs) in a supervision, consultation or training setting. This focus on CRBs can shape trainee behavior quickly and effectively. Mavis Tsai, co-developer of FAP will

present the FAP model, then both presenters will demonstrate how to apply FAP tools to the task of training therapists to discern flexible and inflexible behavioral repertoires in themselves, their peers and their clients.

Educational Objectives:

1. List the Functional Analytic Psychotherapy and Acceptance and Commitment Therapy modes.

2. Practice how to apply both models in a supervisory or training setting.

3. Discriminate flexible and inflexible behavioral repertoires in themselves and their peers and give positive reinforcement for flexible approach behaviors.

55. Assessing and Training Derived Relational Responding Skills

SYMPOSIUM (9:00-10:30am)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Edu. settings, RFT, Children, Autism Target Audience: Interm.

Location: Ballroom A

Chair: John McElwee, VB3

Discussant: Timothy Weil, Ph.D., University of South Florida

- Testing and Developing a Protocol for Training and Assessment of Relational Precursors and Abilities Laura Moran, National University of Ireland, Galway Ian Stewart, Ph.D., National University of Ireland, Galway
- The Training and Assessment of Relational Precursors and Abilities (TARPA): A Preliminary Analysis with Typically Developing Children in Japan Naoko Kishita, Doshisha University Tomu Ohtsuki, Waseda University Ian Stewart, National University of Ireland, Galway Takashi Muto, Doshisha University
- Teaching for Generativity: Training Derived Relational Responding Abilities With Children With Autism

Siri Ming, National University of Ireland, Galway Ian Stewart, National University of Ireland, Galway

The emergence of novel, untaught responding is increasingly recognized as a critical progress marker in language programs for children with autistic spectrum disorders (ASD). In research conducted over the last several decades, stimulus equivalence and other derived relational responding paradigms have been used to efficiently expand a variety of language and other educationally-relevant skills by facilitating generative verbal behavior. However, an applied technology based on this research is still just developing. In order to effectively incorporate a focus on derived relational responding into programs for children with ASD, practitioners need tools to assess derived relational responding skills, train such skills if they are absent and use a student's existing relational responding repertoire to expand other skills. In this symposium, we examine recent applied research on assessment and training of derived relational responding skills with children with ASD. Papers 1 and 2 present work focusing on the assessment of derived equivalence relations in visual and auditory modalities, while Paper 3 presents work on training derived relational responding skills when they are absent.

Educational Objectives:

- 1. Describe the features of the TARPA as an assessment tool for derived relational responding
- 2. Describe the results of research evaluating the TARPA with typically developing children and children with autism
- Write a protocol for training early relational responding skills when they are absent for children with autism

56. Live BOLDLY, become a mindful warrior: Experiential ACT for youth workshop WORKSHOP (9:00-Noon)

Components: *Experiential exercises, Didactic presentation, Role play*

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Adolescents, Clinical and educational settings

Target Audience: Interm., Adv.

Location: Ballroom B

Louise Hayes, Ph.D., The University of Melbourne Joseph Ciarrochi, Ph.D., University of Western Sydney

Joseph and Louise are leaders in ACT for youth and bring to this workshop many years of working in dynamic and creative ways with adolescents and young adults. In this workshop we will introduce you to our newest creation, The Mindful Warrior. What is a mindful warrior? Well it isn't someone who runs into battle; it is someone who has learned to act with energy and courage and pursue what they care about. Our work will help you learn to do just that, experience ACT with energy and courage so that you can help young people to move into life with strength - the strength of a warrior. We will include exercises from the forthcoming book, Get Out of Your Mind and Into Your Life for Teens and newer exercises too. This workshop will focus on helping ACT practitioners get into the space of adolescence, letting go of our adult cognitive emphasis and focusing instead on doing ACT and being with young people. Practitioners will gain knowledge of how to use and create ACT exercises that they can use with their adolescent clients in schools, clinics and community settings. Our aim is to help you bring vitality and fun into your work with youth.

Educational Objectives:

1. Describe adolescent specific issues and how to adapt ACT to suit their needs.

- 2. Practice values based experiential activities for adolescents, and apply this knowledge to roleplayed interactions.
- 3. Practice mindfulness for adolescents, and apply this knowledge through exercises practiced in the workshop.
- 57. Saving the World Through Contextual Behavior Science: An Alternative to the Psychopharmacology Epidemic PANEL (9:00-10:30am)

Components: *Conceptual analysis, Didactic presentation*

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Treatment Development

Target Audience: Beg., Interm., Adv. Location: Ballroom C

Chair: Michael Bordieri, M.S., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi Robert Whitaker, Science Journalist Anthony Biglan, Ph.D., Oregon Research Institute Steven Hayes, Ph.D., University of Nevada, Reno

Over the past half-century the number of individuals diagnosed with mental illness has skyrocketed. Psychopharmacological treatments have gained prominence as the most common mental health intervention strategy and a multibillion dollar industry has arisen to serve this growing market. However, despite billions spent on marketing, the negative societal impact of mental illness continues to increase at an alarming rate. Panelists will discuss this alarming reality and will explore the intersections of globalization, big pharmaceutical corporate interests, and the medicalization of the human condition. After exploring the perfect storm of factors contributing to the current state of affairs, panelists will highlight an alternative treatment model driven by contextual behavior science with particular attention given to preventative and community interventions based on the psychological flexibility model.

Educational Objectives:

- 1. List and describe the major factors contributing to the dominance of psychopharmacological treatments.
- 2. Describe the scientific and ethical concerns related to the widespread use of psychotropic medication.
- 3. Discuss the core features of a CBS driven alternative to the medical model.
- 58. Contextualism, Realism, and Parsimony SYMPOSIUM (9:00-10:30am)

Components: Conceptual Analysis

<u>Categories: Clin. Interven. & Interests, Theory &</u> <u>Philo., Prof. Dev., RFT, Related FC approaches,</u> <u>Behavioural functional ananlysis, relationship</u> <u>between theory and practice, behaviorism, realism</u> *Target Audience: Beg., Interm.*

Location: Ballroom F

Chair: Kate Kellum, Ph.D., University of Mississippi Discussant: William C. Follette, Ph.D., University of Nevada

• Remembering Occam: Is an analysis of verbal behaviour always required?

David M Gresswell, University of Lincoln, Lincoln, UK Aidan J P Hart, University of Lincoln, Lincoln, UK

- The relationship between behavior and cognition: some theoretheical and practical issues Luis René Bautista Castro, M.A., Universidad Nacional de Colombia
- Getting Real about Contextualism N. Joseph Rodrigues, Ph.D., Indep. Consultant

This symposium explores a variety of theoretical and conceptual issues. In the first paper, the authors explore whether an emphasis on verbal behavior over-complicates functional analysis of clinical behavior and potentially violates guiding principles. The second paper explores potential conceptual problems of cognitive-behavior approaches to behavior therapy with an emphasis on the limited utility of distinguishing between behavior and cognition. The final paper suggests that functional contextualism and scientific realism are not only compatible but are wedded at a deeper level.

TUESDA

Educational Objectives:

- 1. List the traditional challenges to scientific realism.
- 2. Compare and contrast ACT/RFT analyses with Skinnerian analyses.
- 3. Describe scientific theorizing and the its relation to events from the perspective of relational frame theory.

59. Finding Life Beyond Trauma: What ACT Can Offer Therapists Doing Trauma Work WORKSHOP (9:00-Noon)

Components: *Experiential exercises, Didactic presentation, Role play*

Categories: Prof. Dev., Performance-enhancing, Trauma

Target Audience: Beg., Interm.

Location: Ballroom G

Victoria Follette, Ph.D., University of Nevada, Reno Jacqueline Pistorello, Ph.D., University of Nevada, Reno Robyn Walser, Ph.D., National Center for PTSD

Acceptance and Commitment Therapy (ACT) is not only applicable to clients whose lives have been impacted by trauma, but also to the therapists who treat them. Much has been written about vicarious traumatization or the extension of the trauma effects to the therapist whose role is to bear witness to the client's pain. ACT explains that our minds are easily programmable and that history is only additive, not subtractive, and therefore therapists, like their clients, carry with them images, words, and emotions that can be disturbing. This workshop aims to help therapists become more effective in their work by : 1) teaching tools to use while treating trauma survivors; 2) reviewing how ACT processes can be applicable to the therapist as well as the client; and 3) conducting role-plays and experiential exercises to demonstrate ways for therapists to carry their own history while still connecting to their trauma survivor clients.

Educational Objectives:

- 1. Describe the theoretical underpinnings of ACT as it applies to trauma treatment providers.
- 2. Describe in-session moves that may reduce therapist effectiveness in treating trauma survivors.
- 3. Conduct role-plays and experiential exercises that promote psychological flexibility within the therapist treating trauma.

60. ACT With Challenging Clients WORKSHOP (9:00-Noon) Components: *Experiential exercises, Didactic*

Components: Experiential exercises, Didactic presentation, Role play Categories: Clin. Interven. & Interests, Multiproblem clients

Target Audience: Interm., Adv.

Location: Ballroom H

TUESDA

Kirk Strosahl, Ph.D., Central Washington Family Medicine

Difficult and challenging clients engage in communication practices (help-seeking, help rejecting; blaming; threatening) and behaviors (selfharm, substance abuse, impulsive actions) that push the buttons of even the most experienced therapists. This workshop will expose attendees to an ACT framework, both in principle and practice, for how to address such issues. A brief didactic lecture will explain what makes difficult patients "difficult", both in terms of client and therapist issues. The bulk of the workshop will involve live role playing to demonstrate how to respond with positive impact to difficult communications and behaviors. An experiential exercise will also be used to help attendees develop their own ACT consistent responses to common challenging communications.

Educational Objectives:

- 1. List four central characteristics of difficult clients.
- 2. Discuss verbal behaviors on both sides that create difficult interactions between clients and therapists.
- 3. Demonstrate various ways to respond effectively to difficult and/or challenging client behaviors.
- 61. The Nine Mistakes New ACT Therapists Make and How to Avoid Them: (Yes, We Said "Avoid!")

PANEL (9:00-10:30am)

Components: Experiential exercises, Didactic presentation, Case presentation, Role play

Categories: Superv., Train. & Dissem., Clin. Interven. & Interests, Prof. Dev., Theory & Philo.,

<u>Supervision</u>

Target Audience: Beg., Interm.

Location: Amphitheater

Chair: D.J. Moran, Ph.D., BCBA-D, Pickslyde Consulting D.J. Moran, Ph.D., BCBA-D, Pickslyde Consulting Patty Bach, Ph.D., Illinois Institute of Technology Martin Brock, Institute of Mental Health/ Nottinghamshire HealthCare Trust

Hank Robb, Ph.D., Private Practice

You can read the books, participate in workshops, and join in the listserve discussions in order to learn how to do ACT. But those events don't typically tell you

how NOT to do ACT (Yes, we said "but"). ACT supervision is an important part of becoming more proficient at being present with your clients and applying solid case conceptualization to the clinically relevant behaviors. In this session, therapists with experience supervising fledgling ACT practitioners talk about common blind spots and misunderstandings they've observed in their supervisees' ACT work. We will discuss these concerns and workable ways to fix them.

Educational Objectives:

- 1. Implement solid cases conceptualization skills using the Hexaflex model.
- Discriminate when to use ACT language for clinical gains and when to use language more practically and colloquially.
- Clarify the integration of behavior therapy objectives and when cognitive-behavioral therapy objectives are inconsistent with the ACT model.

62. Stigma, Self-Stigma, and Psychological Flexibility

SYMPOSIUM (9:00-10:30am)

Components: Original data, Didactic presentation, Case presentation

<u>Categories: Clin. Interven. & Interests, Edu. settings,</u> <u>Stigma, Mental Health, HIV, Compassion-based</u> <u>therapies</u>

Target Audience: Beg., Interm., Adv. Location: Brookside A

Chair: Matthew D. Skinta, Ph.D., University of California, San Francisco

- Discussant: Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center
- Examining associations among factor-analytically derived components of mental health stigma, distress, and psychological flexibility Akihiko Masuda, Ph.D., Georgia State University Robert D. Latzman, Ph.D., Georgia State University
- Applying a psychological flexibility model to reducing mental health stigma within a classroom setting

Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Christeine Terry, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center Thereca Claser, Ph.D., Normandale Community College

- Theresa Glaser, Ph.D., Normandale Community College
- The Effect of Acceptance Instructions on Behavior Toward Individuals with Serious Illness Jennifer Gregg, Ph.D., San Jose State University Ruthie Ayzenberg, Santa Clara University
- A Pilot Group Intervention of Acceptance & Commitment Therapy for the Reduction of HIV-Stigma
 - Matthew D. Skinta, Ph.D., University of California, San Francisco

Gregory Wells, Ph.D., Private Practice

Contextual behavioral approaches are at the forefront of increasing our understanding of stigma and selfstigma, and have led to significant advances in

interventions intended to mitigate stigma's effect on both providers and stigmatized groups. In this symposia, data will be presented on the relationship between stigma and psychological flexibility in relation to both mental illness and HIV/AIDS, as well as interventions that target different aspects of stigma. Masuda & Latzman's work illustrates underlying aspects of mental illness stigma on the part of the stigmatizer, including factors that contribute to stigmatizer distress. LeJeune, Luoma, Terry, & Glaser have assessed a multi-week course intended to reduce stigmatizing views regarding mental illness. Gregg & Ayzenberg will present work on an acceptance intervention targeting stigma toward persons living with HIV/AIDS; finally, Skinta & Wells have conducted a pilot intervention that targeted selfstigma experienced by men living with HIV.

Educational Objectives:

- 1. Describe the role of psychological flexibility in reducing stigma.
- 2. Compare the differences in interventions for stigma vs. self-stigma.
- 3. Explain the common contextual approaches for understanding stigma and self-stigma.

63. RFT in Education

SYMPOSIUM (9:00-10:30am)

Components: Conceptual Analysis, Original data

<u>Categories: Clin. Interven. & Interests, Performanceenhancing, Edu. settings, RFT, Derived Relational Responding, Verbal Higher Order Operants, Textual Responding, Reading, Children Target Audience: Beg., Interm.</u>

Location: Brookside B

Chair: Jeffrey Oliver, University of South Florida Discussant: Nicholas Berens, Ph.D., Fit Learning

- Derived Relational Responding for verbal impairment in typical development kids: a Multiple Exemplar Training to promote "Basic" Frames
 - Roberto Cattivelli, Ph.D., University of Parma, Istituto Ospedaliero di Sospiro
 - Federica Berardo, University of Parma, Learning Centre TICE
 - Sara Andolfi, M.A. University of Parma, Learning Centre TICE
 - Francesca Cavallini, Ph.D., University of Parma, Learning Centre TICT
 - Martina Nani, M.A., University of Parma, Learning Centre TICE
 - Silvia Perini, Ph.D., University of Parma

 Derived Relational Responding for Reading: Expanding reading function with Multiple Exemplars Training and Fluency Based Instruction

- Roberto Cattivelli, Ph.D., University of Parma, Istituto Ospedaliero di Sospiro
- Francesca Cavallini, University of Parma, Learning Centre TICE
- Sara Andolfi, M.A. University of Parma, Learning Centre TICE
- Frederica Berardo, Ph.D., University of Parma, Learning Centre TICT
- Chiara Prampolini, M.A., University of Parma, Learning Centre TICE
- Silvia Perini, Ph.D., University of Parma

- Multiple Exemplar Instruction to Establish Temporal Relations: Relational Frame Theory in the First Grade Classroom
 - Clarissa S. Barnes, M.S., BCBA, Southern Illinois University
 - Ruth Anne Rehfeldt, Ph.D., BCBA-D, Southern Illinois University

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James R. Mellor, B.S., Southern Illinois University Lilith Reuter-Yuill, Southern Illinois University

Learning and development of verbal behavior may be conceptualized from an RFT perspective. Multiple exemplar training in relational framing presents many potential benefits. Scholars present data supporting the utility of training in varied relational frames for production and comprehension of language, discuss basic processes within reading comprehension, and exhibit data supporting RFT protocol use for temporal frame formation among academically at-risk youth. Derived relational responding appears promising in educational applications.

Educational Objectives:

- 1. Design an academic intervention utilizing multiple exemplar instruction to teach relevant educational material in an school setting.
- 2. Describe how relational frame theory can be applied to enhance regular education curricula.
- 3. Describe procedures and outcomes of a training for promotions of higher verbal operants for kids with poor verbal skills.

64. Internet-Based Delivery of ACT: Legal, Ethical, and Clinical Developments SYMPOSIUM (9:00-10:30am)

Components: Original data

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Remote, Internet-mediated</u> <u>interventions</u>

Target Audience: Beg.

Location: Forest Glen

Chair: James D. Herbert, Ph.D., Drexel University Discussant: Brandon Gaudiano, Ph.D., Butler Hospital and Brown University

 Acceptance-Based Behavior Therapy for Social Anxiety Disorder Using Videoconferencing and Virtual Environments

Erica K. Yuen, Ph.D., Medical University of South Carolina, Ralph H. Johnson Veterans Administration Medical Center, and Drexel University James D. Herbert, Ph.D., Drexel University Evan M. Forman, Ph.D., Drexel University Elizabeth M. Goetter, M.S., Drexel University, and University of California, San Diego Adrienne S. Juarascio, Drexel University Stephanie J. Rabin Kathleen B. McGrath

• Acceptance and Commitment Therapy in Combination with Exposure and Ritual Prevention for Obsessive Compulsive Disorder via Videoconference

Elizabeth M. Goetter, M.S., Drexel University, and University of California, San Diego James D. Herbert, Ph.D., Drexel University Evan M. Forman, Ph.D., Drexel University Erica K. Yuen, Ph.D., Medical University of South Carolina, Ralph H. Johnson Veterans Administration Medical Center, and Drexel University Marina Gershkovich, Drexel University Stephanie Goldstein, Drexel University

• Developing ACT as a Self-Help Modular Online Intervention for Veterans of the Iraq and Afghanistan Wars: Overview, Challenges, and

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Recommendations John P. Forsyth, Ph.D., University at Albany, the

State University of New York

Chris Berghoff, University at Albany, the State University of New York

Edward J[´]. Hickling, University at Albany, the State University of New York

Sean C. Sheppard, University at Albany, the State University of New York

Amanda Russo, University at Albany, the State University of New York Kevin E. Kip,

The use of technology to provide remote psychological assessment and intervention services is arowing rapidly. Internet-mediated interventions have the potential to increase access to high quality, evidence-based psychological services, including ACT. However, these technologies present a variety of clinical, ethical, legal, and logistical challenges. We will explore these issues from the perspective of clinical scientists working at the forefront of this area. James Herbert will introduce the symposium and will briefly present data from a recent survey of all 50 U.S. state psychology licensure boards on the legality of remote treatment across state lines. Next, Erica Yuen and colleagues will present two projects involving ACT-based treatment for social anxiety disorder using the virtual world platform Second Life and the videoconferencing program Skype. Elizabeth Goetter and colleagues will then present the results of a pilot study of remote treatment of OCD via Skype. This will be followed by a presentation by John Forsyth and colleagues on a new ACT Internet-based modular intervention for OIF/OEF veterans. Finally, Brandon Gaudiano will discuss and integrate the various presentations.

Educational Objectives:

- Appreciate both the promise and complexities of delivering treatment via Internet-mediated formats.
- 2. Examine the legal status of inter-jurisdictional practice in the US, and some of the key ethical issues raised by remote delivery of psychological services.
- Describe some of the latest research on the application of ACT in remote treatment formats, particularly for various mood and anxiety disorders.

65. The Role of ACT in Battling the Obesity Epidemic: Current Research and Future Directions

SYMPOSIUM (9:00-10:30am)

Components: Conceptual analysis, Original data Categories: Clin. Interven. & Interests, Beh. med., Obesity, Obesity-Related Stigma

Target Audience: Interm. Location: Glen Echo

Chair: Lindsay M. Martin, M.A., Drexel University Discussant: Meghan L. Butryn, Ph.D., Drexel University

• Outcomes from the Mind Your Health Project: A Randomized Controlled Trial Comparing Standard Behavioral and Acceptance-based Behavioral Interventions for Obesity

Evan M. Forman, Ph.D., Drexel University Meghan L. Butryn, Ph.D., Drexel University Lauren Bradley, Drexel University Jena Shaw, M.S., Drexel University Mackenzie Kelly, Drexel University

- Comparing thought suppression and acceptance as coping techniques for food cravings Nic Hooper, Ph.D., Middle East Technical University, Northern Cyprus Campus
 Emily K. Sandoz, Ph.D., University of Louisiana Lafayette Louise McHugh, University College Dublin
- ACT and Obesity-Related Stigma: A Different Perspective

Ayelet Kalter, RD., MSc, Founder & Director of the Israel Eating Dialog Study & Therapy Center

In an environment plaqued by highly caloric foods and sedentary-lifestyles, it has become increasingly difficult to motivate people to alter their eating behavior and increase physical activity. While traditional behavior therapy is the first-line treatment for obesity, its long-term outcomes are poor. One possible explanation of the limited efficacy of extant behavioral approaches is a failure to fully appreciate certain factors undermining poor eating and physical activity choices, including experiential avoidance, cognitive fusion, and lack of values clarification. The present symposium explores the complexity of the obesity epidemic, including obesity-related stigma, from an ACT perspective. Recent results on the usefulness of ACT processes for weight loss and maintenance are reported.

Educational Objectives:

- 1. Conceptualize problematic eating behavior from a contextual behavioral framework.
- Recognize the potential value of ACT in understanding and treating obesity and obesityrelated stigma.
- 3. Report on the results of recent studies using ACT for obesity and weight management.

66. Clinical Applications of ACT with Youth: A Review of Treatment Outcomes for ACT Across Various Populations SYMPOSIUM (9:00-10:30am)

Components: Literature review, Original data, Case presentation

Categories: Clin. Interven. & Interests, Children and Adolescents

Target Audience: Beg., Interm. Location: Linden Oak

Chair: Kerry K. Prout, B.A., Utah State University Discussant: Amy Murrell, University of North Texas

• Preliminary Data from a Pilot Study Utilizing ACT-Enhanced BPT

Clinton E. Field, Ph.D., Utah State University

Andrew Armstrong, Ph.D., Utah State University Jessica Malmberg, Ed.S., Utah State University Kerry K. Prout, B.A., Utah State University Ryan Greene, M.S., Utah State University

- Preliminary Data from a Pilot Study on Treatment Outcomes of Acceptance and Commitment Therapy with Type 1 Pediatric Diabetes Kerry K. Prout, B.A., Utah State University Clinton E. Field, Ph.D., Utah State University
- Parent-Facilitated Acceptance and Commitment Therapy for Pediatrics with OCD Sarah A. Potts, B.A., Utah State University Jennifer Yardley, Ed.S., Utah State University Kate L. Morrison, B.A., Utah State University Clinton E. Field, Ph.D., Utah State University

Empirical investigation into the use of behavior and cognitive behavioral interventions in a variety of clinical child populations has been investigated. Specifically, these strategies have been evaluated in intervening with youth with pediatric diabetes, pediatric OCD, and oppositional and defiance problems. The use of Acceptance and Commitment Therapy (ACT) has not been largely evaluated with the identified populations. ACT was used in a three multiple baseline small sample treatment outcome studies with youth populations. The current symposia will examine the use of ACT as intervention with children and adolescents, as well as their parents. Treatment outcomes will be reviewed for each research study. Limitations and impediments to the current research projects will be discussed. Additionally, presenters will describe direction for future research in the area of ACT with youth populations.

Educational Objectives:

- 1. Integrate ACT processes with BPT in the context of clinical work with parents.
- 2. Describe treatment outcomes of ACT with pediatric type 1 diabetes adherence and diseaserelated acceptance.
- 3. Discuss latest research on ACT with pediatric OCD and review future treatment implications.

67. Health and Wellness Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (9:00-10:30am)

Components: Prevention and Community-Based Interventions, Organizational behavior management, Clinical Interventions and Interests, Behavioral medicine, Educational settings, Theoretical and philosophical foundations, Functional contextual neuroscience and pharmacology

Categories: Medical Students, Integrative Holistic Medicine, Anxiety (i.e., GAD) in a primary care setting

Target Audience: Beg., Interm., Adv. Location: Oakley

- Cultivating wellness in medical students Lilian Dindo, Ph.D., University of Iowa College of Medicine, Dept of Psychiatry
 - Studies have shown that physicians who have healthy personal habits may be more effective in counseling their patients. I would like to develop an ACT-based program for all 3rd and 4th year medical students. I

have chosen the 3rd and 4th years of medical school because research shows this period is associated with increases in burnout, stress, and depression and decreased levels of empathy towards patients. I would like to implement the program in all students (rather than a subset with high levels of difficulty) so that they may all learn some important principles for themselves and in working with patients. I would appreciate help from the ACT community in how to make this as effective as possible - both for the medical students themselves and also as they think about their patients problems UESDAV in the future.

- 1. Format/make-up of the group: a) appropriate number of medical students; b) number of sessions/length of sessions.
- 2. Content of the group: a) Are there exercises that are particularly effective/applicable with a generally high-functioning, nonclinical sample? b) how much lecturing and how much experiential work? c) begin with lecturing and evidence for ACT or with values/other ACT process?
- 3. How can ACT be taught to medical students in a way that will generalize to their patient care as well? Are there ways to make the 6 ACT processes relevant to medical student's patient care?
- 4. How can we help medical students appreciate differences in patient care that is intentional, present, and values driven versus automatic, disengaged, and avoidant?
- 5. Assessment measures: which ones and at which followup times?
- Using "Value" to Integrate Behavioral Economics and Intrinsic Motivation in a Holistic, Systems-Based Approach to a Family Focused Health and Wellness Program for Catawba Valley Medical Center's Employees and their Families
 - H. Vondell Clark, M.D., M.P.H., Catawba Valley Medical Center's Healthy House
 - We recently submitted a grant proposal to the Duke Endowment to develop an integrated, family-focused approach to health and wellness for Catawba Valley Medical Center's employees and their families. We will be implementing a new learning model that is preventive, family friendly, child focused, interactive and technologically advanced, and utilizing social media.
 - We found from our previous research that much of behavior is habitual and is sensitive to context, prompting our exploration into ACBS. We also found that by using concepts from Behavioral Economics such as Choice Architecture, we could have families modify their immediate environment which in turn, modifies them. We found that by changing our paradigms from "diet and exercise" to "nourishment and play" we could tap into intrinsic motivation systems. Lastly, we began to explore our role in Complex Adaptive Systems.
 - As we go forward in our next phase, we want to explore the interface between Behavioral Economics and Intrinsic Motivation. We feel that the common denominator is the concept of "Value". It appears that in early history, Axiology (the philosophical study of value) branched into two paths; the inside path of ethics and the outside path of aesthetics. We purport that it may be possible to unite these two apparently disparate paths into an integrated and

holistic model that will increase the probability that "the healthy choice is the default choice".

- From the Taoist viewpoint of "Wei Wu Wei", we would like to answer the question, "From a values perspective, how can one nudge without nudging?"
- What ideas and recommendations does the audience suggest in developing a values-directed wellness program for the hospital employees and their families?

2. What values-based ideas and recommendations does the audience suggest in evolving the hospital culture from a disease (and "dis-ase") paradigm to a wellness paradigm?

3. What pivotal and strategic areas within a hospital corporate culture should we target to yield the highest return on "values-investment" (ROVI)?

4. Can you have values based policies?

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5. What obstacles and challenges should be expected in changing the hospital corporate culture?

6. What ideas do you have in developing a valuesbased approach to social media?

• An Acceptance and Commitment Therapy Group Protocol for Anxiety in a Primary Care Setting: ACTing Your Way, with Anxiety, to a Better Life

- David Bauman, MA, The School of Professional Psychology at Forest Institute Bridget Beachy, MA, The School of Professional
- Psychology at Forest Institute
- While affecting almost 30% of the general population at some point during their life span, anxiety disorders, most commonly Generalized Anxiety Disorder (GAD), are some of the most prevalent psychological disorders in the US (Forsyth and Eifert, 2007, as cited by Kessler et al., 2005). Yearly, anxiety costs close to \$45 billion for treatment and lost work production in the US (Forsyth & Eifert, 2007). Primary care is one of the most common settings for the treatment of anxiety disorders (e.g. GAD, panic disorder, social anxiety disorder, posttraumatic stress disorder [PTSD], etc.) with 20% of primary care patients meeting the diagnostic criteria (Hunter et al., 2009). Therefore, it is pertinent that effective, population-based interventions are implemented to treat these disorders, specifically, GAD. Acceptance and Commitment Therapy (ACT) has been recognized and established as an evidenced-based treatment for many disorders, including anxiety (SAMHSA, 2010; Forsyth and Eifert, 2007). ACT has also been shown to be effective for other primary care issues, such as chronic pain, smoking cessation, substance abuse, and diabetes (Forman et al., 2007). Additionally, ACT has been adapted to group settings for many of these conditions (Luoma et al., 2007; Vowles et al., 2009; Gratz & Gunderson, 2006). However, these groups have mostly been closed groups, rather than open groups with standalone sessions, which more appropriately coincide with the population-based model for primary care (Hunter et al., 2009). An ACT group protocol is proposed due to the need to provide a populationbased treatment for GAD in a primary care setting combined with the growing support for ACT.
- With the growing integration of psychology in medical communities such as primary care, interventions and techniques must be adapted to fit population based models (i.e., Primary Care Behavioral Health model). Additionally, many psychotherapy techniques are sequential and build off concepts learned during

earlier sessions. Although ACT's six core processes are not linear, they do build off one another. Due to open and standalone groups allowing more individuals to be seen, it is pertinent to assess if ACT is able to be translated to such settings and format. Therefore, the overarching first question would be: Is it feasible, ethical, and possible to apply the concepts of ACT in open standalone groups for the treatment of anxiety in primary care?

- If the answer to the first question is yes, which ACT components would be essential to include at each session?
- 3. Once again, adhering to the population based model, it is more productive to not place a cap on the amount of group participants so that the maximum amount of people can be seen at one time. Furthermore, it is crucial to keep the group sessions short to encourage more participants. Therefore, group numbers and time constraints may prevent experiential exercises from being practice and discussed. What are other ways that the components of ACT could be demonstrated that do not include the individuals participating in experiential exercises?

Tuesday Morning 10:45am

68. The Art of Speaking in Soundbytes: How to Effectively Get Your Point Across with the Media

WORKSHOP (10:45-Noon)

Components: *Experiential exercises, Didactic presentation, Role play*

Categories: Superv., Train. & Dissem., Prof. Dev., Media and Public Communications

Target Audience: Beg., Interm., Adv.

Location: Ballroom A

Sonja V. Batten, Ph.D., U.S. Department of Veterans Affairs Central Office

Daniel J. Moran, Ph.D., Pickslyde Consulting M. Joann Wright, Ph.D., Linden Oaks at Edward

Have you ever pictured yourself on television or in the newspaper, describing your corner of contextual behavioral science? Have you ever struggled to describe AARR in a way that a regular human could understand? Have you ever had a media interview go terribly, horribly wrong? Or are you just curious about what it would be like to talk with the media on mental health and contextual behavioral science issues? If so, come join three of ACBS's media mavens to learn tips of the trade from their extensive experience with television (Dr. Oz, Rikki Lake, Hoarders), print (New York Times, LA Times), radio (National Public Radio), and online media (Functionally Speaking podcast). Learn tips and tricks for media interviews, how to parse your thoughts into soundbytes that reporters can actually use, get hands-on practice with speaking in plain language and gain feedback about substance, style, and technique.

Educational Objectives:

- 1. Create a plan to effectively prepare for a media interview.
- Condense a large number of potential key points to 1-3 clearly articulated talking points before an interview.

3. Redirect an interview if it seems to be moving off course.

69. A-ontology: An in-depth discussion of this critical functional contextual feature PANEL (10:45-Noon)

Components: Conceptual analysis Categories: Theory & Philo., Functional Contextualism Target Audience: Interm. Location: Ballroom C

Chair: R. Trent Codd, III, Ed.S., Cognitive-Behavioral Therapy Center of WNC, P.A.

James D. Herbert, Ph.D., Drexel University

Sam Leigland, Ph.D., Gonzaga University

Thomas G. Szabo, M.A., BCBA, University of Nevada, Reno Daniel David, Ph.D., Babes-Bolyai University, Cluj-Napoca, Romania

Functional Contextualism serves as the philosophical base for contextual behavior science. One noted feature of this philosophical system is it's aontological stance. Behavior scientists from other traditions and some philosophers of science express a number of concerns with this position. In this panel, we will discuss many important aspects of this position. Panelists will discuss what it means to take an a-ontological stance, whether it is a defensible philosophical line of reasoning, and the major arguments for and against this position. What the functional contextualist means by a-ontological will also be fully articulated. The participants in this panel have been selected because they represent a variety of philosophical positions ranging from mechanism to functional contextualism and are well-schooled in their philosophies. In addition to articulating their own positions on the issue of a-ontology, panelists will engage the audience in this meaningful discussion.

Educational Objectives:

- 1. Describe what it means for a functional contextualist to take an A-ontological position.
- 2. Analyze several philosophical arguments for and against the functional contextual A-ontological stance.
- 3. Discuss the impact of an A-ontological stance on contextual behavior science.
- 70. Mastering the Metaphor: An Experiential Workshop where you can learn and practice the art of using metaphors in psychotherapy WORKSHOP (10:45-Noon)

Components: Literature review, Experiential Exercises, Role Play Categories: Clin. Interven. & Interests, Superv., Train.

<u>& Dissem.; Clinical Competence</u>

Target Audience: Beg Location: Ballroom F

Colleen Ehrnstrom, Ann Arbor, Dept. of Veterans Affairs

A safe and supportive environment where you can mindfully drink milk, meet Joe the Bum, drive the bus, play tug of war with a tin can monster, and monitor your chess board while taking a polygraph test and eating chocolate cake.

Educational Objectives:

- 1. List the scientific reasons for using metaphors in the therapy room.
- 2. Learn specific strategies for technique improvement using several of the classic metaphors in ACT.
- 3. Create a template for contextually assessing when and how to introduce metaphors into the room.

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71. Flexibly Alone: A Panel Discussion on Loneliness and Psychological Flexibility

PANEL (10:45-Noon) Components: *Literature review*

<u>Categories: Related FC approaches,</u> <u>Prevention & Comm.-Based, Other, Social</u> <u>Support</u> Target Audience: Beg., Interm.

Location: Amphitheater

Chair: BronwynRose Frederick, University of Louisiana, Lafayette

James P. Cannici, Ph.D., The University of Texas at Dallas J. T. Blackledge, Ph.D., Morehead State University Cory Myler, M.S., Cornell University Jack Newins, M.A., Merced College

Loneliness is defined as dissatisfaction with the number or quality of one's social relationships. People who report less social support also report more loneliness. However, not everybody who has low social support experiences loneliness. Psychological flexibility, the ability to accept difficult experiences and act according to one's chosen values, may help people to adapt to changing social situations or limited social support without experiencing loneliness. Further, psychological flexibility may facilitate continued engagement in valued living when loneliness is experienced. The panel will explore the relationship between loneliness and psychological flexibility, including the effects of social support on psychological adjustment, the role of psychological flexibility in buffering against loneliness, and how values-focused coping might aid in increasing positive relationships during difficult adjustment periods. Implications for intervention and prevention will be discussed with ample time for audience-led discussion.

Educational Objectives:

- 1. Predict the outcome of psychological inflexibility and experience of loneliness.
- 2. Discuss the relationship between social support and psychological flexibility.
- 3. Explain how there is a relationship between the lack of perceived social support and reported feelings of loneliness.

72. Creating Your Own Peer-Led ACT Consultation Group

WORKSHOP (10:45-Noon) Components: *Role play* <u>Categories: Prof. Dev., Superv., Train. & Dissem.,</u> <u>Consultation</u> *Target Audience: Beg., Interm., Adv. Location: Brookside A* Brian L Thompson, Portland Psychotherapy Jason Luoma, Portland Psychotherapy Jenna LeJeune, Portland Psychotherapy Christeine Terry, Portland Psychotherapy Sandy Bushberg, Center for Psychological Services

ACBS needs effective methods of empowering local practitioners to develop their skill in ACT with relatively little input from outside experts. Grassroots

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efforts have sprung up to address this need, resulting in ACT peer consultation and ACT interest groups being formed around the world. There is a need for guidance for these groups on how to function more effectively. Over the past six years, our monthly ACT consultation group has been developing and testing models for conducting peer consultation. We have learned a lot along the way and have gradually developed an experiential meeting format that we believe is helpful and ready for dissemination. This 2-hour workshop will be

conducted using the format we use in our peer consultation group. Participants have the opportunity to observe or actively participate as we conduct a typical peer consultation meeting. Group leaders who are well experienced in the peer consultation format we have developed will be leading the meeting. Audience members will be welcomed to participate in one of the defined roles during the meeting or observe the "fish bowl" from the outside. Time will be set aside for questions and handouts will be provided outlining the structure of the meetings and the defined roles. By the end of the workshop, participants will have the tools necessary to implement their own ACT peer consultation group in their local community.

Educational Objectives:

- 1. Participate in and/or observe a model for a regular, peer-led ACT consultation group.
- 2. Outline the structure of the model and understand the core roles.
- 3. Run your own local peer-consult ACT group using our model.

73. Let's Talk about Sex ACBS

WORKSHOP (10:45-Noon) Components: *Conceptual analysis, Experiential exercises, Didactic presentation,*

<u>Categories: Prof. Dev., Clin. Interven. & Interests,</u> <u>Performance-enhancing, Superv., Train. &</u> <u>Dissem., Related FC approaches, RFT, Sexual</u> <u>Learning History</u>

Target Audience: Interm., Adv.

Location: Brookside B

Aisling Curtin, M.Sc., ACT Now Ireland & St. Patrick's University Hospital Grace O'Malley, ACT Now Ireland

Our sexual learning histories and the relations we derive from these experiences can affect the ways in which we relate to others and ourselves. This workshop will look at how we can combine experiential and didactic components of Acceptance and Commitment Therapy (ACT), Functional Analytical Psychotherapy (FAP) and Relational Frame Theory (RFT) to develop interventions that can help us both personally and professionally in working with issues of a sexual nature. There will be a strong emphasis on engaging in experiential exercises to increase our willingness to sit with both our own sexual histories and those of others in a way that fosters kindness, respect, compassion and allows for perspective taking. There will also be an opportunity to engage in role plays where the five rules of FAP can be applied flexibly and functionally.

Educational Objectives:

- 1. Conceptualise sexual issues from an ACT, FAP and RFT perspective.
- Explain functional contextually-based exercises and role-plays in the area of sexual learning histories
- Develop and apply functional contextually-based strategies in your personal and professional life to aid a psychologically flexible approach to sexualit

74. Approaches to addicted behaviors SYMPOSIUM (10:45-Noon)

Components: *Conceptual Analysis, Literature Review, Original data*

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Theory & Philo., Pathological</u> <u>gambling/behavioral addictions, mentor and</u> <u>patient program, addiction</u>

Target Audience: Beg., Interm., Adv. Location: Forest Glen

Chair: Jonathan Bricker, Fred Hutchinson Cancer Research Center

• Using an ACT treatment model for gambling as a behavioral addiction Alyssa N. Wilson, M.S., Southern Illinois University

Carbondale Mark R. Dixon, Ph.D., Southern Illinois University

Carbondale

- In pursuit of identity: a grounded theory study on the process of overcoming addiction Ayna Johansen, Ph.D., University of Oslo Farnad J Darnell, Ph.D.
- Treating marijuana users with ACT group therapy Patricia Nikolaou, University of Cyprus Maria Karekla, Ph.D., University of Cyprus
- First Randomized Trial of Web-based Acceptance and Commitment Therapy: Preliminary Evidence of Over Double Success Rates in Quitting Smoking as Compared to National-Level Best Practice Program Jonathan Bricker, Ph.D., University of Washington Bryan Comstock, M.S., University of Washington

Addiction and other behavioral excesses are extremely costly to families and society, and our to date treatments have generally had low success rates. This session includes conceptual and data-based talks about a variety of addictions. The first paper provides a conceptualization of ACT processes with gambling behavior and presents treatment efficacy evidence. The second paper examines the principles of recovery and proposes a theory of addiction recovery. The third paper presents data from an ACT intervention for marijuana use. The last paper describes a web-based

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ACT-based treatment for smoking cessation and provides evidence from a randomized trial.

Educational Objectives:

- 1. Apply ACT-based treatment to individuals with substance abuse problems.
- Identify effective-based treatments, and how to use these treatments with individuals with addictions.
- 3. Understand the first randomized trial of webbased ACT.
- 75. ACT versus standard CBT for Anxiety: How do the outcome and process data compare? SYMPOSIUM (10:45-Noon)

Components: Original data

Categories: Clin. Interven. & Interests, Theory & Philo., Anxiety/ Anxiety Disorders

Target Audience: Beg., Interm., Adv.

Location: Glen Echo

Chair: Joanna J. Arch, Ph.D., University of Colorado, Boulder

- Randomized clinical trial of cognitive behavioral therapy (CBT) versus acceptance and commitment therapy (ACT) for heterogenous anxiety disorders Joanna J. Arch, Ph.D., University of Colorado, Boulder Michelle G. Craske, Ph.D., University of California Los Angeles
- Comparative efficacy of standard Cognitive Behavior Therapy and Acceptance and Commitment Therapy for depression and anxiety at long-term follow-up and for public speaking performance: Two randomized trials
 - Evan M. Forman, Ph.D., Drexel University Lisa Hayley Glassman, Drexel University James D. Herbert, Ph.D., Drexel University Lauren E. Bradley, Drexel University Jena A. Shaw, M.S, Drexel University Meltem Izzetoglu, Ph.D.
- The Impact of ACT and Traditional CBT Intervention Targets on Quality of Life: A Comparative Evaluation Using Structural Equation Modeling in Two Highly Anxious Samples

Christopher R. Berghoff, M.A., University at Albany, State University of New York

- John P. Forsyth, Ph.D., University at Albany, State University of New York
- Amanda R. Russo, University at Albany, State University of New York
- Sean C. Sheppard, University at Albany, State University of New York

Randomized comparisons of acceptance-based treatments with traditional cognitive behavioral therapy (CBT) for anxiety disorders have been few in number and long-term follow up has been lacking. To address this research gap, we will present the results from two large randomized clinical trials and one smaller study comparing ACT to traditional CT/CBT for a variety of anxiety disorder and high anxiety samples. We will also present follow up data ranging from 12-18 months on the results of these trials. Finally, drawing from a very large sample of highly anxious individuals randomized to ACT or traditional CBT workbooks distributed online, we will compare the theoretical models underpinning ACT and traditional CBT and their capacity to predict anxiety symptoms and quality of life.

Educational Objectives:

- 1. Explain how ACT and traditional CBT can be compared within randomized clinical trials.
- Demonstrate differences between immediate and longer-term follow up results in ACT and traditional CBT.
- 3. Compare therapy models on the basis of process variables.
- 76. Examining the Utility of the IRAP in Clincal and Forensic Domains and the Role of Deictic Relations in Self-based Techniques in ACT

SYMPOSIUM (10:45-Noon)

Components: Original data Categories: Clin. Interven. & Interests, RFT, IRAP, OCD, forensics, the self, Deictic

Relations

Target Audience: Interm.

Location: Linden Oak

- Chair: Mairead Foody, National University of Ireland Maynooth
- The Implicit Relational Assessment Procedure (IRAP) as a Measure of Obsessive Beliefs Related to Disgust
 - Emma Nicholson, National University of Ireland Maynooth
 - Dermot Barnes-Holmes, Ph.D., National University of Ireland Maynooth

Angela McCourt, National University of Ireland Maynooth

- Implicit measures in forensic settings: Potential contextual contamination? Alison Foster, University of Lincoln Dave L. Dawson, Ph.D., University of Lincoln
- Empirical Evidence on the Role of Deictic Relations in Self-based Techniques in ACT Mairead Foody, National University of Ireland Maynooth Yvonne Barnes-Holmes Ph.D., National University of Ireland Maynooth Dermot Barnes-Holmes Ph.D., National University of

This symposium includes three papers that focus on experimental studies pertaining to the IRAP and ACT. The first paper uses the IRAP to map disgust responding onto the six cognitive domains of OCD while the second explores the contamination effects of offender therapy in both treatment facilitators and in a non-offending control group. The final paper empirically examines the functional overlap between RFT and ACT.

Educational Objectives:

- 1. Demonstrate the utility of the IRAP in Obsessive Compulsive Tendencies.
- Highlight the utility of the IRAP within forensic and / or treatment settings where accurate (sensitivity and specificity) relational assessment is potentially key.
- 3. Discuss the functional overlap between RFT and ACT.

Dermot Barnes-Holmes Ph.D., National University of Ireland Maynooth

77. ACT with Children, Adolescents, Young Adults, and Parents Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (10:45-Noon)

Components: Prevention and Community-Based Interventions, Clinical Interventions and Interests, Educational settings

Categories: Parenting, Children and Adolescents,

College Adjustment Target Audience: Beg., Interm., Adv. UESDAY Location: Oakley

 An ACT-Based Community Parenting Program: Design, Methods, Measures, and Activities

Erika Hinds, M.S., Oregon Research Institute Jean Lee, M.S., Oregon Research Institute Laura Backen Jones, Ph.D., Oregon Research Institute

Parenting can be stressful. Childrens' challenging behaviors, co-parenting, juggling work and childcare responsibilities, sleep-deprivation, and fatigue are just a handful of factors parents report as stressful. Another major challenge for parents is dealing with their own undesirable thoughts, feelings, and behaviors. Getting caught up in, or trying to control, difficult thoughts and feelings about themselves (e.g., "I am not a good parent") and their children (e.g., "I can't stand it when he does that") can interfere with parents' abilities to connect with their children and take valued action in the service of their wellbeing. In this discussion, we describe activities in the iterative development of a community group parenting program grounded in Acceptance and Commitment Therapy. Discussion will center on the next steps for formally evaluating this community parenting program with a diverse population of parents. Questions for the audience will revolve around appropriate approaches, designs, and measures for this nascent program of research.

- 1. Many group parenting programs today struggle to recruit and retain parents over time. What strategies would you suggest for getting and keeping parents engaged in the intervention?
- 2. Many parents today feel isolated and say that they wish they had more support for their parenting. What ideas do you suggest for connecting parents and 'building community' within a parenting group?
- 3. Because many parents are reluctant to commit to a group parenting series, what ideas do you have for alternatives to groups for delivering parenting education?
- 4. In general, what are your experiences with implementing and measuring the effects of an ACTbased intervention for non-clinical populations in a large group setting? Any recommendations or suggestions?
- ACT on an Acute Inpatient Unit for Children and Adolescents
 - Jennifer McTaggart, Ph.D., McMaster Children's Hospital Lawna Brotherston, MN, NP-Pediatrics, McMaster Children's Hospital

Gianna Knibbs, M.Sc. (OT), McMaster Children's Hospital

The Child and Youth Mental Health (CYMH) Inpatient Unit is a 22-bed unit for acute mental health difficulties located at McMaster Children's Hospital in Hamilton, Ontario, Canada. The purposes of admission to the CYMH Inpatient Unit include acute stabilization, diagnostic clarification, and/or medication review,

and the average length of admission is approximately 13 days. Our treatment models are grounded in behaviorism, and the structures and tools of the milieu are currently informed by dialectical behavior therapy. Patients participate in several treatment and functional activity groups throughout the day, and are coached in the milieu on the application of mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness skills. Within the program, there is a small interprofessional Program Development Team that is responsible for researching, designing, and implementing new theoretical, clinical, and practical ideas. During our recent expansion, Acceptance and Commitment Therapy (ACT) was identified as a treatment that aligns nicely with our current program philosophy. Members of the PD Team have since sought ACT training, and we are now in the process of trying to incorporate ACT into our programming. For example, after reading the research literature, the PD Team wants to develop an ACT group for individuals with symptoms of psychosis. While this is certainly an exciting time, we are struggling with several aspects of this process and would welcome input from the ACT community.

- 1. How can we apply and implement brief ACT interventions on a short-term inpatient unit?
- 2. How can we incorporate ACT into our existing DBTinformed unit (beyond merely adding an ACT group to our treatment schedule)?
- 3. How can brief ACT interventions help foster reasons for living in our patients with suicidal ideation?
- 4. How can we apply ACT principles to our younger cohort of patients?
- Forever Alone!: A Forum on Prevention of Loneliness in College Freshman BronwynRose Frederick, B.S., University of Louisiana, Lafayette
 - Emily Kennison Sandoz, Ph.D., University of Louisiana, Lafayette
 - College students are often faced with a number of transitions across important domains of life. For many students, academic demands, living conditions, financial status, primary relationships and social activities undergo significant change upon transitioning to university life. The most challenging among these may be changes in the social environment. Loneliness is distress resulting from a mismatch between desired and perceived social support. Psychological flexibility may involve the skills necessary to cope with poor social support., function effectively in the changing social environment, and create supportive relationships. This program development forum will explore the potential utility of interventions based in psychological flexibility to preventing loneliness in first time freshmen. Discussion will focus on questions such as:
 - 1. Should such an intervention be provided for all freshmen, or only those at risk? How might we identify freshmen at risk for loneliness?
 - 2. How might we provide training in psychological flexibility without stigmatizing attendees?
 - 3. What would be advantages and disadvantages of training in psychological flexibility in combination with social skills training?
 - 4. What should the format of such an intervention be? Individually-based? One time workshop? Weekly small group?

5. What advantages and disadvantages might come with integrating such training into existing orientation services such as Freshmen Orientation, Extended Orientation, or University 100 (first time freshman skills course)?

Tuesday Lunch 12:00-12:45pm

Tuesday Lunch Plenary 12:45-2:00pm

Bring your lunch!

78. The Case Against Psychiatric Drugs: History, Science, and the Long-term Effects of Psychiatric Medications INVITED LECTURE (12:45-2:00pm) Components: Literature review

<u>Categories: Functional contextual neuroscience and</u> <u>pharmacology, Clin. Interven. & Interests, Long-</u> <u>term Effects of Psychiatric Medications</u>

Target Audience: Beg., Interm., Adv.

Location: Grand Ballroom

Chair: Kelly G. Wilson, Ph.D., University of Mississippi Robert Whitaker, Journalist & Harvard Fellow

According to conventional histories of psychiatry, the arrival of Thorazine in asylum medicine in 1955 kicked off a "psychopharmacological revolution." Yet, since



1955, the disability rate due to mental illness in the United States has risen more than six-fold. Moreover, this epidemic of disabling mental illness has accelerated since 1987, when Prozac--the first of the "second-generation" drugs--arrived on the market. A review of the long-term outcomes literature reveals why this is so. The "medical model" paradigm of care, which emphasizes

continual use of psychiatric medications, is a failed paradigm, and needs to be dramatically rethought.

Educational Objectives:

- 1. Explain the history of the research into the chemical imbalance theory of mental disorders, and the findings from that research.
- Appreciate how a review of the history of the outcomes literature can help us understand how medications affect the long-term course of psychiatric disorders.
- 3. Be familiar with the long-term outcomes literature for schizophrenia and affective disorders.

Tuesday Afternoon 2:15pm

79. Using ACT with Families of Autistic Children: Supporting Parents and Siblings

WORKSHOP (2:15-4:15pm)

Components: Conceptual analysis, Original data, Experiential exercises, Didactic presentation, Case presentation, Role play

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Autism Spectrum Disorders</u>

Target Audience: Interm. Location: Grand Ballroom

Kirstin Brown Birtwell, M.A., Suffolk University Elizabeth Davis, Ph.D., Suffolk University Lisa W. Coyne, Ph.D., Suffolk University

Lizabeth Davis, Ph.D., Suffolk University Lisa W. Coyne, Ph.D., Suffolk University Despite their struggles with grief associated with a child's diagnosis of an Autism Spectrum Disorder (ASD), and the daily stress and demands of raising a child with an ASD, parents are absolutely critical to their children's well-being. These contextual stressors also have implications for typically developing siblings, parents' ability to learn and effectively implement behavioral management skills, and broader family functioning. Unfortunately, evidence-based programs that address behavior management skills and parent support, while desperately needed, are extremely rare. This experiential workshop will present data on families of

autistic children and give participants opportunities of autistic children and give participants opportunities to use Acceptance and Commitment Therapy (ACT) and RFT in families of children with ASD via didactics, experiential exercises, and role plays. We will specifically address barriers to treatment, case conceptualization and functional analysis from an RFT perspective, parenting skills, sibling issues, and family contextual stressors. Participants are encouraged to bring cases to discuss.

Educational Objectives:

- Conceptualize the struggles that families of children with ASD encounter from an ACT perspective.
- 2. Apply the 6 core ACT processes to this unique family dynamic.
- 3. Review results of one recent research study and one ongoing clinical trial.

80. Rule Governed Behaviour in Clinical Practice: 'To ply or not to ply, that is the question!' WORKSHOP (2:15-4:15pm)

Components: *Experiential exercises, Didactic presentation*

Categories: Clin. Interven. & Interests, RFT, ACT skills Target Audience: Beg., Interm., Adv. Location: Ballroom A

Mary Sawyer, Private Practice James Duguid, University of Western Sydney

The aim of this workshop is to explore the theory and application of Rule Governed Behaviour (RGB) using didactic and experiential exercises. RGB may not be familiar to many ACT practitioners, but chances are you use these principles every time you see a client, participate in this conference, conduct research, or interact with anyone during an average day. RGB is an important part of Relational Frame Theory (RFT) and underpins the interventions used in ACT (e.g. values clarification). This workshop will include the use of images, film and role- play. You will learn how to identify social and self rules, and how you and your clients can respond using ACT strategies. This will be a very ACTive workshop where you will be given the opportunity to try something new and useful for your clinical practice. You will be guided by two experienced ACT therapists who will give you close

supervision.

Educational Objectives:

1. Explain Rule Governed Behaviour within the broader theory of RFT.

2. Demonstrate how RGB is used as part of ACT in applied settings.

3. Practice ACT interventions that

promote valued living.

81. ACT for Spiritual Development: Accept, Choose, Teach others

WORKSHOP (2:15-3:15pm) Components: Conceptual analysis, Experiential exercises, Didactic presentation, Role play Categories: Performance-enhancing interventions,

<u>Spiritual Development</u> Target Audience: Beg., Interm.

Location: Ballroom B

ESDA

Hank Robb, Ph.D., ABPP, Private Practice

This workshop begins with the common sense distinctions between mind, body and spirit and both cultivates and applies six aspects of spiritual experience in every day life. The workshop aims to foster the capacity for spiritual development by all human beings and is not particularly targeted toward those individuals who come to clinics, offices or hospitals for treatment of "psychological/psychiatric disorders." Issues addressed will include: sorrow and fulfillment, unhappiness and happiness, forgiveness and reconciliation and living life from "the eye of the hurricane" rather than from its edge. It asks participants to consider a question posed by Joseph Campbell, "Are you looking for the meaning of life or the experience of being alive?"

Educational Objectives:

- 1. Identify six aspects of spiritual experience in every day life.
- 2. Identify a possible root metaphor for the approach.
- 3. Summarize ACT/RFT principles as a basis for spiritual development rather than an adjunct to it.

82. Dharma in ACTion: Why ACT Needs Buddhism and Buddhism Needs ACT PANEL (2:15-3:15pm)

Components: Conceptual analysis

Categories: Theory & Philo., Clin. Interven. & Interests, Theory & Philo., Related FC approaches, Buddhism, Mindfulness Target Audience: Interm.

Location: Ballroom C

Chair: Jonathan S. Kaplan, Ph.D., Private Practice Jonathan S. Kaplan, Ph.D., Private Practice

- John Forsyth, Ph.D., University at Albany, State University of New York
- Brian Thompson, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center
- Joel Guarna, Ph.D., White Pine Behavioral Health, LLC

Jamie Bolles, B.S., University at Albany, State University of New York

Over the years, many people have noted the conceptual and practice-oriented similarities between ACT and Buddhism (e.g., Hayes, 2002). Both incorporate mindfulness, encourage acceptance (vs. avoidance), and emphasize an appreciation for the ongoing events in context, for example. However, there are very important distinctions between them. Rooted firmly in RFT and empirical science, ACT is practiced within contemporary psychotherapy and ultimately subject to scientific scrutiny. In contrast, Buddhism is based on a system of ethics, contemplation, and religion, which predates the articulation of the scientific method by over two millenia (Hayes and Shenk, 2004). In this panel, we consider the practical points of similarity and difference between Buddhism and ACT. We articulate clinical applications associated with areas of overlap between these two healing approaches (e.g., techniques and technologies to promote mindfulness, compassion, values-based behavior, etc.). In addition, we address conceptual issues, including the implications of understanding a prescientific system from a scientific perspective (and vice versa). In order to encourage a broader dialogue, panelists will invite comments and questions from the audience as well.

Educational Objectives:

- 1. Discuss the similarities and differences between Buddhism and ACT.
- Explain the risks and benefits of associating contextual psychology with Buddhism by offering two advantages and two disadvantages.
- 3. Select one intervention based on Buddhism and ACT to use with patients.
- 83. The ACT Matrix: Self-as-context work in process

WORKSHOP (2:15-4:15pm) Components: *Experiential exercises*, *Didactic* presentation

Categories: Clin. Interven. & Interests, ACT Matrix, therapeutic relationship, emotionally dysregulated populations

Target Audience: Beg., Interm., Adv. Location: Ballroom F

Abby Hurley, M.A., Wheaton College Jerold Hambright, Ph.D., Togus VAMC Kevin Polk, Ph.D., Togus VAMC David Faigin, Ph.D., Dartmouth College

Clinicians often have trouble remaining mindfully engaged in work with emotionally dysregulated individuals. Utilizing the ACT Matrix designed by Drs. Polk and Hambright, this workshop will seek to aid practitioners in finding the fertile ground from where self-as-context of both client and therapist can engage together in this challenging work. Self-ascontext lies at the center of the Matrix, providing a

TUESDAY

quick tool for functional analysis of the situation, tracking processes while they occur in session, and facilitating awareness of those behaviors indicating fusion with one's self-content. This workshop will utilize a variety of didactic and experiential exercises to facilitate awareness of the practitioner's selfcontent and aid the practitioner in being informed by this content while remaining defused from it. Further, skills will be emphasized to offer the opportunity for clients to mindfully join the therapist in this self-ascontext space. Special attention will be paid to applying these skills in both individual and group settings and with diverse populations including emotionally-dysregulated persons.

Educational Objectives:

- 1. Describe and apply the ACT matrix in individual and group settings.
- 2. Release attachment to negative and positive selfcontent currently impeding clinical work.
- Utilize the Matrix with diverse populations including emotionally-dysregulated persons, to identify when self-content is intruding on the therapeutic process and facilitate a return to selfas-context for both clinician and client.

84. Compassion Focused Therapy and the Evolved Mind: The Role of Affiliative Emotions in Psychotherapy INVITED LECTURE (2:15-3:15pm)

Components: Conceptual Analysis, Literature review Categories: Performance-enhancing interventions,

Clin. Interven. & Interests, Compassion Focused Therapy

Target Audience: Beg., Interm. Location: Ballroom G

Chair: Dennis Tirch, Ph.D., Weill-Cornell Medical College Paul Gilbert, Ph.D., Mental Health Reserach Unit, Kingsway, Derby

This talk will give a brief overview of the origins and nature of compassion focused therapy (CFT). The talk



will introduce key evolutionary psychology and Buddhist concepts and in particular the role and function of attachment affiliative and compassionate behaviour. The evolution of affiliative behaviour acted to regulate threat processing, and the way the affiliative positive affect system develops in attachment relationships can have a profound effect on threat sensitivity and processing.

One of the key aims of CFT is to increase affiliative processing and positive emotion to self and others, because these emotions are powerful regulators of threat and impact on well-being. I will suggest that without access to this important emotion processing system psychotherapy can struggle. However, research shows that many people who are high in shame on self-criticism can have a major fear and resistance to this type of positive affect. This talk will explore these current issues in CFT.

Educational Objectives:

- 1. Explain how evolutionary concepts can be used to help us understand psychopathology and psychotherapy processes.
- 2. Explain the role and function of attachment affiliative and compassionate behaviour.
- 3. Describe "affiliative emotions".

85. Introducing and Integrating Cognitive Defusion Techniques in Therapy WORKSHOP (2:15-4:15pm)

Components: *Experiential exercises, Didactic presentation, Role play*

Categories: Clin. Interven. & Interests, Theory & Philo., ACT with Adults

Target Audience: Beg., Interm.

Location: Ballroom H

John T. Blackledge, Ph.D., Morehead State University

Practitioners relatively new to ACT (and even those with an intermediate amount of experience) can often be confused about the conceptual basis and purpose behind cognitive defusion and how to introduce and consistently use defusion techniques in a way that is not unnecessarily confusing or off-putting to clients. This workshop will involve a succinct discussion of defusion's conceptual basis and purpose with ACT, as well as the modeling and participant role-playing of several useful defusion techniques. The intent behind the workshop is to teach participants how to introduce defusion techniques seamlessly and apply them as necessary.

Educational Objectives:

- 1. Discuss the conceptual basis behind cognitive defusion.
- 2. Practice several ways of introducing defusion in ACT in a seamless manner.
- 3. Practice how to build and maintain a therapeutic 'context of defusion' in ACT therapy.

86. More IGNITES! You Know You Want to Watch!

IGNITES (2:15-4:15pm)

Components: Didactic presentation, Conceptual Analysis

Categories: Clin. Interven. & Interests, Prev. & Comm.-Based Interv., RFT, Functional Contextual Approaches, Prof. Dev., Supv., Train. & Dissem., Edu. Settings, Theory & Philo., Beh. Med, Other, SITDP, intensive short term dynamic psychotherapy, procrastination, social contextualism, empathy, prosocial behavior, analog studies, geropsychology, sex coaching and sex education, hormonal stress response, coaching, personality disorders, children, online training in ACT, clinical supervision, language, eating behaviors, substance abuse Target Audience: Beg., Interm., Adv.

Location: Amphitheater

- Love, Death, and Science: A new experimental paradigm for prosocial behavior in the ACT/RFT mutual interest model
 - Douglas M. Long, University of Nevada Reno
- We Can Stop Drinking the Kool Aid Now. Online Alternative to Traditional ACT Training Joanne Steinwachs MSW, Private Practice Josh Pritchard, Ph.D., Florida Institute of Technology
 - Using Computers to Stop the Kool-Aid: Rethinking ACT Training Part 2

Josh Pritchard, Ph.D., Florida Institute of Technology

• The Psychodynamics of ACT: How ISTDP can strengthen the ACT intervention Max Boehling, Ph.D., FunktionelPsykologi.dk (Private

Max Boehling, Ph.D., FunktionelPsykologi.dk (Private Practice)

• Hard Feelings: How Empathy Escapes Us and How to Reclaim It

Mitch Abblett, Ph.D., Judge Baker Children's Center - Boston

• ACTing older: An invitation to Contextual Geropsychology

Andreas Larsson, Swansea University Louise McHugh, University College Dublin

ESDA

- Sex-ACT: Unleash the Power of Your Sexual Mind with Acceptance and Commitment Therapy Richard Blonna, Ed.D., William Paterson University
- Stress (sex), Values (sex), and Cortisol (sex) Jennifer Gregg, Ph.D., San Jose State University
- Teach Yourself ACT!: A Primer for Coaches and other Non-Therapists

Molly Froelich, M.A., Private Practice

- Could Hope be a reinforcer? Pierre Cousineau, Ph.D., Private Practice
- Reasons Kids "Can't": Using visual metaphors with children to assist in defusion from reason-giving "blocks" to change
 - Sandra Bowden, M.Ed (Counselling Psych), New South Wales Department of Education and Communities/Private Practice
 - Timothy Bowden, Postgrad Dip. Psych., New South Wales Department of Education and Communities
- "The Good, the Bad, and the Ugly": ACT Clinical Supervision

Amy R. Murrell, Ph.D., University of North Texas Aditi Sinha, M.S., University of North Texas Rawya Al-Jabari, B.A., University of North Texas

How RFT can change your way of speaking in therapy

Matthieu Villatte, Ph.D., University of Louisiana, Lafayette

- Psychological Acceptance: Measurement in Research Stephanie Goldstein, Ph.D., Drexel University
- Embracing the Suck: Getting to Work When All You Want to Do is Update Your Facebook Status (Again) Matthew S. Boone, MSW, Cornell University Counseling and Psychological Services

87. Developing Your Skills as an ACT Trainer, Part 2

WORKSHOP (2:15-4:15pm)

Components: *Conceptual analysis, Experiential exercises, Role play*

Categories: Superv., Train. & Dissem., Prof. Dev., Becoming an ACT Trainer

Target Audience: Beg., Interm., Adv. Location: Brookside A

- Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training Division
- David Gillanders, PsyD, University of Edinburgh / NHS Lothian
- Russ Harris, M.D., ACT Mindfully Institute, Inc
- Tobias Lundgren, Ph.D., University of Stockholm

Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, & Training Center, PC

This workshop will focus on developing skills for becoming an ACT trainer or improving your skills as an ACT trainer. The session will be developed based on the needs assessment conducted in Part 1 of the developing your skills as a trainer workshop. The key goals will be to address personal barriers, plus other issues that may be pertinent to training. The workshop will include experiential exercises that are designed to improve skill and we will explore a number of training issues such as how to address problems that arise during a workshop, how to remain consistent with ACT, how to improve your interactions with workshop attendees and other needs as assessed. Small group work will also be conducted in order to receive more individualized feedback.

Educational Objectives:

- 1. Address personal barriers to implementing training effectively.
- 2. Manage problems that arise in training.
- 3. List skills that will improve their ACT workshops.

88. From Reactivity to Resilience: Acceptance and Mindfulness Strategies for Clinician Self-Management

WORKSHOP (2:15-4:15pm)

Components: *Experiential exercises, Didactic presentation, Case presentation, Role play*

<u>Categories: Prof. Dev., Performance-enhancing,</u> <u>Countertransference and Work with Challenging</u> <u>Populations</u>

Target Audience: Interm.

Location: Brookside B

Mitch Abblett, Ph.D., Manville School at Judge Baker Childrens Center

All therapists experience significant negative reactions to some clients. Ask any clinician, and they'll agree that there have been sessions that sparked anger, despair and fear in them. Studies have documented the risks for clinicians when their own emotional reactions to their work is insufficiently addressed (i.e. client premature termination from treatment, therapist burnout, therapist psychological dysfunction) (Piselli et al., 2011; Moldovan, 2006; Ogrudniczuk et al., 2005). Clinicians working with challenging populations, and those whose work challenges their coping capacities, need help beyond admonitions to "take care of themselves," and to seek supervision or personal therapy. Therapists intend to be healers, and the general assumption is that they are skilled in healing themselves, and leading their clients toward more adaptive and full living. There are dangerous

flaws in such reasoning. This workshop provides hands-on, intensive training in mindfulness and acceptance-based skills targeting clinicians' own reactivity to their work. Many clinicians are beginning to align their interventions with mindfulness and acceptance-based work, but how much are they directly targeting their own experience (e.g. shame over "failed" efforts, rage at "intrusive" clients, or despair over the depths of witnessing others' pain)? This workshop not only puts the focus on the therapist, it seeks to build the skills that will expand clinicians' reach in their daily work with clients.

Educational Objectives:

- 1. Recognize the difficult patterns in past and current therapeutic interactions that impede treatment progress.
- 2. Demonstrate skill in managing difficult client interactions by conducting in-the-moment assessment using mindful awareness, acceptance-based orienting to the client and defusion from unworkable reactions.
- 3. Demonstrate skills for proactively intervening with clients with compassionate limit-setting and process observations.

89. Science with Intention: Refining Methods in **Contextual Behavioral Science** SYMPOSIUM (2:15-3:30pm)

Components: Conceptual Analysis, Literature Review, Original data

Categories: Clin. Interven. & Interests, Functional contextual neuroscience and pharmacology, Related FC approaches, RFT, Pathological gambling, IRAP, Assessment, psychological inflexibility, distress

Target Audience: Beg., Interm., Adv. Location: Forest Glen

Chair: Kate Kellum, Ph.D., University of Mississippi

- Behavioral and neurological evidence of relational responding with pathological gamblers
 - Mark R Dixon, Ph.D., Southern Illinois University Carbondale
 - Alyssa N. Wilson, M. S., Southern Illinois University Carbondale
- The reliability and validity of the IRAP: The story so far
 - Nima G. Moghaddam, University of Lincoln, Lincoln, UK Aidan J P Hart, University of Lincoln, Lincoln, UK
- Contextual science requires methods that capture life as its lived: New insights on spirituality and sexuality
 - Todd B. Kashdan, Ph.D., George Mason University
- Examining the relation between psychological inflexibility and psychological distress utilizing the AAQ-II

Cameron Miller, M.A., Georgia State University Akihiko Masuda, Ph.D., Georgia State University

This symposium will discuss a variety of methods that are used in empirical investigations in contextual behavioral science. The first paper will examine training approaches aimed at developing new relational responding in gambling contexts. The second paper will discuss the reliability and validity of

the IRAP. The third paper will investigate the use of diaries as a way to examine situational factors related to spirituality and sexuality. The fourth paper looks at the relationship between psychological inflexibility (assessed by the revised AAQ-II) and psychological distress.

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Educational Objectives:

- 1. Discuss dynamic methodologies that can be used in contextual science, for both research and practice.
- 2. Demonstrate understanding of importance of assessing neurological, psychological, and environmental factors associated with gambling.
- 3. Describe the role of psychological inflexibility in predicting psychological distress.

90. Introduction to the IRAP Part 1 WORKSHOP (2:15-4:15pm)

Components: Conceptual analysis, Literature review Categories: Superv., Train. & Dissem., RFT, IRAP Target Audience: Beg.

Location: Glen Echo

Ian Hussey, National University of Ireland Maynooth Sean Hughes, National University of Ireland Maynooth Dermot Barnes-Holmes, Ph.D., National University of Ireland Maynooth

The IRAP is a computerised response-time procedure that requires participants to respond both quickly and accurately in a manner deemed either consistent or inconsistent with their prior verbal history. In doing so, the task aims to target people's brief and immediate relational responses (BIRRs) which often diverge from their more extended and elaborated relational responses (EERRs). Over the past 5 years, the IRAP has provided functional researchers with a means to capture a diverse range of automatic verbal biases including implicit stereotypes, preferences, prejudice as well as clinically relevant behaviours.

This workshop will provide attendees with a comprehensive overview of the empirical, theoretical and procedural issues relevant to using the IRAP and interpreting IRAP data. Specifically, the workshop will outline the methodological strategy upon which the IRAP operates, offer advice for successfully designing and implementing IRAPs as well as suggestions to maximise precision while minimising attrition in the attendee's specific research area. These principles will be illustrated in practice for workshop participants by the workshop facilitators. Thereafter, a state of the art will be provided that showcases recent applications of the IRAP in differing research and applied domains.

Attendees should bring their laptops and have already downloaded and installed the IRAP program. You can get it here: IRAPresearch.org

Educational Objectives:

1. Communicate the methodological features of the IRAP and discuss the theoretical framework used to interpret IRAP data (i.e., Relational Elaboration and Coherence Model).

- Identify and explain the practical and analytic strengths and limitations of the IRAP relative to alternative indirect and self-report procedures.
- 3. Generate a stimulus set relevant to their target domain, correctly implement all relevant design parameters and minimise the possibility of participant attrition across the IRAP task.

91. ACT in Health Psychology

SYMPOSIUM (2:15-3:30)

Components: Conceptual Analysis, Literature Review, Original data Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Beh. med., Related FC approaches, Other, Cancer, weight reduction, obesity, chronic pain among veterans, chronic illness Target Audience: Beg., Interm. Location: Linden Oak

Location: Linden Oak

UESDAY

Chair: Bryan Brandt, University of South Florida

- Pain Relief ASAP: An ACT-Based Chronic Pain Management Program Utilizing a Veteran-Centered Approach
 - Andrew Jones, Ph.D., Southern Arizona VA Health Care System
 - Sarah Welton, Ph.D., Southern Arizona VA Health Care System
- ACT-WeL for Weight Reduction and Maintenance: Development, Pre-Post, and 4 Month Follow-up in a Small Randomized Controlled Trial of Effectiveness Tamara Loverich, Ph.D., Eastern Michigan University Karen Stanley-Kime, M.S., Eastern Michigan University Natalie Nugent, M.S., Eastern Michigan University Ashley Wiedemann, Eastern Michigan University
- Acceptance and Mindfulness in Multiple Sclerosis: Individual and couple perspectives Kenneth I. Paekenham, Ph.D., The University of Queensland, Brisbane, Australia Christina Samios, Ph.D., Bond University, Australia Megan Fleming, MCP, The University of Queensland, Australia
- A multidisciplinary group intervention based on Acceptance and Commitment Therapy (ACT) for weight gain in breast cancer patients: ACT-EAT a preliminary feasibility study: Individual and couple perspectives
 - Giuseppe Deledda, MSe., University of Verona, Italy Prof. Annamaria Molino, Ospedale Civile Maggiore, Hospital Trust of Verona, Italy
 - Dr. Roberta Mandragona, U.O. of Clinical Geriatricic d.U. Anna Maria Nalini, A.N.D.O.S. Assn. committee of Verona, Italy

Claudia Gross, Ph.D., University of Verona, Italy

This symposium will discuss a variety of novel ways in which Acceptance and Commitment Therapy (ACT) has been incorporated into the treatment of individuals with health difficulties. The first paper discusses the results of a pilot study that combined ACT with activity pacing, biofeedback, and sleep improvement strategies to assist in chronic pain management for veterans. The second paper presents the findings of a randomized controlled trial comparing the efficacy of an ACT-based weight loss intervention to a wait-list control. The third paper explores the role of acceptance and mindfulness in adjusting to Multiple Sclerosis, as measured by the MS Acceptance Questionnaire. The final paper presents the preliminary results of an ACT-based group intervention for weight loss in overweight cancer patients.

Educational Objectives:

- 1. Describe empirically-based components of ACTbased intervention for veterans suffering from chronic pain.
- Utilize outcomes/implications of current pilot study to design and implement similar programs in their own institution/facility.
- 3. Analyze utility of ACT and nutrition for weight loss and maintenance.
- 92. Supervision, Training and Dissemination Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (2:15-3:30)

Components: *Clinical Interventions and Interests, Supervision, Training and Dissemination, Professional Development*

<u>Categories: Implementation, program evaluation, ACT</u> <u>in Supervision, Training</u>

Target Audience: Beg., Interm., Adv.

Location: Oakley

- Identifying ACT and "not ACT" language in clinical progress notes
 - Thomas J. Waltz, Ph.D., Center for Mental Healthcare and Outcomes Research, CAVHS
 - Veteran's Health Administration (VHA) clinicians have provided thousands of veterans with individual and group ACT treatment sessions. To date there has not been a practice focused analysis of how well or extensively ACT is being implemented in the VHA. "Evidence Farming" is a strategy for harnessing practice-based data to analyze clinical care. Electronic medical records at the VHA, particularly clinical progress notes, represent fertile virtual fields for evidence farming and progress notes are the most efficient means of assessing how a treatment is being implemented in regular practice. The VHA has developed new text analysis research tools which make it possible to study the content of therapy sessions and sequences of sessions. These tools can provide a better picture of how treatment is being implemented in regular practice. Effective Evidence Farming in this context requires the identification key words and phrases that will be entered into text analysis software.
 - The goals of participating in this forum discussion are to identify key words and phrases within clinical progress notes that are likely to (1) have a high degree of specificity for ACT, (2) have a low degree of specificity for ACT (i.e., shared with CBT, other common factors), and (3) terms indicating an approach that is decidedly not ACT (e.g., cognitive restructuring). Example items will be presented to the forum and feedback from the forum will be used for designing a future Evidence Farming study focused on ACT implementation in the VHA. We are interested in input from clinicians and researchers.
- Acceptance-Based Clinical Supervision
 W. Jeffrey Henderson, Ph.D., University of Georgia, Athens GA

- In this 10-minute presentation I will explore and seek feedback through specific audience questions about how to implement acceptance-based supervision in applying the constructs and strategies from ACT in clinical supervision. Folette and Batten (2000) examined how supervisors can employ ACT processes in supervision through acceptance, evoking emotions, creating exposure to difficult material in order to foster a willingness to accept difficult material from clients, while creating a safe space for supervisees. I will provide a rationale for the use of acceptance-based supervision in a brief literature review, and then discuss the way I plan to apply it in supervision, including an outline, for the year of my post-doctoral supervision. I want to possibly assess the impact of acceptance-based supervision by analyzing relevant questionnaires involving ACT processes completed by the supervisee at pre and post supervision. I anticipate feedback from informed others about how the effects of acceptance-based supervision may be measured.
- 1. What are some recommended surveys to assess supervisees' acquisition of Acceptance-Based skills and constructs?
- 2. How does a supervisor integrate both problem-solving, and validation of supervisee's experience?
- 3. In what specific ways is Acceptance-Based model similar or different than supervision as usual?
- 4. What has been the audience's experience with Acceptance-Based supervision?
- 5. What are some Acceptance-Based supervision models in the literature?
- 6. Any critiques for the presenters' current model?
- Is There Any Difference Before and After The ACT Training with Psychiatry Residents
 - K.Fatih Yavuz, MD, Bakirkoy Psychiatry Education and Research Hospital, Istanbul, Turkey
 - I am a psychiatrist and Cognitive-Behavioral therapist. After my training about Acceptance and Commitment Therapy I realized that I am more motivated to apply therapeutic interventions to my patients at my hospital. I started to see my patients without DSM defined disorders point of view. This situation provided me flexible action area during sessions with my patients. I have read an interesting study about the usability of ACT after training. In the same vein of this study, I am planning a study with psychiatrists which are at the same time cognitivebehavioral therapists. I want to understand: a) the usability of ACT after training, b) whether there are any motivational changes about applying therapeutic interventions after ACT training, c) the changes about expectations from pharmacotherapy and other treatment methods, d) whether there is a change about focusing on symptom reduction to functional behaving, e) whether there is a change pharmacotherapy usage. My questions concern the following:
 - 1. ACT training program content.
 - 2. Assessment materials.
 - 3. Study design.

Tuesday Afternoon 3:25pm

93. Contributions of Relational Frame Theory to Interventions for Persons with Developmental Disorders INVITED LECTURE (3:25-4:15pm) Components: Conceptual Analysis, Literature review, Original data, Didactic presentation Categories: RFT, Edu. settings, Developmental

<u>Disabilities</u> Target Audience: Interm. Location: Ballroom B

Chair: Tim Weil, University of South Florida Ruth Anne Rehfeldt, Ph.D., Southern Illinois University

This address will delineate the basic tenets of



Relational Frame Theory and the research in support of each. Specifically, the presentation will focus upon aspects of RFT that have inspired educational interventions for individuals with autism and other developmental disorders. I will emphasize the role of multiple

exemplar instruction in establishing relational repertoires, and will focus upon basic rudimentary frames of sameness leading up to frames of distinction, opposition, and deictic frames that are involved in perspective-taking.

Educational Objectives:

- 1. Describe the basic tenets of RFT.
- 2. Recognize what RFT contributes to educational interventions for individuals with developmental disorders.
- 3. Recognize the research in support of Objective #2.
- 94. The Future of Doctoral Psychology Training in CBT: Report of the Inter-organization Task Force on Cognitive and Behavioral Psychology Doctoral Education

INVITED LECTURE (3:15-4:15pm) Components: *Conceptual Analysis*,

Categories: Superv., Train. & Dissem., Edu. settings, training in doctoral psychology

Target Audience: Beg.

Location: Ballroom C

Chair: Joseph Ciarrochi, Ph.D., University of Western Sydney James D. Herbert, Ph.D., Drexel University

As the field of cognitive behavioral psychology (CBP; broadly defined) has gained prominence within



applied psychology, programs claiming to train psychologists in this family of approaches have proliferated. This has led not only to concerns about quality control, but more fundamentally to what the core constituents of CBPoriented programs should be. In an effort to address these questions, the Association for

Advancement of Behavioral and Cognitive Therapies convened a task force representing 14 of the major

scientific and professional organizations with an interest in CBP-oriented doctoral psychology education, including the ACBS, with the goal of drafting guidelines regarding CBP education and training. The group met in March of 2011, followed by monthly conference calls, ongoing document exchanges, and a final meeting in January, 2012. The present talk will provide an overview of the guidelines

that emerged from this effort. The sensitivities of contextual behavioral science were well received and are reflected in the final document. Perhaps most noteworthy, the task force recommendations call for explicit attention to the philosophy of science in training programs in CBP, regardless of the specific subtype of CBP emphasized by any given program. The task force report is likely to shape doctoral training in CBP over the next decade.

Educational Objectives:

- 1. Appreciate the need for training standards for doctoral programs emphasizing cognitive behavioral psychology.
- 2. Describe the outcome of an inter-organizational task force that has recently established such standards.
- 3. Articulate the ways in which the particular sensitivities of contextual behavioral science are reflected in the task force recommendations.

95. ACT in inpatient mental health settings: Implementation and practical structures supporting it

PANEL (3:25-4:15pm)

Components: *Conceptual analysis, Didactic presentation*

Categories: Clin. Interven. & Interests, Other, Inpatient ACT therapy

Target Audience: Beg., Interm., Adv.

Location: Ballroom G

Chair: Trym Nordstrand Jacobsen, DPS Molde, Norway (District Mental Health Services Center)

Trym Nordstrand Jacobsen, DPS Molde, Norway (District Mental Health Services Center)

Didrik Heggdal, Vestre Viken Health Trust, Norway Arne Lillelien, Vestre Viken Health Trust, Norway

The use of ACT in inpatient mental health settings have rarely been described in the written litterature, and when described it has been ACT as a minor part of the patients stay and treatment at the inpatient setting. Inpatient settings can be very useful contexts for doing intensive, holistic and well coordinated treatment. In this panel the following questions will be addressed from a practical view, based on the panelists own experiences of implementing ACT as a foundation for the complete array of treatment services offered at different inpatient mental health settings in Norway: 1. How to get ACT into inpatient settings; 2. How to set up an ACT-based inpatient treatment program where all inpatient services are 'ACTified'; 3. What sort of structures can support and enhance ACT implementation and treatment effectiveness in inpatient settings?

Educational Objectives:

- 1. Design ways of getting ACT into inpatient settings.
- 2. Set up an ACT-based inpatient treatment program where all inpatient services are built around the psychological flexibility model.
- Describe and talk about explicit structures within an inpatient setting that will support and enhance both implementation and treatment effectiveness of an ACT based program.

Tuesday Afternoon Plenary 4:30pm

96. Finding True Refuge: Meditative Pathways In the Face of Difficulty

INVITED LECTURE (4:30-5:45pm)

Components: Didactic presentation

<u>Categories: Clin. Interven. & Interests, Theory &</u> <u>Philo., Meditation; Buddhist Psychology; Healing</u> <u>Difficult Emotions; Spiritual Transformation;</u> <u>Genesis of self-aversion</u>

Target Audience: Beg., Interm., Adv. Location: Grand Ballroom

- Chair: Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training Division
- Tara Brach, Ph.D., Insight Meditation Community of Washington, DC

A basic tenet in Buddhist psychology is that our suffering arises out of a mistaken sense of who (or what) we are. The pathway to healing and freedom includes the cultivation of mindfulness and compassion—attentional trainings that loosen our limiting sense of identity. As we bring these facets of a meditative attention to habitual patterns of fear and



shame, we discover what is called our "true refuge," our own boundless, awakened nature.

In this talk we will explore how our attempts at

finding security and love often further separate us from true refuge, and how the different components of meditation can serve to carry us home. The session will include didactic presentation and guided reflections.

Educational Objectives:

- 1. Explain basic principles of Buddhist Psychology.
- Examine the role and mediating mechanisms of meditation practices in healing emotional suffering.
- 3. Utilize Buddhist mindfulness and compassion practices in addressing fear and shame.

Follies! 8:00-Midnight

Tuesday • July 24 • Evening

Follies

8:00pm - 11:00"ish" pm Grand Ballroom

(Doors open at 8:00pm, but we expect the Follies "show" to kick off around 8:30-8:45pm.)

The Follies began as a manifestation of one of our CBS values -- remembering to hold ourselves and the work lightly -- and what better way to do so than through humor? Today it consists of songs, skits, and funny powerpoint presentations related to the conference, ACT, RFT, and psychology, put together by conference attendees, and coordinated by our own lovely Sonja Batten & D. J. Moran (he's lovely too). (When you get to DC, if you have an event to add to the follies let Sonja know so that she can help you and get you on the schedule.)

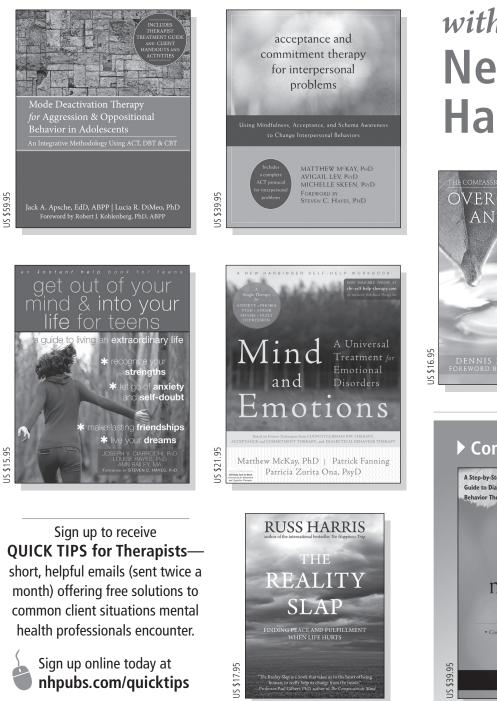
This event is open to conference attendees and spouses/partners (even though they may not understand all of the psychology humor!); while children are welcome to attend, please be aware that the event can get a bit bawdy at times.

A cash bar will be available... of course.

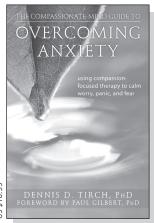
Dance Music will be played in Ballroom H, after the Follies (until midnight). Booty shaking is encouraged.



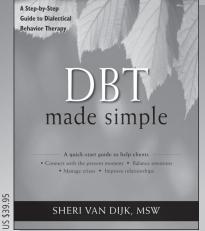
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Program Detail • Wednesday • July 25

Wednesday Morning 7:00am

97. Embodying ACT, Embracing RFT: How to apply body-based mindfulness interventions in clinical practice WORKSHOP (7:00-7:50am)

Components: Experiential exercises Categories: Clin. Interven. & Interests, Beh. med., Embodied Mindfulness, clinical application of RFT Target Audience: Interm., Adv.

Location: Ballroom A

Graciela Rovner, MSc, Rehabilitation Medicine at Gothenburg University, & Karolinska Institutet, Stockholm, Sweden; Universidad Austal, Argentina Manuela O'Connell, Clinical Psychologist, Private Practice, Universidad de Belgrano, Argentina

Body based interventions are privileged vehicles to work experientially and can provide a context for operationalize and deepening all the core process of ACT. Our body, when approaching with compassion, is an inner room for change, flexibility and insight. In this workshop, you, as experienced ACT practitioner, will find new ways to lead mindfulness, to implement physical and body-based metaphors and to increase awareness about their function (functional approach in context). In the workshop you will develop higher skills in guiding body based mindfulness interventions in ACT coherent terminology, tone and intonation.

Educational Objectives:

- 1. Discuss the body related conceptualization of mindfulness and its relation to RFT.
- 2. Implement body-based mindfulness interventions adapted for the ACT model that work well in both individual and group settings.
- 3. Increase the awareness in using verbal language while guiding and how much to guide and how much I allow the client to experience.

98. JourneyDance: Dancing ACT WORKSHOP (7:00-7:50am)

Components: Experiential exercises Categories: Clin. Interven. & Interests, conscious dance Target Audience: Beg.

Location: Ballroom H

Kathleen Morris, Ph.D., Private Practice

The "conscious dance" movement is growing in momentum across the country, and can potentially be a great adjunct to ACT work. So what is "conscious dance?" Loosely defined, it is dancing, led by an instructor, that typically allows for a significant amount of "free form" dance elements (i.e. dancers choose their own movements), the atmosphere is one that encourages being present, open, and accepting - encouraging dancers to "feel" their feelings and open up to a larger sense of self and connectedness with others. Ecstatic dance, therapeutic dance, yoga dance forms could all typically be included as part of this movement.

In this workshop, participants will experience firsthand the power and exuberance of conscious dancing as I lead them in JourneyDance (developed by Toni Bergins). We will also have time to discuss how ACT processes were woven into the dance experience and brainstorm other ways to meld these two powerful approaches.

Educational Objectives:

- 1. Utilize movement in order to contact fully and passionately with the present moment and with both yourself and others in a more defused and accepting way.
- 2. Practice ACT processes of present moment connection, letting go of struggle and avoidance by openly feeling and expressing bodily your emotions, defusing from limiting thoughts, and having a more accepting, larger experience of Self.
- **UNNER** Recognize and describe how ACT processes can be (and usually inherently are) embedded in certain forms of conscious dancing, thus making this a potential adjunct for complimenting ACT therapies.

Wednesday Morning 8:00am

M. Chapter & SIG Support meeting CHAPTER/SIG MEETING (8:00am-8:50am)

Location: Ballroom A

Steve Hayes, University of Nevada, Reno

This is an open meeting (all are welcome) for those affiliated with current ACBS Chapters & SIGs and those thinking about starting one. This meeting will provide an opportunity to brainstorm about how we can all best work together and support each other and the community.

Wednesday Morning 9:00am

99. New Frontiers in Innovative Practice: An Existential-Integrative Approace to Therapy WORKSHOP (9:00-Noon)

Components: Experiential exercises, Didactic presentation, Case presentation, Role play Categories: Clin. Interven. &

Interests, Prof. Dev., Adult therapy for PTSD, depression, and anxiety Target Audience: Interm.

Location: Grand Ballroom Kirk J. Schneider, Ph.D.,

Saybrook University and the Existential-Humanistic Institute

This workshop will discuss and demonstrate a comparatively new treatment perspective grounded in



existential-humanistic and broader principles of practice. This treatment perspective is called "Existential-Integrative Psychotherapy," which is one way of understanding and coordinating a variety of established treatment approaches (e.g., CBT) within an overarching existential or experiential framework. The format for this workshop will proceed as follows: (1) An overview of the existential-integrative (EI) approach to practice, with a particular focus on the cultivation of therapeutic presence and the power of presence to enhance and deepen therapeutic transformation. (2) A discussion and excerpted viewing of "the case of Anita" which is featured in the

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g of "the case of Anita" which is featured in the APA video "Existential-Humanistic Therapy Over Time." At the time of the taping, Anita was a 48 year old, white female whose presenting problem was assertiveness at home and at work, but whose deeper challenge was a severe history of having been emotionally and physically abused, alcoholism, and life-stunting PTSD. (3) Live demonstration and discussion of the EI approach with a member of the audience. And (4) time permitting, general discussion of the relationship between EI practice and Acceptance and Commitment Therapy (ACT) in light of brief case examples.

Educational Objectives:

- 1. Discuss basic principles of existential-integrative practice.
- 2. Analyze some of the key parallels and contrasts between existential-integrative practice and other established practice modes, in particular Acceptance and Commitment Therapy.
- 3. Apply key principles of existential-integrative practice to one's own practice.
- 100. How ACT is Being Used in Organisations to Help Improve Performance and Wellbeing: Time Management Course WORKSHOP (9:00-10:30am)

Components: Experiential exercises

<u>Categories: Organizational behavior management,</u> <u>Performance-enhancing, Prof. Dev., Performance</u>

in the workplace

Target Audience: Beg., Interm., Adv. Location: Ballroom A

Rob Archer, Working with ACT

ACT is showing promise as an intervention in organisations. This interactive workshop is the same one being delivered in two major international businesses for senior executives looking to improve their time management skills as part of a Leadership Resilience programme. The workshop will begin with a presentation and background to the Leadership programme, and then continue to the workshop itself which focuses on how ACT skills can help with problems like multitasking, distraction, disengagement, sedentary working and poor work life balance.

Educational Objectives:

1. Describe how ACT is being used in organisations commercially.

- Explain how ACT is being used to create more effective organisations and how ACT can be packaged in new ways.
- 3. Discuss and share practical tips and suggestions for communicating ACT principles to non-clinical populations, for example showing how ACT can best be explained to leaders within organisations.

101. Clinical Intervention in Traumatic Brain Injury Rehabilitation: Mixing ABA and ACT to Improve Outcomes

SYMPOSIUM (9:00-10:30am)

Components: Case presentation

<u>Categories: Performance-enhancing interventions,</u> <u>Clin. Interven. & Interests, Traumatic Brain</u> <u>Injury, Applied Behavior Analysis</u> *Target Audience: Interm.*

Location: Ballroom B

- Chair: Timothy M. Weil, Ph.D., BCBA, University of South Florida
- Discussant: Thomas G. Szabo, University of Nevada, Reno
- Effects of Values on Program Compliance in an Individual with Traumatic Brain Injury Jeffery Oliver, University of South Florida John Jaberg, M.A., BCBA, NeuroRestorative Deborah Westerlund, M.A., BCBA, NeuroRestorative Timothy Weil, Ph.D., BCBA, University of South Florida
- The Utilization of a Token Economy and ACT Intervention to Acquisition Transitional Skills: A Case Study

Bryan Brandt, University of South Florida Deborah Westerlund, M.A., BCBA, NeuroRestorative Jon Jaberg, M.A., BCBA, NeuroRestorative Timothy M. Weil, Ph.D., BCBA, University of South Florida

 Using Acceptance and Commitment Therapy to Decrease the Frequency of Undesirable Verbal Behavior with an Individual Diagnosed with Traumatic Brain Injury

Alexander McLean, University of South Florida Jon Jaberg, M.A., BCBA, NeuroRestorative Deborah Westerlund, M.A., BCBA, NeuroRestorative Timothy M. Weil, Ph.D., BCBA, University of South Florida

This symposium will include three papers on interventions with individuals diagnosed with TBI who are in rehabilitation settings prior to release to the community. Traditional ABA and CBT are commonly used in the re-habilitation of individuals whose lives have changed to varying degrees due to trauma to their brain. Consistent with the injury, it is often the case that individuals experience great difficulty in transitioning back to the community where they express deficits and excesses in social and behavioral functioning. While it is agreed that neither approach produces robust outcomes, ABA is shown to greatly increase TBI clients' abilities to re-acquire basic skill sets. The addition of ACT components to ABA interventions is showing promising effects on both motivation and identification of valued direction.

Educational Objectives:

- 1. Identify applications of ABA.
- 2. Explain the role of behavioral intervention in TBI rehabilitation.

3. Describe the interplay between ABA and ACT interventions in producing more robust outcomes with TBI clients.

102. Models of Psychotherapy Development: **Putting Contextual Behavioral Science** Strategies in Their Larger Context PANEL (9:00-10:30am)

Components: Conceptual analysis Categories: Theory & Philo., Other, Research Strategy Target Audience: Beg., Interm. Location: Ballroom C

Chair: Steven C. Hayes, Ph.D., University of Nevada Lisa Onken, Ph.D., National Institute on Drug Abuse Brandon Gaudiano, Ph.D., Brown University William C. Follette, Ph.D., University of Nevada

Contextual behavioral science is an approach to knowledge development, that encompasses a set of strategic views of treatment development. The present panel will examine contemporary approaches to treatment development, including syndromal and technological approaches, stage model approaches, functional analysis, translational methods, transdiagnostic methods, and other strategies, and will consider their relationship to CBS. The experts on this panel have all written extensively on the issues involved in treatment development and will bring their expertise to consider how we might best develop methods that work for the people we serve.

Educational Objectives:

- 1. Describe the stage model of treatment development.
- 2. Describe the role of syndromes in current models of treatment development.
- 3. Compare a CBS approach to traditional models of treatment development.

103. Behaviorally Speaking: From Packages To **Change Processes**

WORKSHOP (9:00-Noon)

Components: Conceptual analysis, Experiential exercises, Didactic presentation, Case presentation, Role play

Categories: Clin. Interven. & Interests, Superv., Train. & Dissem., behavioral principles

Target Audience: Beg., Interm., Adv. Location: Ballroom F

Kelly Koerner, Ph.D., Evidence-Based Practice Institute, LLC Matthieu Villatte, Ph.D., University of Louisiana Jonathan Kanter, Ph.D., University of Wisconsin-Milwaukee

Together with the audience, Kelly Koerner, Matt Villatte and Jonathan Kanter will analyze clinical vignettes that provide opportunities for different valid therapeutic responses. We will conceptualize the client's problematic responses in terms of relevant behavioral principles and change mechanisms that might be in play, especially those that ACT and RFT, BA, DBT, FAP, and emotion focused therapy might posit. Then we'll explore specific intervention paths and articulate why they might work in terms of behaviorally defined change processes. Presenters will model differing interventions and styles and debrief

what worked well and what we could have done differently. Participants will 'try on' selected interventions in pairs to practice and provide/receive feedback to each other. Our goal is to guide participants toward the use of integrated behavioral principles in their case conceptualizations and intervention plans, rather than circumscribed reliance on specific treatment packages, to maximize flexibility, efficiency, and effectiveness with a variety of clinical situations.

Educational Objectives:

- 1. Functionally analyze provided client vignettes and specify client improvements to target. **WEDZESDA**
- 2. Critically and openly compare change processes modeled by presenters.
- 3. Use the modeled change processes in role-play.

104. Fire & Ice: Working with Clients' **Emotions in Session**

WORKSHOP (9:00-10:30am) Components: Experiential exercises, Case presentation, Role play

Categories: Clin. Interven. & Interests, emotion dysregulation, alexithymia, emotional avoidance Target Audience: Interm., Adv.

Location: Ballroom G

Jennifer Villatte, M.A., University of Nevada, Reno Robyn Walser, Ph.D., National Center for PTSD, Dissemination & Training Division

Most clients seeking therapy have some difficulties managing their emotions, but these difficulties can manifest in different ways. Some clients run emotionally hot, with frequent or unpredictable expressions of intense emotions. Other clients seem emotionally cold, distant, or numb, with very little emotional expression at all. Both Fire and Ice clients are difficult to work with, in part because of the emotional impact they have on therapists. This workshop will help therapists explore their own reactions to Fire and Ice clients and break down barriers around working with emotion in the therapy room. Through a series of experiential exercises and role plays, we will practice responding to emotional intensity or absence with courage and compassion. We will then demonstrate strategies for modeling, evoking, and reinforcing effective emotional expression with clients and, finally, provide opportunities for deliberate practice and substantive feedback.

Educational Objectives:

- 1. Assess the function of emotional excesses and deficits.
- 2. Practice modeling effective emotional expression with clients.
- 3. Evoke and reinforce effective emotional expression.

105. ACT with Depression

WORKSHOP (9:00-10:30am)

Components: *Experiential exercises, Didactic presentation, Case presentation, Role play* Categories: Clin. Interven. & Interests, Other,

Depression

Target Audience: Beg., Interm., Adv. Location: Ballroom H

Rob Zettle, Ph.D., Wichita State University Nakisha Carrasquillo, Wichita State University

This workshop will focus on the application of ACT with clients with depression as a presenting problem. A case conceptualization approach will be emphasized in conducting functional assessments to identify

SEDZENDAX

multiple processes that may contribute to depression within the "hexainflex" model of psychological inflexibility and human suffering. Specific therapeutic techniques and strategies tailored to individual clients based upon such a case conceptualization approach will then be discussed and demonstrated. Special considerations and challenges in extending ACT to treatment of depression will also be covered.

Educational Objectives:

1. Apply an ACT-consistent case

- conceptualization approach to presenting problems of depression.
- 2. Identify and assess for mutiple processes that may contribute to depression.
- Adjust techniques and strategies within ACT based upon unique considerations and issues that may arise in working with depressed clients.

106. ACT and Social Work: Shared Values, Shared Goals

PANEL (9:00-10:30am) Components: *Conceptual analysis* <u>Categories: Social Work</u> *Target Audience: Beg., Interm., Adv.*

Location: Amphitheater

Chair: Matthew S. Boone, MSW, Cornell University Counseling and Psychological Services

Julie Hamilton, LMSW, ACSW, CAADC, Private Practice/Ulliance

Kate Morrissey, LCSW, Advantage Behavioral Health Systems, Rubber Soul Yoga, Athens GA Brian Mundy, LCSW, Institute for Community Living, Inc.

Joanne Steinwachs, LCSW, Private Practice, Denver CO

Acceptance and Commitment Therapy (ACT) is especially well-suited to the practice of social work. Both share a focus on context, strengths, and understanding human suffering in ways that avoid pathologizing individuals and communities. The number of social workers employed in the US is well over three times the number of psychologists (Bureau of Labor Statistics, 2011), and clinical social workers are by far the largest providers of mental health services (Substance Abuse and Mental Health Services Administration, 2010). At the same time, social workers represent a small number of the members of the Association for Contextual Behavioral Science (ACBS), ACT is underrepresented in the social work literature, and evidence-based treatment development is only a small part of research in social work. This panel will initiate a preliminary discussion

on the points of convergence and divergence between ACT, Contextual Behavioral Science (CBS), and social work. A panel of social work practitioners will explore ACT's relevance to social work values, clinical social work practice, and broader social work issues such as social justice and working with communities. The panelists will also discuss what social work has to offer ACT, including a focus on large-scale change, strengths-based practice, and serving people living with poverty and other forms of oppression. Strategies for disseminating ACT to the field of social work will be explored. Attendees will be encouraged to be part of the discussion, and input from psychologists, doctors, and other helping professionals will be welcomed.

Educational Objectives:

- 1. Explore how ACT, CBS, and social work can all work for challenging populations (such as those in poverty).
- 2. Understand how to disseminate ACT and CBS in the field of social work.
- 3. Develop a better understanding of what social work has to offer to ACT and CBS.

107. Introduction to the IRAP Part 2: Clinical Applications

WORKSHOP (9:00-Noon)

Components: Conceptual analysis, Original data Categories: RFT, Clin. Interven. & Interests, IRAP,

psychopathology Target Audience: Interm. Location: Brookside A

Ciara McEnteggart, NUI Maynooth, Ireland Emma Nicholson, NUI Maynooth, ireland Dr. Yvonne Barnes-Holmes, NUI Maynooth Prof. Dermot-Barnes-Holmes, NUI Maynooth

There is now a considerable body of empirical evidence to suggest that the IRAP is a robust measure of implicit attitudes. And there is a steady growth of evidence regarding its use in socially and personally salient areas, such as racial bias, dietary choices, selfesteem, and even cocaine rehabilitation. Several preliminary studies have attempted to explore the use of the IRAP with clinical phenomena, although very few are published. This slower progress reflects several experimental issues that have hampered the design of the 'right' IRAP. For example, it has proven very difficult to develop IRAPs that present personalised and salient psychological content for an individual participant. And there are questions about whether such an IRAP is even necessary or useful. The current workshop explores the use of the IRAP in this area, works through the obstructions that researchers have encountered thus far, and explores solutions that will permit greater use of the procedure in the study of clinical phenomena.

Attendees should bring their laptops and have already downloaded and installed the IRAP program. You can get it here: IRAPresearch.org

Educational Objectives:

1. Discuss the use of implicit measures in the domain of psychopathology.

- 2. Design an IRAP e.g. selecting appropriate stimuli.
- 3. Analyse results and applying results to current theory and models.

108. Who ACTs? An Exploration of Self-as-Context

WORKSHOP (9:00-Noon)

Components: Experiential exercises, Didactic presentation, Role play

<u>Categories: Clin. Interven. & Interests, Theory &</u> <u>Philo., Mindfulness</u>

Target Audience: Beg., Interm., Adv.

Location: Brookside B

Michael Baugh, LCSW, California Institute of Integral Studies

The mystery of "who we really are" remains after defusing from "thoughts about who we are". ACT metaphors like the chessboard point toward what can't be adequately named or described, for -- unlike everything else in our experience - what's aware within us is not a "thing". ACT and RFT have reached into Zen and "nondual" descriptions of mystical experience for guidance about helping clients access this "no-thing". Can we discover more by bringing behavioral tools deeper into what these nondual teachers can show us? What if the expansive chessboard beneath "our" chess pieces turns out to be the same chessboard beneath all the "pieces" of the universe? If we directly experience that we are "what's aware at the heart of everything", how will that affect the way we do ACT?

This experiential workshop includes 40 minutes of video dialogue with Steve Hayes about ACT and "enlightenment"; the qualities of the awakening experience, the difficulties presented as behavioral science attempts to "make sense of spirituality," and his near-death experience that led to the creation of ACT. We will explore the range of current ACT techniques for contacting Self-as-Context, compared with additional methods from nondual teachers like Adyashanti, and consider whether the process of spiritual awakening may usefully constitute a "Fourth Wave of Behaviorism."

Educational Objectives:

- 1. Implement (or improve their implementation of) several ACT interventions for accessing self-ascontext within themselves and their clients.
- 2. Compare and contrast ACT goals and techniques with those of Zen and nondual teachers.
- 3. Understand self-as-context from a deeper and more defused perspective.

109. ACT for teachers, parents and kids SYMPOSIUM (9:00-10:30am)

Components: Conceptual Analysis, Original data, Experiential exercises, Case presentation

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Edu. settings, Community</u> <u>applications, parenting, Autism spectrum disorder,</u> <u>children, social skills, anxiety, ACT in the</u> <u>workplace</u> *Target Audience: Beg., Interm., Adv.*

Target Audience: Beg., Interm., . Location: Forest Glen

- Chair: Alyssa Wilson, Southern Illinois University-Carbondale
- ACT in Community Workshops
 - Candice Baugh, M.A., LMHC, NYU School of Medicine Alexis Llewellyn, Ph.D., Katy Center for Psychology & Counseling Services
- The influence of Acceptance and Commitment Therapy (ACT) for the psychological well-being of mothers raising a child diagnosed with an autism spectrum disorder

Tiina Holmberg Bergman, clinical psychologist, Autism Centre for young children in Stockholm and University of Jyväskylä, Finland, Sweden

SEDZESDAY

Fredrik Livheim, M.Sc., FORUM - Research Centre for Psychosocial Health, Department of Clinical Neuroscience, Karolinska Institute, Stockholm, Sweden Raimo, Lannalainen, Department of Psychology

Raimo Lappalainen, Department of Psychology, The University of Jyväskylä, Finland

- Closing the Gap: Educational Perspective and ACT intervention for KIDS that needs social improvements
 - Valentina Tirelli, University of Parma, Learning Centre TICE
 - Roberto Cattivelli, University of Parma, Istituto Ospedaliero di Sospiro

The papers in this symposium focus on the use of ACT interventions in nonclinical populations. The first paper will examine the use of ACT interventions in a mentoring program and workshops targeting parents. The second paper investigates the effects of an ACT workshop on depression and stress in a sample of parents who have children with autism. The third paper examines the effects of an ACT intervention on social and emotion skills with children with learning disabilities.

Educational Objectives:

- 1. Identify ACT components that can be applied in brief community workshops.
- 2. Describe an ACT Intervention for kids in educational settings.
- 3. Explain the benefits of ACT with children with learning disabilities.

110. Just Not a Math Person: Academic Anxiety, Psychological Flexibility, and Academic Success

SYMPOSIUM (9:00-10:30am)

Components: Original data Categories: Performance-enhancing interventions,

Psychological Flexibility

Target Audience: Beg.

Location: Glen Echo

Chair: Emily Squyres, University of Louisiana, Lafayette Discussant: Kate Kellum, University of Mississippi

- The Aftermath of Anxiety: The Role of Psychological Flexibility in Math Anxiety in College Students Skylar Fusilier, University of Louisiana, Lafayette Danielle Moyer, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette
- Going From Null to Neat-O: Psychological Flexibility Processes Applied to a Behavioral Statistics Study Group

Ashlyne Mullen, University of Louisiana, Lafayette

Emmie Hebert, University of Louisiana, Lafayette Gina Quebedeaux, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette

 Verbal, Ouantitative, and Writing! Oh My!: Skill vs. Flexibility-Focused Preparation for Graduate Record Examination Performance

Emily Squyres, University of Louisiana, Lafayette Shiloh Eastin, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette

The university experience is filled with obstacles to continued academic success. Many of these obstacles are difficult high-stakes tasks while others are simply

a required piece of the student's academic puzzle. These experiences are difficult not only because of the skill they require of students but also because of the dread they evoke. Thus, for many students, everything associated with tasks like advanced statistics, standardized tests or even an introductory math class, exerts aversive control on behavior, resulting in a narrow, rigid repertoire, and limited learning. This symposium includes three studies that examined the relationships among

EDNESDAY psychological flexibility, academic anxiety, and academic success. The first study explores the relationships among psychological flexibility and math anxiety. The second study examines the impact of a statistics study group that includes a willingness component on statistics-related anxiety, willingness toward that anxiety, and course performance. The third study will examine the impact of four practice conditions on Graduate Record Exam performance. Targeting psychological flexibility for college achievement will be broadly discussed in light of the findings.

Educational Objectives:

- 1. Explore the relationships between academic anxiety, psychological flexibility, and academic success.
- 2. Examine the course of academic anxiety and psychological flexibility.
- 3. Compare content- or flexibility-based practice in terms of performance outcome.

111. Unearthing the development of eating disorders: From conceptualization to intervention

SYMPOSIUM (9:00-10:30am) Components: Conceptual analysis, Original data Categories: Clin. Interven. & Interests, Theory & Philo., RFT, Eating Disorders

Target Audience: Beg., Interm., Adv. Location: Linden Oak

Chair: Maria Karekla, Ph.D., University of Cyprus Discussant: Giovambattista Presti, M.D., Ph.D., IULM University, Milan (Italy)

- Relational Frame Theory Applied to Disordered Eating: Some Words are Hard to Swallow Jillian B. Jacobelli, University of Louisiana, Lafayette Emily Sandoz, Ph.D., University of Louisiana, Lafayette
- Psychological Inflexibility as a risk factor for the development of Eating Disorders in adolescents

Maria Koushiou, M.A., University of Cyprus Anthi Loutsiou-Ladd, PsyD, University of Cyprus Andria Christodoulou, B.A., University of Cyprus Chara Demetriou, B.A., University of Cyprus Ioanna Kapetaniou, B.A., University of Cyprus

The proposed symposium addresses the vast spectrum of disordered eating, namely Eating Disorders (ED) from an acceptance-based approach. The work presented builds on empirical and theoretical ground and includes: a) the review of the literature on how derived relational responding accounts for the development and maintenance of ED in a Relational Frame Theory context, and b) the presentation of empirical data from a study measuring psychological inflexibility in relation to eating attitudes. Conclusions will be derived from all studies on the conceptualization, assessment and intervention of ED in an acceptance-based context. Implications for future research will be discussed.

Educational Objectives:

- 1. Explain eating pathology based on Relational Frame Theory and Acceptance and Commitment Therapy (ACT).
- 2. Describe how the mechanism, namely psychological inflexibility, leads to the development of Eating Disorders (ED)
- 3. Compare the effectiveness of an ACT intervention in comparison to Cognitive and Behavioral Therapy in Eating Disorders not otherwise specified.

112. RFT and Process Research Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (9:00-10:30am)

Components: Theoretical and philosophical foundations, Relational Frame Theory, Clinical Interventions and Interests

Categories: Qualitative Measurement, Rule Governed Behavior, IRAP

Target Audience: Beg., Interm., Adv. Location: Oakley

- Analysing gualitative interviews to try to determine functions of selfing - can it be done? Robert Styles, Australian National University Paul Atkins, Australian National University
 - Is it possible to code normal language for ongoing selfconstruction and self-rules in use? This work aims to develop a qualitative and behavioral measure of 1) self-as-story, self-as-process, and self-as-context; and, 2) the function of self-rules in use Early applications of the measure to interviews before and after an MBSR course explored how individuals increasingly identified less with the content of experience in terms of identity labels and characteristics and more with the process of ongoing self-construction and the witnessing of experience. It seems the inner contextual change from literality and causality to mindful engagement naturally brings about increases in value-directed action and a shift from forms of pliance to tracking. Although we have made some progress on this task of developing a measure of changes in self-construction and selfrules in use, we still have many significant questions about the viability of our work from the perspective

of Contextual Behavioral Science and would greatly appreciate feedback:

- 1. Is our approach really behavioral? We are capturing the way people talk but not, in a sense, capturing what they do. So, for example, it is possible that someone who is less well educated may not talk about the experience in such a sophisticated way but still *act* with great wisdom and maturity.
- 2. How can we ensure that the qualitative analysis is functional not just descriptive?
- 3. Can self-rules be discriminated in terms of pliance, tracking and augmentals just by viewing the text without necessarily understanding the personal functions of the statement in context (i.e. their intentions)?
- 4. Have we defined self-as-context too broadly such that it is really just defusion? What might be some other examples of verbal acts that we could reasonably code as self-as-context?
- Stop Making Sense: Coherence as a Basic Behavioral Process
 - Michael J. Bordieri, M.S., University of Mississippi Karen Kate Kellum, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi
 - Central to relational frame theory is the assumption that the reinforcing properties of "making sense" serve as the driving force behind complex verbal behavior. That is, RFT presumes that humans develop the capacity to verbally relate anything to anything else because this behavior has a rich history of reinforcement. This "making sense" behavior is theorized to be at the core of advanced human functioning and interactions, but it is also thought to be directly linked to psychological distress and suffering. Until recently, the role of coherence in complex human behavior has primarily been addressed through theoretical assertions. This empirical research line is designed to further understanding in this area by studying coherence as operant behavior. An emphasis will be placed on building experimental preparations designed to assess whether coherence acts as a generalized conditioned reinforcer, develop a basic behavioral measure of defusion (i.e., letting go of "making sense"), and explore the potential utility of a behavioral measure of defusion in mediational analyses of ACT based interventions.
 - How do we expect participants' propensity towards coherence to relate with measures of psychological distress and flexibility? Given that the relationship is not likely to be linear, how can we appropriately model the relationship?
 - 2. How can we experimentally parse out the distinction between cognitive fusion and value-based action given that both are marked by a primary sensitivity to verbal stimulus control (i.e., rule governed behavior)?
 - 3. What are the necessary features of a basic experimental measure of defusion both in terms of research and clinical utility?
- Rapid Relational Responding and Drug Use: Developing a laboratory based model for guiding clinical interventions.
 - Kenneth M. Carpenter, Ph.D., Columbia University/New York State Psychiatric Institute
 - Previous research in our clinic has indicated that users of cocaine who are seeking treatment have difficulty maintaining high performance levels on the IRAP although there is a systematic relationship between

IRAP performance (D-scores) and treatment outcome. The purpose of the present proposal is to seek feedback and guidance on developing a laboratory model that would 1. provide a platform to investigate the relationship between rapid relational responding and drug self-administration and 2. set the occasion for developing procedures that may alter the relationship between rapid relational responding and drug use.

- 1. The manual used for the creation of the Internet-based intervention is an eight-week/session intervention. The intervention we are comparing the Internetbased intervention to is much shorter. What should be reserved and what should be removed from the ACT manual?
- Should a pilot study be included to initially deem which parts of the sessions should be included in the intervention?
- 3. How is it best to adapt the ACT manual to the Internet? Should more games be included? How do we prevent this from being only a game? When valuable information is given, how do we make sure they do not simply click on the next button until they get to the end? How do we keep it interactive and interesting and still give them all the information they need?
- EDZESDAY
- 4. Which are the most appropriate outcome measures to include in the Internet-based intervention? More importantly, which are the most appropriate process measures to include? The measures should be short and to the point as adolescents lose interest when they are asked too many questions. Which are the best measures to use to keep attrition rates low?

Wednesday Morning 10:45am

113. The Course, Contribution and Verbal Nature of Valued Living

SYMPOSIUM (10:45-Noon)

Components: Original data Categories: RFT, Prevention & Comm.-Based, Values Target Audience: Beg.

Location: Ballroom A

- Chair: Alexander D. Plaisance, University of Louisiana, Lafayette
- Discussant: Jennifer Plumb-Vilardaga, M.A., University of Nevada Reno
- Time of the Season: Valued Living in College Students over the Course of a Semester Gina N. Quebedeaux, University of Louisiana, Lafayette Emily K. Sandoz, Ph.D., University of Louisiana, Lafayette
- Seeing Meaning: Transformation of Values Functions Alexander D. Plaisance, University of Louisiana, Lafayette
 Emmie Hebert, University of Louisiana, Lafayette
 Shelley Greene, University of Louisiana, Lafayette
 Emily K. Sandoz, Ph.D., University of Louisiana, Lafayette
- The Effects of Adding Values to a Goal Setting Intervention on Academic-Related Outcomes in College Students
 - Maureen K. Flynn, M.A., University of Mississippi S. Kurz, University of Mississippi K. G. Wilson, Ph.D., University of Mississippi
 - K. K. Kellum, Ph.D., University of Mississippi

Maintaining action consistent with one's chosen values is the primary purpose of Acceptance and Commitment Therapy (ACT). Establishing the nature of valuing and valued living may contribute to ongoing progress in the development of ACT and other valuesbased treatments. The papers in this symposium seek to contribute to this body of work by exploring the course of valued living over time, the incremental effect of contacting values with goal setting, and the verbal processes involved in contacting values. Implications for treatment and further research will be discussed.

Educational Objectives:

1. List common values that are held by college students.

2. Describe how transformation of function through expressing values can serve as a model for how experiences become meaningful.

3. Explain how to add a values component to a goal setting intervention to improve outcomes.

114. Fit Learning: Contextual Behavior **Science in Education**

SEDZENDAX SYMPOSIUM (10:45-Noon)

Components: Conceptual analysis, Original data Categories: Edu. settings, Theory & Philo., Related FC approaches, RFT, Measurement, Contextual

Education Science, Precision Teaching, Behavioral Education

Target Audience: Beg. Location: Ballroom B

Chair: Nicholas M. Berens, Ph.D., Fit Learning Discussant: Steven C. Hayes, Ph.D., University of Nevada

· Measuring the Growth and Impact of Relational Operants: What the Standard Behavior Chart offers Functional Contextualism Kimberly N. Berens, Ph.D., Fit Learning Nicholas M. Berens, Ph.D., Fit Learning Kendra Brooks Rickard, Ph.D., Fit Learning William D. Newsome, M.A., University of Nevada, Fit Learning

- Direct Assessment of Relational Operants to Inform **Reading Comprehension Interventions** William D. Newsome, M.A., Fit Learning, University of Nevada Kendra Brooks Rickard, Ph.D., Fit Learning Kimberly Nix Berens, Ph.D., Fit Learning Nicholas M. Berens, Ph.D., Fit Learning
- Instructional Targets and Behavioral Units: Putting RFT into Practice in Education Kendra Brooks Rickard, Ph.D., Fit Learning William D. Newsome, M.A., Fit Learning, University of Nevada Kimberly Nix Berens, Ph.D., Fit Learning Nicholas M. Berens, Ph.D., Fit Learning

Fit Learning provides intensive supplemental behavioral education to children across a wide range of academic and socially important targets. Our methods produce fluent and flexible repertoires that improve a learner's academic and global functioning. This symposium will delineate the development of the Fit Learning model in terms of how standard measurement coupled with the functional units of RFT

have created a context for profound changes across a broad range of skills and learners. Specifically, it will be demonstrated that adherence to dimensional units of behavior measured in real time using the standard behavior chart enables the contextual analysis of large operant classes and frames. Furthermore, data will be presented showing the critical bi-directional relationship between assessment and intervention, and it will be demonstrated that ongoing program evaluation has contributed to the development of replicable programming lines.

Educational Objectives:

- 1. Describe the importance and benefits of dimensional units of behavior measured in real time.
- 2. Design intervention driven assessment procedures in educational settings.
- 3. Design RFT based interventions for reading comprehension and expressive writing.

115. Beyond Bars: Psychological Flexibility as a Model for Mental Health Care in Forensic Settinas

PANEL (10:45-Noon)

Components: Conceptual analysis

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Prof. Dev., Mental health in forensic settings

Target Audience: Beg., Interm. Location: Ballroom C

Chair: Michelle N. Jeanis, B.S., University of Louisiana, Lafayette

Jason B. Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Jai Amrod, Ph.D., Algoa Correctional Center, Jefferson City, Missouri

Kevin Polk, Ph.D., Togus VAMC

David C. Brillhart, Psy.D., Oregon State Hospital Corey Porche, University of Louisiana - Lafayette

Between half and two-thirds of people release from prison reoffend despite multiple reentry initiatives. Recently, the focus has shifted to adapting empirically based psychological treatments to improve the overall well-being of offenders, which should then lead to reentry success and reduced incarceration rates. ACT's psychological flexibility model may offer a means of conceptualizing and intervening on prisoner well-being and subsequent recidivism. This panel discussion will focus on applications of the psychological flexibility model in forensic settings. Panelists will discuss what this model may contribute, how it differs from dominant approaches in forensic settings, how it is uniquely applied with this population, how it may be most effectively integrated, and what research might support continued progress in this area.

- 1. Compare and contrast the psychological flexibility model to dominant approaches to mental health care and counseling in forensic settinas.
- 2. Discuss the practical issues associated with integration of the psychological flexibility model

into current approaches to mental health care and counseling in forensic settings.

3. Identify steps in research and dissemination that might be necessary for continued progress in this area.

116. ACT as a behavior medicine to improve health: pain management and smoking cessation

SYMPOSIUM (10:45-Noon) Components: Original data

Categories: Beh. med., Clin. Interven. & Interests, Chronic pain, smoking cessation

Target Audience: Interm.

Location: Ballroom G

- Chair: Mike Kemani, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute
- Discussant: Robyn Walser, NCPTSD Dissemination and **Training Division**
- ACT for adults with longstanding pain in a behavioral medicine setting – a presentation of outcome data from two randomized controlled trials
 - Mike Kemani, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute
 - Gunnar L. Olsson, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Physiol and Pharmacol, Karolinska Institute
 - Karin Jensen, Department of Clinical Neuroscience, Karolinska Institutet
 - Rikard K. Wicksell, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute
- Can high-risk adolescents change their smoking behaviors?: The Application of Acceptance and Commitment Therapy
 - Maria Karekla, Department of Psychology, University of Cyprus
 - Vasilis Vasiliou, Department of Psychology, University of Cyprus
 - Stella Savvidou, Department of Psychology, University of Cyprus
- Relationships between kinesiophobia and psychological inflexibility in youths suffering from longstanding pain
 - Linda Holmström, Behavioral Medicine Pain Treatment Service, Karolinska Univ Hospital; Dep of Women's and Children's Health, Karolinska Institute
 - Marie Klinga, Behavioral Medicine Pain Treatment Service, Karolinska Univ Hospital
 - Mike Kemani, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute
 - Rikard K. Wicksell, Behavior Medicine Pain Treatment Service, Karolinska University Hospital; Dep of Clinical Neuroscience, Karolinska Institute

Within the existing health care model, a large number of individuals present with symptoms and disabilities due to maladaptive behaviour patterns characterized by experiential avoidance and cognitive fusion.

Longstanding pain is prevalent among both adults and youths, and medical treatment often has limited effect on both symptoms and disability. In addition to poor functioning and guality of life, resulting co-morbidity

and increased health care use points at the alarming economic implications of these problems. Moreover, individuals and particularly youth experiencing what they consider as unwanted thoughts and emotions (e.g. anxiety, depression) turn to unhealthy behaviors such as smoking as a means to deal with such unwanted internal events. Cognitive behavior therapy (CBT) has been instrumental within the behaviour medicine field, but relatively modest effect sizes and unclear change processes implies a need for further research. In the case of smoking cessation, extant treatments including CBT have not shown effectiveness especially in youth who are not particularly motivated to quit. An approach SEDZESDA like ACT offers a new venue for targeting core issues in health related problems. The present symposium will focus on pain management and smoking cessation, addressing outcome as well as change processes in treatment. More specifically, results from several RCT's within the domains of pain and smoking will be presented. Implications for improving treatment models will be discussed.

Educational Objectives:

- 1. Design one ACT-consistent intervention suitable for a behavioral medicine setting.
- 2. Describe the findings from one successful ACT based behavioral medicine intervention.
- 3. Compare the CBS models and traditional models of behavioral medicine interventions for pain and smoking cessation.

117. What's the difference between me and you? Broadening perspective taking research. SYMPOSIUM (10:45-Noon)

Components: Conceptual analysis, Literature review, Original data

Categories: Clin. Interven. & Interests, RFT, RFT, ACT, perspective taking

Target Audience: Beg., Interm., Adv. Location: Ballroom H

Chair: Olga V. Berkout, M.A., University of Mississippi Discussant: Louise McHugh, Ph.D., University of Wales, Swansea

 Are you feelin' me?: Effective interpersonal perspective taking Kerry Whiteman, M.A., University of Mississippi

Michael Bordieri, M.S., University of Mississippi Kate Kellum, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi

- To be the bad man: Perspectives on persistent social deviance Olga V. Berkout, M.A., University of Mississippi Kate Kellum, Ph.D., University of Mississippi Alan M. Gross, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi
- How do I look?: Perspective taking and social anxiety Lindsay Wilson Schnetzer, M.A., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi Kate Kellum, Ph.D., University of Mississippi

Within the acceptance and commitment therapy (ACT) & Relational Frame Theory (RFT) literature, theorists

have suggested that perspective taking serves a vital function in healthy living and researchers have demonstrated these behaviors are related to a number of adaptive behaviors. Presenters will discuss perspective taking as conceptualized by RFT with some focus on how it relates to potential ACT interventions. Specifically, presenters will discuss perspective taking as it relates to persistent socially deviant behavior, social anxiety, and emotion recognition. The symposium will provide a review of existing findings, present theoretical conceptualizations, and discuss data on perspective taking in relation to these topics. SEDZESDAY

Educational Objectives:

1. Describe how effective perspective taking may play a crucial role in social interactions. 2. Explain research findings on persistent social deviance from an RFT perspective. 3. Analyze ACT/RFT conceptualizations of perspective taking and the self in individuals experiencing social anxiety.

118. Using ACT to Help People with **Chronic Health Conditions**

PANEL (10:45-Noon)

Components: Conceptual analysis, Literature review, Didactic presentation, Case presentation

Categories: Beh. med., Clin. Interven. & Interests, Chronic Illness

Target Audience: Beg.

Location: Amphitheater

Chair: Kelly Wilson, Ph.D., University of Mississippi Staci Martin, Ph.D., National Cancer Institute Mary Atwater, PsyD, Private Practice Mary Ann McCabe, Ph.D., Private Practice

Adults and children with chronic health conditions are faced with numerous stressors and challenges, including coping with pain, the demands of treatment adherence, and adjustment to living with a chronic illness. Studies have supported the efficacy of ACT with individuals with conditions such as chronic pain, diabetes, and epilepsy. Drawing on theory and research in ACT, the presenters will discuss case material that illustrates how ACT techniques can be applied to a variety of health conditions. First, we will discuss how mindfulness and acceptance can help individuals with chronic pain. Next, we will relate ways in which defusion and values work can improve treatment adherence. Self-as-context will be discussed in relation to helping individuals adjust to living with a chronic condition. Therapeutic techniques for children with a chronic illness will be presented. Finally, committed action is an integral aspect of each of these issues.

Educational Objectives:

- 1. Design cases involving individuals with a chronic health condition through an ACT framework.
- 2. Design ACT-based treatment plans for clients with a chronic illness.
- 3. Apply ACT-based interventions with clients with a wide variety of chronic conditions.

119. RFT Applications with People with **Developmental Disabilities** SYMPOSIUM (10:45-Noon)

Components: Conceptual Analysis, Original data Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Edu. settings, Org. Beh. Management, Superv., Train. & Dissem., RFT, Teaching reading skills, verbal operants, autism, training, Intellectual Disability Residential Services Target Audience: Beg., Interm., Adv.

Location: Forest Glen

Chair: Sarah Allen, University of Mississippi Discussant: Timothy Weil, University of Southern Florida

- Reading as emergent relational response in normal and autistic kids
 - Giovambattista Presti, M.D., Ph.D., IULM University, Milan
 - Melissa Scagnelli, IULM University Milan, The MIPIA Group Italy

Melania Mazza, IESCUM Italia

 Multiple exemplar instruction to teach perspectivetaking skills to young adults with high-functioning autism

Sadie Lovett, M.S., BCBA, Southern Illinois University Ruth Anne Rehfeldt, Ph.D., BCBA-D, Southern Illinois University

 RFT meets OBM in intellectual disability residential services: Introducing Supervision and Data-Based decision to improve educational goals for intellectual disabled adults

Roberto Cattivelli, Ph.D., University of Parma, Istituto Ospedaliero di Sospiro

Francesco Fioriti, Istituto Ospedaliero di Sospiro Serafino Corti, Ph.D., Instituto Ospedaliero di Sospiro Marco Giacobbi, M.A., Instituto Ospedaliero di Sospiro

This symposium will address Relational Frame Theory (RFT) concepts and clinical applications for individuals with developmental disabilities, such as autism and intellectual disability (ID), as well as for organized behavior management settings that provide services to such individuals. The first paper will discuss how RFT may be theoretically and practically applied to complex cognitive skills, such reading repertoires, in children who are typically developing and those with autism. The second paper will examine the utility of multiple exemplar training in building relational perspective taking skills among young adults with high-functioning autism. The third paper will apply behavior analysis principles and procedures, typically used with individuals with ID, to the staff who care for them in the hope of improving health care performance.

- 1. Analyze the effectiveness of multiple exemplar instruction for teaching relational perspectivetaking skills to adolescents with autism.
- 2. Describe future directions for enhancing generalization of perspective-taking skills and developing a curriculum for teaching perspectivetaking skills to children with autism.
- 3. Discuss the application of RFT to education and reading skills with autistic and normal developing children.

120. ACT for Disordered Eating: Recent Findings SYMPOSIUM (10:45-Noon)

Components: Original data

Categories: Clin. Interven. & Interests, Other, Eating Disorders

Target Audience: Interm.

Location: Glen Echo

Chair: Lindsay M. Martin, M.A., Drexel University Discussant: Georg H. Eifert, Ph.D., Chapman University

- Acceptance and Commitment Therapy as a Novel Treatment for Eating Disorders: An initial test of efficacy and mediation. Jena Shaw, M.S., Drexel University Adrienne Juarascio, M.S., Drexel University Alyssa Matteucci, Drexel University Evan M. Forman, Ph.D., Drexel University C. Alix Timko, University of the Sciences
- Acceptance and Commitment Therapy for a problematic eating habit: A case-series study Akihiko Masuda, Ph.D., Georgia State University Mary L. Hill, Georgia State University Hailey Melcher, Georgia State University Jessica Morgan, Georgia State University
- Perceived Pressure for Appearance and the Conceptualized Self: A Study of Avoidant Eating Pathology

Jillian B. Jacobelli, University of Louisiana Lafayette Emily K. Sandoz, Ph.D., University of Louisiana Lafayette Robert Zettle, Ph.D., Wichita State University Angie Hardage-Bundy, Wichita State University

Dysfunctional eating behaviors often result in serious medical consequences and life disruptions. Existing treatments for eating disorders have been largely ineffective, especially over the long-term. Acceptance and Commitment Therapy (ACT) shows particular promise for individuals with maladaptive eating patterns. The acceptance and mindfulness-based interventions central to the ACT model target one's relationship with distressing internal experiences, the self, food and the body. Research on ACT programs for eating disorders is in its infancy. The present symposium reports the results of recent research on ACT for eating disorders. Three investigator teams report on various ACT programs, including both inpatient and outpatient interventions delivered in individual and group formats, for various forms of disordered eating, including anorexia, bulimia, and binge eating disorder. The results suggest that ACT principles and intervention strategies have promise in understanding and treatment eating disorders.

Educational Objectives:

- 1. Describe how ACT can be successfully delivered in a group format in an inpatient setting for women with a range of eating disorders.
- 2. Utilize the clinical rationale of an outpatient ACT program and its preliminary empirical findings.
- 3. Identify how body image inflexibility may play a role in binge eating symptomology after exposure to a thin-ideal stimulus.

121. Buddhism and Functional Contextualism: Intersections of RFT and ACT with **Contemplative Wisdom and Practice**

SYMPOSIUM (10:45-Noon)

Components: Conceptual analysis, Didactic presentation

Categories: Theory & Philo., Related FC approaches,

Buddhism, Compassion Target Audience: Interm.

Location: Linden Oak

Chair: Jonathan S. Kaplan, Ph.D., Private Practice Discussant: Jonathan S. Kaplan, Ph.D., Private Practice

- The Buddha as a Contextual Behaviorist NeLi Martin, Private Practice Paul Atkins, Ph.D., Australian National University
- The heart wants what the heart wants: Zen Practice and ACT processes Scott Temple, Ph.D., University of Iowa Hospitals and Clinics
- Compassion in Context: What Functional Contextualism and RFT Can Tell Us about Buddhist Models of Compassion Dennis Tirch, Ph.D., Weill-Cornell Medical College

WEDZESDA Philosophically grounded in functional contextualism, ACT and RFT have been concerned with human suffering. RFT has explored the "dark side" of language by noting its relationship with derived relational responding and experiential avoidance. ACT, meanwhile, has blossomed as a psychotherapy applying approaches from behavior analysis, experiential therapies, and the human potential movement (Hayes, 2002). A closer examination of the processes addressed in RFT and ACT reveal many similarities with another tradition devoted to the amelioration of suffering, Buddhism. This symposium addresses the many similarities between RFT, ACT, and Buddhism. Extending the conversation beyond the level of shared techniques (e.g., both ACT and Buddhism use mindfulness), the papers review the underlying conceptual commonalities between these disciplines, starting with functional contextualism. Delving deeper into Zen and Buddhist models of compassion specifically, presenters highlight the ways in which contemporary science supports Buddhist philosophy and practice, and vice versa.

Educational Objectives:

- 1. List three similarities between ACT/RFT and Buddhism.
- 2. Describe how deictic frames and perspectivetaking skills relate to the cultivation of what Zen calls 'no self'.
- 3. Critique how RFT can provide a heuristic and a conceptual rubric that can operationalize Buddhist Psychology perspectives on compassion in a way that can lead to innovation and refinement of psychotherapy techniques.

122. ACT for Chronic Pain and Medical Disorders Forum

RESEARCH & PROGRAM DEVELOPMENT FORUM (10:45-Noon)

Components: Clinical Interventions and Interests, Prevention and Community-Based Interventions,

Behavioral medicine, Theoretical and philosophical foundations

<u>Categories: Return To Work, Adults receiving Agonist</u> <u>Therapy for Opioid Dependence, Autoimmune</u> <u>Diseases</u>

Target Audience: Beg., Interm., Adv. Location: Oakley

 Developing a group ACT intervention for return to work involving people on sick leave due to a diversity of different diagnosis involving common musculoskeletal pain conditions and/or psychological disorders.

Sigmund Ø. Gismervik, MD, Ph.D. candidate, Norwegian University of Science and Technology, Department of Public Health Henrik Børsting Jacobsen, psychologist, Ph.D. candidate, Norwegian University of Science and Technology, Department of Public Health Linda Waagan, Hysnes Helsefort, St. Olavs Hospital in Trondheim, Norway In occupational medicine, there has been a paradigm

shift from disease treatment to disability rehabilitation and management (Loisel et al., 2001; van Oostrom et al., 2009). Long term sick leave is now considered to be the result of interactions between the worker, her social surroundings and three systems: the healthcare system, workplace environment and financial compensation system (Franche & Krause, 2002; Loisel, et al., 2001; van Oostrom, et al., 2009). Only one preliminary RCT is so far published using an individual ACT intervention for return to work as the main outcome (JoAnne Dahl 2004). ACT has evidence for efficiency in the treatment of a wide range of disorders but little evidence exists on the efficiency for return to work and thus the health economic aspects. Objectives: In Trondheim, Norway we are planning a RCT evaluation of a newly established vocational rehabilitation center where return to work will be the main outcome and secondary outcomes will be quality of life and change in symptoms and health economic analysis will be done. All patients treated will be on sick-leave for a multitude of different diagnoses relating to musculoskeletal pain conditions and/or psychological disorders. Patients consent to participation after receiving a letter of invitation from the Norwegian Social Security system. Design: A multiple intervention is designed integrating three dimensions: 1) A physical (exercise) dimension 2) A workplace interaction and 3) A Coping dimension. The Coping dimension is planned to be an ACT based group intervention where return to work will be stated as the main aim. Questions: Developing a group ACT intervention for this population of patients with a clear vocational aim raises some keyquestions regarding:

- 1. Values: Are value-work in ACT congruent with an open agenda of returning to work as the main goal? How can we best deal with this issue?
- 2. ACT group intervention feasibility: The patients will be on sick-leave for both emotional and bodily painful conditions or co-morbid conditions involving both (eg depression and back pain). Treating people with different diagnoses in the same group might be challenging but regarding the ACT perspective on acceptance, experiential avoidance and on developing psychological flexibility, we feel that key processes will be the same and that there are many common denominators.

3. How could such a group intervention best be designed to make use of the common denominators of both muscleoskeletal and psychological disorders?

Psychological Inflexibility accompanying Autoimmune Diseases

- K. Fatih Yavuz, M.D., Bakirkoy Psychiatry Education and Research Hospital, Istanbul, Turkey
- In my clinical practice as a Psychiatrist I often see clients with autoimmune diseases in addition to psychological problems. During interviews, I realized that these clients are seriously ruminative, defused and in preoccupational state without valued action. These autoimmune diseases I detected are usually Multiple Sclerosis, Psoriasis, Vitiligo, Meniere Disease, Behcet's Disease. From the DSM point of view these clients have usually anxiety disorders (esp. generalized anxiety disorder and obsessive compulsive disorder). So I started to think if there are any dysfunctional processes accompanying with these diseases. Now I am planning a research design including different levels: a) Firstly, I want to see whether there is any association between these dysfunctional processes and diseases. b) Secondly, if my hypothesis is true I want to start to an ACT intervention program as a follow-up study. I want to see whether there is any difference between study group and control group (TAU). c) Thirdly, I want to investigate that whether we find any differences with level of immunological markers after ACT intervention.
- 1. Are there any defects about study design and how can I deal with them?
- 2. Which scales I have to use in this research?
- 3. Can You suggest me an standardized ACT intervention protocol?
- 4. Do you have any additional idea that we can focus on?

Wednesday Lunch 12:00-1:15pm

Wednesday Lunch Events 12:15pm

N. Children, Teen & Family SIG Meeting CHAPTER/SIG MEETING (12:15-1:00pm)

Location: Ballroom A

Amy Murrell, University of North Texas Lisa Coyne/ Louise Hayes, Suffolk University/ University of Melbourne

ACT and RFT work with children, adolescents and families is exploding. From basic research in RFT to applied work with ACT; from work in schools to individual therapy; and from researchers and clinicians around the globe, our SIG is steadily moving forward and making a difference in the lives of young people. Please join us to meet others scientists and practitioners who work with young people and families. We hope to accomplish several goals with this meeting:

1) Electing new officers, 2) Discussing the creation of a newsletter; soliciting help and submissions, 3) Providing a forum for child, teen, or families to present research ideas, ongoing projects, or clinicians wanting to link up with researchers (and vice versa) for 5-10 minute talks, with feedback from senior scientists. Students encouraged!, 4) Discussing new directions for our SIG, and ideas about how best to help our members move their work forward and connect with others. Please come meet us, consider joining our SIG!

O. Department of Veteran Affairs (VA) ACT SIG Meeting

CHAPTER/SIG MEETING (12:15-1:00pm) Location: Ballroom B

Vince Roca, Ph.D., Central Arkansas Veterans Healthcare System

Sonja Batten, Ph.D., VACO Office of Mental Health Services

The VA ACT SIG Meeting will provide VA staff the oppotunity to facilitate networking, share best practices, share treatment resources, and discuss ongoing ways of communicating best practices across the VA system.

P. Student SIG meeting

CHAPTER/SIG MEETING (12:15-1:00pm) Location: Ballroom F

Amie Langer, M.A., University of Iowa

This will be a meeting for student members of ACBS to gather and discuss their interests, needs, and comments regarding their membership. This will also be an opportunity for networking and collaboration.

Q. CBS Dissemination in Developing Nations SIG meeting

CHAPTER/SIG MEETING (12:15-1:00pm) Location: Brookside B

Fabián Maero, Fundación Foro, Buenos Aires, Argentina

The CBS Dissemination in Developing Nations SIG was created with the objective of fostering the dissemination of contextual behavioral science in developing nations through the development of a coherent, sustainable strategy that considers (but is not limited to) the specificity of each country or geographical region.

We intend to: 1) Function as common grounds for people interested in hosting workshops or any kind of activity, and for trainers/lecturers interested in providing such trainings. 2) Provide a space for exchanging experiences and support in these issues. 3) Promote diffusion of the work done in developing nations in the ACBS community. 4) This would be the first physical meeting of the SIG, we want to hear your ideas and plans.

R. Swedish Chapter Meeting

CHAPTER/SIG MEETING (12:15-1:00pm) Location: Forest Glen

Welcome to all those interested, in planning activites for the new Swedish chapter.

S. Getting ACT Out to the Public SIG Meeting CHAPTER/SIG MEETING (12:15-1:00pm) Location: Glen Oak

Aisling Curtin, M.Sc., ACT Now Ireland & St. Patrick's University Hospital Welcome to all those interested. Let's discuss what we can do moving forward!

T. Chicago Chapter Meeting

CHAPTER/SIG MEETING (12:15-1:00pm) Location: Linden Oak

Sandra Georgescu, Psy.D., The Chicago School

Welcome to interested members from the mid-west area. A recap of what we have done in the past year and where we are headed. Networking and socializing.

SEDZESDA

U. AFSCC meeting (ACBS French chapter) CHAPTER/SIG MEETING (12:15-1:00pm)

Location: Oakley

Frédérick Dionne, Ph.D., Centre universitaire de Québec, Pratique privée

L'Association Francophone pour une Science Comportementale Contextuelle (AFSCC) est la branche francophone de l'ACBS invite tous les francophones présents au congrès, membres ou non-membres, pour une rencontre conviviale visant à discuter des activités entourant l'ACT dans le domaine de la francophonie.

V. Ontario ACBS Chapter Meeting CHAPTER/SIG MEETING (12:15-1:00pm) Location: Timberlawn

Brian Kirsh

Ontario ACBS is a recently formed Affilated Chapter. Please join us for our 1st WC meeting to discuss potential chapter activities including education and training, peer sconsultation and supporting and promoting functional contextual science and practice in Ontario. All are welcome to attend.

Wednesday Afternoon 1:15pm

123. ACTs of Kindness and Compassion WORKSHOP (1:15-4:15pm)

Components: Conceptual analysis, Literature review, Original data, Experiential exercises, Didactic presentation

Categories: Clin. Interven. & Interests, Prof. Dev.,

<u>Theory & Philo., loving kindness and compassion</u> *Target Audience: Beg., Interm.*

Location: Grand Ballroom

John P. Forsyth, Ph.D., University at Albany, SUNY Chris Berghoff, M.A., University at Albany, SUNY

Many people want to be kind, but don't know how to do it. The purpose of this workshop is to provide a forum to explore the experiential nature and expressions of unkindness (self, others, our clients) and to show how ACT may be used to nurture self and other kindness and compassion in the context of valued action. We'll dive into how we (and our clients) tend to be unkind (self and others), what stands in the way of ACTs of kindness, and strategies to nurture our collective capacities for kindness, compassion, and vitality in our daily lives. The workshop will include a number of experiential exercises, including Tonglen.

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Participants will be encouraged (but never forced) to engage the material at a personal level, meaning as it applies to their own lives, and then also in the context of their clinical work. Clinical worksheets and other practical tools will be provided.

Educational Objectives:

- 1. Conceptualize kindness and compassion within an ACT framework
- 2. Utilize ACTs of self and other kindness and compassion (e.g., loving kindness and Tonglen practice)
- 3. Describe the transition from intentions about
- ACTs of kindness and compassion to SEDZENDAX committed ACTions.

124. Using RFT To Construct And **Deconstruct Clinical Metaphors** WORKSHOP (1:15-4:15pm)

Components: Conceptual analysis, Experiential exercises, Didactic presentation Categories: Clin. Interven. & Interests, RFT, Clinical metaphors, RFT Target Audience: Beg., Interm. Location: Ballroom A

Mairéad Foody, National University of Ireland, Mavnooth

Yvonne Barnes-Holmes, Ph.D., National University of Ireland, Maynooth

The current workshop attempts to build working bridges between ACT and RFT in terms of therapeutic metaphors. There is good empirical evidence to support the RFT conceptualization of what a metaphor is in terms of verbal processes. And there is a longstanding and well-supported tradition of using metaphors in therapy. In ACT, metaphors have always played a very significant and central role. However, many clinicians lack a technical understanding of metaphors and thus may not gain maximum benefit from their use with clients. This workshop is designed to teach clinicians how to deconstruct and construct metaphors, using RFT terminology, to maximise their use in achieving ACT-based aims.

Educational Objectives:

- 1. Describe the RFT conceptualization of metaphor in terms of derived stimulus relations.
- 2. Explain the role and use of metaphor in the context of ACT.
- 3. Construct metaphors that are appropriately designed to target ACT-based processes.

125. Dancing around the hexaflex: Therapeutic timing and flexibility in ACT

WORKSHOP (1:15-4:15pm) Components: Conceptual analysis, Experiential exercises, Didactic presentation, Case presentation, Role play

Categories: Clin. Interven. & Interests, Other, Case conceptualization

Target Audience: Interm., Adv.

Location: Ballroom B

Niklas Törneke, M.D., NT Psykiatri, private practice

Jason Luoma, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

Jenna LeJeune, Ph.D., Portland Psychotherapy Clinic, Research, and Training Center

You've got the basic steps down -- now it's a matter of putting it all together in a fluid movement. This experiential workshop will focus on helping the ACT clinician move more flexibly and nimbly around the ACT model. Participants will have to opportunity to practice mixing interventions targeting the different ACT processes. There will be a focus on increasing clinicians' agility in switching between different strategies, techniques, and ACT processes depending on the behavior of the client in session. In addition, this workshop will address the question of timing and identifying markers that may indicate a possible move to one place on the hexaflex or another. This workshop will be highly practical and interactive. Participants will work in groups generating various responses to specific clinical situations, including to a video of a therapist moving between different ACT processes.

Educational Objectives:

- 1. Produce different kinds of ACT consistent responses to specific clinical situations.
- 2. Describe how different processes described in ACT interrelate.
- 3. List markers in client behavior that call for specific strategies on the part of the therapist

126. Beyond the ABCs: Using Variability, Momentum, Matching, and Discounting to Understand Psychological Flexibility in ACT and Enhance Clinical Practice WORKSHOP (1:15-4:15pm)

Components: Conceptual analysis, Experiential exercises, Didactic presentation

Categories: Theory & Philo., Clin. Interven. & Interests, Translational

Target Audience: Beg., Interm., Adv. Location: Ballroom F

- Thomas J. Waltz, Ph.D., Center for Mental Healthcare and Outcomes Research (CeMHOR)
- Claudia Drossel, Ph.D., South Central Mental Illness, Research, Education, and Clinical Center (SC-MIRECC)

Behavior analysis provides the foundations of ACT. Frequently ACT therapists are introduced to the approach's most fundamental unit of analysis: the operant as an Antecedent-Behavior-Consequence (ABC) relation and its relevance to RFT. This workshop will fill a gap in training available at the ACBS World Conference by emphasizing behavioral processes that highlight the role of context and history in ways that can improve a therapist's ability to predict and influence positive change. These processes are well established in modern behavior analysis and directly speak to the concept of psychological flexibility. Participants will learn to apply variability, momentum, the matching law, and discounting to ACT case conceptualizations, treatment techniques, and behavior patterns that occur within the therapy session-their own and their clients'. Relevant case

illustrations will be transdiagnostic and include behavioral health applications.

Educational Objectives:

- 1. Describe behavioral processes such as variability, momentum, the matching law, and discounting.
- 2. Utilize these behavioral processes to predict and influence clinically relevant behavior within an ACT framework.
- 3. Describe how these behavioral processes relate to psychological flexibility and ACT's "middle level" constructs such as experiential avoidance, fusion, mindfulness, values and committed action.

127. It Takes a Village: Children in Their Social World

SYMPOSIUM (1:15-2:45pm)

Components: Conceptual analysis, Literature review, Original data

Categories: Performance-enhancing interventions, Clin. Interven. & Interests, Children

Target Audience: Beg.

Location: Ballroom F

Chair: Desiree Carnathan, University of Mississippi Discussant: Lisa Coyne, Ph.D., Suffolk University

- Social Problems in Socially Anxious Children: Skill Deficit or Avoidant Behavior? Rebecca J. Hamblin, M.A., University of Mississippi Alan M. Gross, Ph.D., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi Kate K. Kellum, Ph.D., University of Mississippi
- Everything is Relative: Relational Responding, Perspective-Taking, and Psychological Flexibility in the Parent Child Relationship

Danielle N. Moyer, B.S., University of Louisiana, Lafayette

- Emily K. Sandoz, Ph.D., University of Louisiana, Lafayette
- Perspective Taking and Social Competence in Children

Rebecca J. Hamblin, M.A., University of Mississippi Elizabeth A. Boerger, Ph.D., University of Mississippi Kelly G. Wilson, University of Mississippi Kate K. Kellum, Ph.D., University of Mississippi

Potentially some of the most powerful influences in children's development are that of their social relationships. Parents and peers have an especially important role in the lives of children as these relationships can influence distress symptoms as well as prosocial success. This symposium will discuss some of the current directions in research and theory in the field of children's social relationships with particular emphasis on contextual influences on social behavior. Processes affecting these relationships including psychological flexibility, functional avoidance, perspective taking, relational responding, and psychological flexibility will be addressed. Implications for intervention and future directions for research and theory also will be discussed.

Educational Objectives:

1. Compare theoretical accounts for social problems seen in children with high levels of social anxiety.

- 2. Discuss the role of psychological flexibility and perspective taking in the parent child relationship.
- 3. Describe facets of perspective taking abilities and their relationship to social competence and peer relationships in children.

128. The Reality Slap

WORKSHOP (1:15-4:15pm)

Components: Experiential exercises, Didactic presentation

Categories: Clin. Interven. & Interests, Prof. Dev., Crisis and loss

Target Audience: Beg., Interm., Adv. Location: Ballroom G

Russ Harris, M.D., Private practice

WEDZESDAY This workshop is loosely based on my ACTbased self-help book, The Reality Slap: How to Find Fulfillment When Life Hurts. The 'reality slap' takes many different forms. Sometimes it is so violent it's more like a punch: the death of a loved one, a serious illness, a major injury, a freak accident, a shocking crime, a disabled child, the loss of a job; bankruptcy, betrayal, fire, flood, divorce or disaster. Sometimes it's a little gentler: envy, loneliness, resentment, failure, disappointment, or rejection. But whatever form it takes, one thing's for sure: it hurts! And most of us don't deal with the pain very well. This workshop looks at how we can simply and effectively apply the ACT model 'when life hurts'. The workshop is both didactic and experiential. Experiential components focus on compassion, acceptance, anchoring in the present, taking a stand, and finding fulfillment.

Educational Objectives:

- 1. Utilize a simple four-step approach for dealing with any major loss or crisis.
- 2. Use a range of methods for developing selfcompassion.
- 3. Describe how to 'anchor' oneself in the midst of an 'emotional storm.'

129. OK I Had A Great ACT Workshop But I'm Not Sure How To Use It: Effective ACT Skills Building

WORKSHOP (1:15-2:45pm)

Components: Experiential exercises, Case presentation, Role play

Categories: Clin. Interven. & Interests, Superv., Train. & Dissem., Training , ACT Clinical .

Target Audience: Interm., Adv.

Location: Ballroom H

Martin J Brock, Sheffield Hallam University, Sheffield, UK

"I had a great experience at an ACT Workshop - But I'm not sure what exactly I learned or how to use it with my clients....." Does this sound familiar?

This Clinical ACT Workshop will offer a sound structured experiential approach to facilitate your learning of ACT by meeting you where you are and providing a framework that will help you structure

your learning both in this workshop and in your future directions. Experiential exercises will be offered and a small group format will be utilised to provide a safe learning environment. Classic ACT processes and metaphors will be reviewed and feedback will be offered where appropriate. This workshop is not aimed at 'absolute beginners' but folks who have attended ACT Workshops before but still feel like beginners are more than welcome. Budding ACT Trainers and ACT Supervisors any ACT Clinicians looking for professional development may find this workshop helpful in their next steps.

Educational Objectives: SEDZENDAX

1. Identify Gaps in Personal Learning with regard to ACT.

2. Examine classic ACT Processes in the context of Personal Learning.

3. Compile Personal Learning Plan with regard to ACT.

130. Humanistic Psychology, Systems Psychology, and ACT: Is it Possible to Bring These Different Traditions into a Working Alliance

PANEL (1:15-2:45pm) Components: Conceptual analysis

Categories: Clin. Interven. & Interests, Theory & Philo., Relation of CBS to Humanistic and System Perspectives Target Audience: Beg., Interm.

Location: Amphitheater

Chair: Steven C. Hayes, Ph.D., University of Nevada Steven C. Haves, University of Nevada Kirk Schneider, Existential-Humanistic Institute J. Scott Fraser, Wright State University

Although Acceptance and Commitment Therapy is a part of contextual behavioral science with its functional contextual approach, it overlaps with others traditions. This opens a unique chance for dialogue with other approaches that may help create unexpected strategic alliances and may increase communication between wings of psychology that have long been isolated from one another. The present panel is a dialogue between experts in Acceptance and Commitment Therapy and humanistic and systems approaches. Dr. Kirk Schneider is a well known humanistic psychologist and editor of the Journal of Humanistic Psychology. An author of several books, including one co-authored with the late Rollo May, he has developed the Existential-Integrative approach to therapy. Dr. J. Scott Fraser is systems oriented psychologist and author of a wellknown book on second-order change in psychotherapy. Dr. Steven Hayes will represent an ACT perspective. Each of these experts will briefly describe thei approaches and then will consider the overlaps and differences between these approaches, how issues such the nature of clinical change or mindfulness are perceived respectively between the approaches, and how both theoretically and methodologically these issues may be best addressed in a progressive way.

Educational Objectives:

- 1. Describe the two or three key features of ACT.
- 2. Describe the two or three key features of existential-integrative approaches and system psychology.
- 3. Compare these three approaches and note major similarities and differences among them.

131. Cognitive fusion: Conceptualization and empirical findings SYMPOSIUM (1:15-2:45pm)

Components: Conceptual analysis, Literature review, Original data, Didactic presentation

Categories: Theory & Philo., Clin. Interven. & Interests, Beh. med., RFT, Cognitive fusion, Defusion, Personality functioning, Multiple sclerosis

Target Audience: Beg., Interm., Adv. Location: Brookside A

Chair: Helen Bolderston, University of Southampton Discussant: John T. Blackledge, Ph.D., Morehead State Universitv

- Defusion as a Core ACT Process: Conceptual Definitions, Current Empirical Literature, and Future Directions for Exploration Stephanie L. Nassar, M.A., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi
- Cognitive fusion and personality functioning: A mediational study Helen Bolderston, University of Southampton Sue Clarke, University of Bournemouth Bob Remington, University of Southampton
- Cognitive fusion mediates the relationship between symptoms of multiple sclerosis and distress more strongly than cognitive content.

Clive Ferenbach, NHS Fife David Gillanders, University of Edinburgh Alan Harper, NHS Fife Sarah Gillanders, NHS Lothian Louise McNeil, NHS Lothian

Cognitive fusion is a key process in the ACT model of psychopathology, being implicated in the development and maintenance of a wide range of psychological difficulties. It is therefore not surprising that interventions designed to bring about defusion are central to ACT treatment protocols, with many defusion exercises being described in the literature. However, fusion and defusion remain relatively unexamined, both theoretically and empirically, compared to other ACT-relevant processes and concepts such as experiential avoidance and values. This symposium sets out to redress the balance. It includes a conceptual paper examining issues of definition and measurement, as well as current theoretical thinking about the process. Two empirical papers will then be presented, the first of which examines the impact of fusion on adjustment to multiple sclerosis. The second explores fusion in relation to personality functioning. Implications for future research will be discussed, both in terms of furthering understanding of fusion and testing the impact of clinical interventions.

WEDZESDAY

- Describe therapeutic and theoretical definitions of defusion, and discuss relative benefits and drawbacks to current measurements of defusion.
- 2. Describe the role of fusion in the development of poor personality functioning.
- 3. Describe the relevance of ACT processes in adjustment to multiple sclerosis, in particular about the distinction between cognitive content and cognitive fusion.

132. Recent developments within basic IRAP research

SYMPOSIUM (1:15-2:45pm) Components: *Conceptual analysis, Original data* <u>Categories: RFT, Theory & Philo., IRAP</u> *Target Audience: Interm.*

Location: Brookside B

Chair: Ian Hussey, National University of Ireland Maynooth

- Using the IRAP to Investigate Implicit Attitudes in the Stigmatisation of Psychological Suffering and Locus of Control.
 - Ciara McEnteggart, National University of Ireland Maynooth
 - Yvonne Barnes-Holmes, Ph.D., National University of Ireland Maynooth
 - Dermot Barnes-Holmes, D.Phil, National University of Ireland Maynooth
- Applying RFT to Social Psychological Phenomenon: Derived Relational Responding and the Emergence of Automatic and Self-Reported Preferences.
 - Sean Hughes, National University of Ireland Maynooth Dermot Barnes-Holmes, D.Phil, National University of Ireland Maynooth
 - Joao Henrique de Almeida, Universidade Federal de São Carlos
- Exploring the role of the contrast category as a source of contextual control within the IRAP Ian Hussey, National University of Ireland Maynooth Tomu Ohtsuki, Waseda University Tokyo Naoko Kishita, Doshisha University, Japan Dermot Barnes-Holmes, D.Phil, National University of Ireland Maynooth

This symposium will showcase three avenues of IRAP research that emphasize novel applications of the procedure. The ability of the IRAP tap socially sensitive attitudes will be demonstrated within the study of stigma towards mental illness. The second paper will demonstrate the utility of the procedure's non-relative, relational nature: The first data demonstrating the derived transfer of function using an implicit measure will be presented, and the dominant associative theory of evaluative conditioning will be challenged. Finally, an attempt to develop a personalized IRAP by training ideographic examples of individuals' experiential avoidance onto arbitrary stimuli will be presented.

Educational Objectives:

- 1. Describe the implicit biases towards mental illness.
- Compare the (derived) stimulus relations and associative approaches to evaluative conditioning.
- 3. Describe what is meant by `non-relative' when it is said that `the IRAP is a non-relative measure'.

133. Exploring the Flexibility of the Psychological Flexibility Model SYMPOSIUM (1:15-2:45pm)

Components: Conceptual Analysis, Original data, Experiential exercises, Didactic presentation, Case presentation, Role play

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Performance-enhancing, Related</u> <u>FC approaches, Kinaesthetic approach, Drama</u> <u>Therapy, Clinical Hypnotherapy, Mindfulness</u> *Target Audience: Beg., Interm., Adv.*

Location: Forest Glen

Chair: Michael Bordieri, University of Mississippi

- The MindSlide: Introducing a Kinestetic (K) Visual Analogue Scale (VAS) approach to diffusion and commited action Maureen Colohan, Private Practise, Mindfulness Association UK, British Society of Clinical Hypnosis
- Drama therapy and ACT for First Episode Psychosis Populations Laura Burke, Douglas Hospital, Montreal; Concordia University Thomas Holmes, Douglas Hospital, Montreal
- Skill Building Hypnotherapy: Integrating Mindfulness and Contextual Psychology in Hypnosis Richard K. Nongard, M.A., Peachtree Professional Education, Inc.
- Obama Karma: The Use of Role Models to Enhance Psychological Flexibility Russell Razzaque, Ph.D., NHS London

As ACT increases in popularity, the core components of the psychological flexibility model are being stretched into novel applications. This symposium aims to highlight the flexible nature of the model by exploring its synergy with other therapeutic and psychological systems. The first presentation introduces a new technique for assessing client progress via the use of a kinesthetic visual analogue scale. In addition to providing findings from an evaluation study of the instrument, this talk will also consider the utility of the measure in assessing defusion and committed action processes. The second presentation will evaluate the common ground between mindfulness-based therapies and creative arts therapies with particular attention placed on a clinical case example that integrates ACT techniques with drama therapy. Keeping with the theme of exploring commonalities, the third presentation will provide a conceptual framework for integrating ACT techniques such as mindfulness into hypnotherapy. Finally, the symposium will conclude with a presentation that examines the use of role models to enhance psychological flexibility with consideration given to the utility of President Obama as an ACTconsistent role model.

- 1. Describe the relationship between hypnotic trancework and mindfulness based stress reduction.
- 2. Explain the role of creativity in healing.
- 3. Identify and discuss 3 differences between existing visual analogue scales and the kinestetic

model linked to the Chester University (UK) report findings and learners experience during session.

134. More Than Skin Deep: Understanding, Evaluating, and Intervening on Body Image Flexibility

SYMPOSIUM (1:15-2:45pm)

Components: *Conceptual analysis, Literature review, Original data*

Categories: Clin. Interven. & Interests, Edu. settings, Body Image

Target Audience: Beg.

EDZESDAY

W Location: Glen Echo

Chair: Gina Quebedeaux, University of Louisiana, Lafayette

Discussant: Joseph Ciarrochi, University of Western Sydney

• Derived Relational Responding and Body Image Disturbance

Shelley Greene, University of Louisiana, Lafayette Emmie Hebert, University of Louisiana, Lafayette Emily K Sandoz, Ph.D., University of Louisiana, Lafayette

 Living Beyond What We See in the Mirror: Acceptance and Commitment Therapy for Body Image

Sarah LeBlanc, University of Louisiana, Lafayette Shelley Greene, University of Louisiana, Lafayette Gina Quebedeaux, University of Louisiana, Lafayette Emily K Sandoz, Ph.D., University of Louisiana, Lafayette

Beneath the Mask: An Evaluation of Cosmetic Use
 Among College Females
 Gina Quebedeaux, University of Louisiana, Lafayette

Emily K Sandoz, Ph.D., University of Louisiana, Lafayette

Body Image is the feelings, perceptions, thoughts and beliefs that a person might experience about his/her own body. For some, this experience is fairly innocuous. The body is perceived like anything else in the world, with little impact on their feelings or on their behavior. For others, however, their experience of the body is rather important, particularly painful, and causes significant disruption in their lives. For some, the experience of the self is limited almost exclusively to the appearance of the body or face, resulting in excessive attempts to manage appearance. Emergent research suggests that an individual's awareness of, openness to, and flexibility with the dynamic bodily experience might predict the impact body image has on their lives. Further, body image flexibility and inflexibility may be maintained through verbal processes. This symposium will address different aspects of body image disturbance and underlying mechanisms of body image disturbance, with implications for how increasing body image flexibility can help an individual move towards a life that he/she values.

Educational Objectives:

- 1. Describe verbal learning processes of body image dissatisfaction and body image flexibility through a computer task.
- 2. Describe psychological flexibility training for body image.

3. Describe individual differences in functions of cosmetic use.

135. Understanding emotions and the Therapeutic relationship SYMPOSIUM (1:15-2:45pm)

Components: Conceptual Analysis, Original data, Experiential exercises, Didactic presentation, Role play

<u>Categories: Clin. Interven. & Interests, Prevention &</u> <u>Comm.-Based, Performance-enhancing, Org. Beh.</u> <u>Management, Theory & Philo., Fap, complex case,</u> <u>emotional behavior, Forensic settings, CBT</u> <u>treatment alternatives, psychopathy, violent</u> <u>sexual offenders, and treatment-resistant clients</u> *Target Audience: Beg., Interm., Adv.*

Location: Linden Oak

Chair: Diego Balbuena, University of South Florida

• The Forensic Client Challenge: Treatment Alternatives Using Acceptance and Commitment Therapy (ACT)

David C. Brillhart, Psy.D., Oregon State Hospital

- Clinical Behavior Analysis for Emotional Behavior Amanda Milena Muñoz Martínez, M.A., Fundación Universitaria Konrad Lorenz and Pontificia Universidad Javeriana
 - Rochy Mercedes Vargas Gutiérrez, Fundación Universitaria Konrad Lorenz and Pontificia Universidad Javeriana
- The Effect of Contingent Responding on The Therapeutic Relationship Daniel W. Maitland, B.A., Western Michigan University Scott T. Gaynor, Ph.D., Western Michigan University

This symposium will examine ways in which working with emotions and using emotional language with clients can strengthen the therapeutic relationship. First, David C. Brillhart will present a paper on using ACT for managing emotional response with sex offending clients. Results from a pilot study and a subsequent adapted program will be discussed. Next, Amanda Milena Muñoz Martínez will discuss the use of emotive language within the context of the therapeutic relationship in third wave therapies. Then, Katia Manduchi and Catherine McClafferty will further examine the emotive language within the therapeutic relationship from a FAP perspective. They will also discuss the benefits from when therapists take emotional risks with their clients. Finally, Daniel W. Maitland and Scott T. Gaynor will present a study in which half of the participants with social difficulties receive a half FAP, half non-directive support focused on establishing empathic attunement intervention. Half of the participants will receive the FAP portion first, half will receive the FAP portion last.

- 1. Describe the effects that FAP has on the therapeutic relationship.
- 2. Analyze the implications of addressing emotional behavior from a functional perspective.
- 3. Demonstrate a mindfulness exercise specifically created for forensic settings and track its effectiveness over time.

136. Moving Therapy Online: What do you have to know to ethically and legally bring technology into your psychotherapy practice? WORKSHOP (1:15-2:45pm)

Components: Didactic presentation

Categories: Prof. Dev., Other, Continuity of Care; Distance Therapy; Virtual Therapy

Target Audience: Beg., Interm., Adv.

Location: Oakley

Martha (Marti) Ireland Ph.D., RN, CS, CEDS, Private Practice, Virtual Therapy Connect

Janine Anthony Bowen, Esq., Partner, Jack Attorney's and Advisors

Technology is advancing faster than government and licensing boards can adjust, but clinicians remain responsible for the therapeutic process and the ethical delivery of their services. In addition, clinicians must hold their practice and services up to federal standards regarding HIPAA and HITECH compliance. This workshop focuses on the impact that technology communication tools, such as video teleconferencing and emailing, have on the therapeutic process, with emphasis on the clinical considerations and the implications of the HIPAA and HITECH guidelines. Virtual therapy allows clinicians to sustain the therapeutic relationship even when clients aren't able to attend face to face sessions. For that reason, no person's therapeutic relationship that supports a path to lasting recovery, needs to be interrupted due to travel, sickness, vacation, a return to classes/school, etc. The technology behind virtual therapy supports consistency and regularity of treatment in which the trust that clients and practitioners build over time, can drive success and facilitate lasting change.

Educational Objectives:

- 1. Explain how the virtual environment can be a therapeutic delivery system for clients and facilitate continuity of care, reviewing the pros and cons of using technology communication tools.
- 2. Identify multiple ways in which online communication tools can be appropriately used in a psychotherapy practice to support a client's change and recovery.
- 3. Identify four ways to maintain HIPAA and HITECH compliance when using technology comunication tools in a psychotherapy practice.

Wednesday Afternoon 3:00pm

137. Processes and Outcomes of the **Dissemination and Implementation of ACT** for Depression in VA SYMPOSIUM (3:00-4:15pm)

Components: Conceptual analysis, Original data, Didactic presentation

Categories: Superv., Train. & Dissem., Clin. Interven. & Interests, Superv., Train. & Dissem., Depression Target Audience: Beg., Interm., Adv.

Location: Ballroom F

Chair: Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training

Discussant: Mattieu Vallatte, University of Louisiana

- Transforming VA Mental Health Care: National Evidenced-Based Psychotherapy Training Initiatives Bradley Karlin, Ph.D., Department of Veterans Affairs Central Office
- Competency Based Training of VA Clinicians in Acceptance and Commitment Therapy (ACT) for Depression

Robyn D. Walser, Ph.D., National Center for PTSD, Dissemination and Training Bradley Karlin, Ph.D., Office of Mental Health Services,

VA Central Office Varvara Mazina, Stanford University Mickey Trockel, MD, Stanfor University C. Barr Taylor, MD, Stanford University

- VA ACT-Depression (ACT-D) Transitions: Trainee to Consultant Pamela Steadman-Wood, Ph.D., Providence VA Medical Center
- Lessons learned about VA-based ACT consulting Kevan McCutcheon, Ph.D., VAMC Cleveland, OH

SEDZESDA The U.S. Department of Veterans Affairs (VA) has implemented a national dissemination and training initiative to promote the availability of Acceptance and Commitment Therapy for depression (ACT-D) within the Veterans Health Administration (VHA). The current symposium will review the VA's efforts to bring evidence-based psychotherapy into practice, closing the science-practitioner gap. The broad dissemination efforts and process will be presented as well as the training efforts and therapist and client program evaluation outcome. Broadly speaking, dissemination with supported implementation and training to competency in ACT for depression in the treatment of Veterans improves therapist clinical skill in ACT-D with corresponding improvement in patient outcomes. In addition, we will further explore the dissemination efforts by presenting the process of continued training post workshop. Both ACT consultant and ACT trainee will explore their experience in promoting implementation and training to competence. Finally, we will have a broad discussion about dissemination of ACT and future efforts.

Educational Objectives:

- 1. Describe the VA dissemination project.
- 2. Report on the program evaluation outcomes of dissemination of ACT in VA.
- 3. Describe the process of consultation and trainee barriers to implementation of ACT in VA.

138. Involving ACBS in a Framework for Increasing the Efficacy of Groups from an **Evolutionary Perspective** INVITED LECTURE (3:00-4:15pm)

Components: Conceptual Analysis

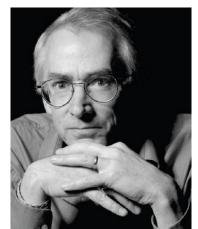
Categories: Performance-enhancing interventions,

Org. Beh. Management, Group-level interventions Target Audience: Beg., Interm., Adv.

Location: Ballroom H

Chair: Steven C. Hayes, Ph.D., University of Nevada David Sloan Wilson, Ph.D., Evolution Institute

An integration is in progress between the ACT/RFT world and evolutionary science. The Evolution Institute is creating a framework for increasing the efficacy of groups of all kinds, based on core design features that are required for groups to function as



 that are required for groups to function as
 cooperative units. Part of the framework will be internet create a netwo that want to en members can j modest amount their current ex ACT/RFT are su principles of probecome an inter

the framework will be internet based, but we also plan to create a network of real-life coaches for groups that want to engage their services. ACBS members can join this network by receiving a modest amount of extra training to supplement their current expertise. The principles of ACT/RFT are sufficiently convergent with the principles of prosocial evolution, that ACBS can become an integral part of the framework that we are trying to create.

Educational Objectives:

- 1. Describe evolutionary theory in relation to ACT/RFT.
- 2. Utilize basic design principles required for groups to function as cooperative units.
- 3. List steps to improve the efficacy of ACBS.

139. ACT in Groups: Developing Skills for Successful Groups

WORKSHOP (3:00-4:15pm) Components: *Experiential exercises*, *Didactic presentation*, *Case presentation*, *Role play* <u>Categories: Clin. Interven. & Interests</u>, Org. Beh. Management, Group Interventions

Target Audience: Interm.

Location: Amphitheater

Joseph Oliver, Ph.D., South London & Maudsley NHS Foundation Trust/ Institute of Psychiatry, King's College London

Paul Flaxman Ph.D., City University, London UK

Vasiliki Christodoulou, South London & Maudsley NHS Foundation Trust/ City University, London UK

A number of studies suggest that ACT can be efficiently and effectively applied within group settings (e.g., Hayes et al., 2004; Flaxman & Bond, 2010). The workshop facilitators have extensive experience of delivering and empirically evaluating ACT in groups. They will share personal experiences and insights from ACT groups that have been delivered in a wide range of settings, including within the workplace and for people with serious mental health problems. The workshop will focus on cultivating the skills and knowledge required to set up and facilitate successful ACT groups. The workshop will illustrate ways of presenting ACT-consistent rationale in group training programs; offer tips on harnessing the group process to model and augment ACT's processes; and demonstrate ways of introducing and conducting physical metaphors (such as Passenger on the Bus and Tug of War with a monster) to promote these processes in a fun and engaging way. The workshop will incorporate case material, transcripts, and role plays to illustrate and assist attendees in practically trying out and developing ACT group facilitation skills.

Educational Objectives:

- Reflect on and discuss how the group process can itself be harnessed to support ACT's processes and exercises.
- 2. Describe ACT metaphors and exercises in a form that is particularly suited to the group setting.
- Compare and contrast the various simple ACT frameworks that can be used to organise and consolidate learning in ACT groups.

140. Adapting ACT to new technologies: Methodology and outcomes SYMPOSIUM (3:00-4:15pm)

Components: Conceptual analysis, Didactic presentation

Categories: Clin. Interven. & Interests, Other, Use of <u>new technologies, Adolescents</u>

Target Audience: Beg., Interm., Adv. Location: Brookside A

Chair: Stella Nicoleta Savvides, Ph.D. Cand, University of Cyprus

Discussant: Maria Karekla, Ph.D., University of Cyprus

 Adapting ACT manual based interventions to internet based interventions: Methodology Stella Nicoleta Savvides, Ph.D. Cand, University of Cyprus

Patricia Nicolaou, Ph.D. Cand, Unicersity of Cyprus Maria Karekla, Ph.D., University of Cyprus

 Acceptance and commitment therapy enhanced by text messaging for smoking cessation in adolescence

Andria Christodoulou, B.A., University of Cyprus Chara Demetriou, B.A., University of Cyprus Maria Karekla, Ph.D., University of Cyprus

• A comparative analysis of an iPad application and paper and pencil data collection system designed to measure treatment integrity for Acceptance and Commitment Therapy

Moniek A. Dewit, B.A., Southern Illinois University Carbondale

• A comparative analysis of an iPad application and paper and pencil data cContextual and Behavioral Factors Predicting Functional Outcome among Individuals with Severe Psychopathology: An Experience Sampling Study

Roger Vilardaga, University of Nevada, Reno Steven C. Hayes, Ph.D., University of Nevada, Reno Christie Bresee, Vestige Project Inc. David Atkins, University of Washintgon Kambiz Alaei, Northern Nevada Mental Health Services

The proposed symposium focuses on the use of new technologies and new modalities of intervention delivery. Firstly, the rationale for use of new technologies (e.g. internet-based delivery of intervention, use of text messaging and iPad applications for assessment) will be discussed and

critiqued as to their usefulness and applicability. Next, how these new tools can be adapted for use with ACT protocols for various problems will be presented. Finally, examples of applications of these technologies will be presented, along with experimental study outcomes of comparisons of these new delivery modalities to more traditional ones.

Educational Objectives:

- 1. Critigue new technologies as a useful and effective modality for treatment delivery.
- 2. Design and implement interventions as adapted from an ACT manual-based intervention.
- 3. Compare outcomes of traditional and new technology interventions.

141. Compassionate Intentions in the **Psychotherapy Setting**

WORKSHOP (3:00-4:15pm) Components: Experiential exercises, Didactic

presentation, Case presentation, Role play Categories: Clin. Interven. & Interests, Prof. Dev., **Therapeutic Enhancement**

Target Audience: Beg.

Location: Brookside B

M. Joann Wright, Ph.D., Linden Oaks at Edward

According to Pema Chodron, "Compassion is not the relationship between the healer and the wounded. It's a relationship between equals. Only when we know our own darkness well can we be present with the darkness of others. Compassion becomes real when we recognize our shared humanity." The Merriam-Webster Dictionary defines compassion as "sympathetic consciousness of others' distress together with a desire to alleviate it." According to many sources, the mission of psychologists is to reduce human suffering. Given the "sameness" of these two definitions, it is our duty as therapists to bring compassion to our therapy work. And within our ACBS community, the three fathers of ACT profess: "The effective therapist needs to be willing to step back from the verbal sparring that occurs during psychotherapy, to see words as words, feelings as feelings, and to witness the behavior that is going on in the room from the point of view of an observer" (Hayes, Strosahl, & Wilson, 2003 p. 270). Indeed, the ACT model makes room for and encourages compassionate intentions. This workshop is aimed to assist therapists in settling into a compassionate place during sessions.

Educational Objectives:

- 1. Use present moment awareness during therapy sessions to check into your moment-to-moment intentionality.
- 2. Use FAP principles to detect when you lose touch with compassion.
- 3. Examine compassion and its role in creative hopelessnses.

142. ACT after Traumatic Events

SYMPOSIUM (3:00-4:15pm)

Components: Original data, Didactic presentation

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Related FC approaches, Trauma, PTSD, Military psychology

Target Audience: Beg., Interm.

Location: Forest Glen

Chair: Jacob Daar, Southern Illinois University- Carbondale Discussant: Sonja, V. Batten, Ph.D., VACO

- I am what I care about...not what happened to me Nikki C. Hernandez, M.S., University of North Texas Amy R. Murrell, Ph.D., University of North Texas Christina Larson, University of North Texas
- Self-Compassion, Criticism, Shame and Experiential Avoidance as Risk Factors for PTSD SEDSESDA Sympton Severity

Angela Cooper, University of Nottingham, UK Aidan Hart, University of Lincoln, UK Rachel Sabin-Farrell, Nottinghamshire Healthcare, UK & University of Nottingham, UK

Neil Roberts, Traumatic Stress Service, Cardiff and Vale University Health Board, UK

 Acceptance and Commitment Therapy (ACT) in the Deployed Setting Megan A. Connell, PsyD, US Army

This symposium will look at the relationship between third-wave behavior therapies and PTSD. Both risk factors for PTSD and the treatment of symptoms will be discussed. The first paper further investigates the relationship between experiential avoidance and PTSD as well as the use of Acceptance and Commitment Therapy principles as a treatment for these symptoms. The second paper looks at the relationship between several tenets of Compassion Focused Therapy (self-compassion, self-criticism, shame, and experiential avoidance) and PTSD. Finally, the third paper focuses on the implementation of ACT principles with actively deployed individuals.

Educational Objectives:

- 1. Discuss the influence trauma has on the identification of values and implementation of committed actions aligned with those values.
- 2. Use ACT with active duty military and identify common challenges when using ACT with the military population.
- 3. Describe the role experiential avoidance has with women whom have experienced significant trauma.

143. Creating contexts of change in the clinical setting for children and families: Different ways of doing ACT

SYMPOSIUM (3:00-4:15pm)

Components: Conceptual analysis, Original data, Case presentation

Categories: Clin. Interven. & Interests, Edu. settings, Children, Families, Autism, School

Target Audience: Beg., Interm., Adv.

Location: Glen Echo

Chair: Giovambattista Presti, M.D., Ph.D., IULM University, Milan (Italy)

Discussant: Lisa Coyne, Suffolk University (Boston, MA)

- What has Harry Potter and Kung-fu Panda to do with ACT? Using overarching metaphorical contexts to work with children
 - Giovambattista Presti, IULM University, Milan (Italy) Francesca Pergolizzi, Scuola Humanitas Milano (Italy), **IESCUM Italy**
 - Paolo Moderato, IULM University, Italy
- · Group context for parents of children with autism Giovanni Miselli, ACT-Italia, IESCUM, AUSL Reggio Emilia (Italy)ACT-Italia, IESCUM, AUSL Reggio Emilia, Italy
- Empowering parents and understanding development itself: An ACT perspective Darin Cairns, Child Wellbeing Centre, Perth, Australia

W EDRESDAY

Acceptance and Commitment Therapy can be applied in clinical settings that include families and children. Though there's no need to modify any of the elements of the basic hexaflex model at the level of analysis, it is important to stress and work on the needs that an interacting group of individual that can be acted upon at the level of the single, couple and group brings into the clinical setting. In addition metaphors and experiential exercises and language that has developed in the past years for adults need to be twisted around

when applied to children. This symposium will explore these topics and trace some ways on how to do ACT in the family context showing the different level of the individual (child), the couple and the family. It will also discuss ways to address future clinical research.

Educational Objectives:

- 1. Create metaphors and experiential exercises meaningful to children.
- 2. Apply ACT at different levels along the family conitnuum from the individual, to the couple, to the group level.
- 3. Assess and use group context to facilitate ACT processes in Parent Training.
- 144. Coping with Stress in the Modern World SYMPOSIUM (3:00-4:15pm)

Components: Conceptual analysis, Literature review, Original data

Categories: Clin. Interven. & Interests, Performanceenhancing, Acceptance/Mindfulness

Target Audience: Beg., Interm., Adv.

Location: Linden Oak

Chair: Lindsay W. Schnetzer, M.A., University of Mississippi Discussant: Todd Kashdan, Ph.D., George Mason Univ.

Prevalence of Maladaptive and Adaptive Coping Strategies

Lindsay W. Schnetzer, M.A., University of Mississippi Maureen K. Flynn, M.A., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi Kate K. Kellum, Ph.D., University of Mississippi

 Empirical Examination of Acceptance in the Service of Values

Maureen K. Flynn, M.A., University of Mississippi Kelly G. Wilson, Ph.D., University of Mississippi Kate K. Kellum, Ph.D., University of Mississippi

• Mindfulness improves performance on the Choice Blindness Task in depressed and non depressed individuals

Nic Hooper, Ph.D., Middle East Technical University, Northern Cyprus Campus

This symposium pertains to various means of coping with difficult psychological experiences. The first talk presents prevalence data regarding the extent to which certain coping strategies (e.g., acceptance, cognitive reappraisal, avoidance, suppression) are used in college and clinical samples, establishing a rationale for intervention. Additionally, connections between coping strategies and indicators of psychological health/distress are discussed. The second and third talks illustrate the potential utility of coping interventions by (1) demonstrating the effect of adding a values component to an acceptance intervention in persisting with a frustrating task; and (2) confirming the positive impact of a brief mindfulness intervention on improving attention.

Educational Objectives:

- 1. Describe the rationale for training individuals in adaptive coping strategies.
- 2. Discuss the potential benefits of incorporating values in acceptance interventions.
- 3. Describe a novel paradigm, and the discuss the usefulness of mindfulness in improving attention.

Wednesday Afternoon Plenary & Presidential Address 4:30pm

145. World domination through peace, love, and understanding: ACBS World Conference at 10 INVITED LECTURE (4:30-5:45pm)

Components: Conceptual Analysis, Literature review

Categories: Clin. Interven. & Interests, Prevention & Comm.-Based, Beh. med., Superv., Train. & Dissem., Prof. Dev., RFT, contextual behavioral science

Target Audience: Beg. Location: Grand Ballroom

Patricia Bach, Ph.D., Illinois Institute of Technology



Since the first world conference there have been several advances in Contextual **Behavioral Science** (CBS) and in ACBS itself. The aim of this session is to review major research findings of the last ten years that are most associated with the advancement of CBS and consider how individuals as well as we as an organization have done in

disseminating research and practice grounded in contextual behavioral science. Major findings will be considered in the context of meeting an oft stated informal aim of 'world domination through peace, love, and understanding'. Future directions for CBS research and practice will also be discussed.

- 1. Broadly describe major research findings in contextual behavioral science.
- 2. Evaluate the success of CBS research, training and dissemination efforts.
- 3. Identify how to apply these findings to your own clinical or research practice.

Sunday, July 22 (7:00-8:30pm) - opening & Understanding the Self from a Functional Contextual perspective (1) - Bach, Hayes, E. Rodrigues, Sandoz, & McHugh Poster Session #1 & Social to follow (8:30-10:30pm)									
			Monday, July 23 (Morning)						
	7:00am-7:50am	8:00-8:50am	9:00am-10:30am	10:30am- 10:45am	10:45am-Noon				
ROOM	SESSIONS	MEETINGS	3.00am-10.50am	SESSION					
Grand Ballroom			Introduction to FAP (4)- Tsai & Kohlenberg (Workshop)						
Dellacem A	Morning Mindfulness Meditation (2)- Martz (<u>Workshop</u>)		Mindfulness for Ten: New Group Strategies in ACT (5)- Boone & Myler (Workshop)						
Ballroom A			Providing Supervision in ACT: Fundar	nentals and	Practice (6)- Batten & Walser (Workshop)				
Ballroom B				P					
			Integrating ACT into Coaching (7)- Blonna, Archer, Froelich, Bonanomi, & Ostrow (<u>Panel</u>)	B R E A K	Are Anxiety Treatments Focusing on the Wrong Outcomes?: A Debate (18)- L. Martin, Bricker, Craske, Foreman, & Forsyth (Panel)				
Ballroom C									
Ballroom F	-		Promoting Behavior Change in F	Primary Care	(8)- Robinson & Gould (<u>Workshop</u>)				
Ballroom G			The Wisdom to Know the D	ifference (9)	- K. Wilson & Kurz (<u>Workshop</u>)				
	Mindful Moving (3)- N. Martin (Workshop)		Sizing up Selfing: Efforts to Assess Self-as-Context (10)- Zettle, Robb, Szabo, Atkins, & Gird (Symposium)		Back to the Future II: Current Directions and Perspectives in RFT, ACT, and CBS (19)- Ciarrochi, Hughes, Y. Barnes-Holmes, & S. Hayes (Symposium)				
Ballroom H			Deriving RFT: How to spread the visibility of our research and how to make its applications more accessible (11)- M. Villatte, S. Hayes, Rehfeldt, Stewart, & Törneke (Panel)	В	Flexing Our Psychological Muscles in the Classroom (20)- Slater, LeJeune, Pistorello, Weil, & Newsome (<u>Panel</u>)				
Amphitheater Brookside A			Taking ACT to the trenches: Low cost interventions in community settings (12)- Maero, Collado-Rodriguez, Drescher, & Weinstein (<u>Symposium</u>)	R E A K	College Student Health and Flexibility: Considering Academic, Sociocultural, and Psychological challenges (21)- Kennison, Szabo, Squyres, & Benoit (<u>Symposium</u>)				
Brookside B			Perspective-Taking: Training Deictic Relational Responding in Various Populations (13)- O'Neill, McHugh, Cattivalli, & Barardo (Symposium)		ACT and Intimate Relationships (22)- Blonna, Curtin, Gifford, & Connell (<u>Symposium</u>)				
Forest Glen	-	1st Annual Meeting of the ACBS SIG for the Advancement of Contextual Education Science - Berens & Weil	Orienting to values with ev	ery step (14)	- Plumb-Vilardaga (<u>Workshop</u>)				
Forest Gien			Using ACT to improve parental support in treatment of children and adolescents (15)- Wive, Ciarrochi, Klinga,		Beefy Behaviorism, Training clinical Expertise, & Big Data (23)- Luoma, <i>Koerner</i> (<u>Invited Lecture</u>)				
Glen Echo			& Murrell (<u>Symposium</u>)						
Linden Oak		New England ACT Chapter of ACBS Chapter Meeting - <i>Coyne</i>	ACT online for University and College Students (16)- R. Lappalainen, Sandoz, Livheim, P. Lappalainen, & Levin (Symposium)	B R E A K	Mindfulness and Acceptance-Based Treatment in a Jail Setting (24)- Amrod, Malouf, Nightingale, & Tangney (Symposium)				
Oakley (R&PD Sessions)			Innovative Treatment Technologies Forum (17)- Savvides, Gershkovich, Herbert, Forman, Stotts, Norwood, & Potter (Forum)		Body Image and Eating Disorders Forum (25)- Nicolaou, Greene, & Sandoz (Forum)				
Timberlawn		ACBS Chapter and SIGs Committee - S. Hayes (By Invitation)							

			Monday, July 23	6 (Afterr	noon)			
		Noon-1:15pm	1:15pm-2:45pm	2:45pm- 3:00pm	3:00pm-4:15pm	4:15pm- 4:30pm	4:30pm-5:45pm	8:00pm- 10:30pm
ROOM		MEETINGS		SESSIO			PLENARY	
Grand Ballroom			Acceptance and Values in Be		Exposure therapy for anxiety disorders: From fear reduction to fear enhancement (51)- Herbert, <i>Craske</i> (Invited Lecture)			
		Evolution Science Special Interest Group - S. Hayes & D. S. Wilson (12:15-1:00pm)	Inside This Moment: Using the now to Pr			8:00-10:30pm		
Ballroom A	L U N		Developing Your Skills as an ACT Trainer, Part 1 (29)- Walser, Gillanders, Harris, Lundgren, & Luoma (<u>Workshop</u>)		ACTin' bad: Antisocial behavior from an ACT perspective (41)- Berkout, Coyne, Weil, Karayianni, & Amrod (Symposium)			:30pm
Baliroom B Baliroom C	C H	IGNITES (26)- J. Villatte, Morrissey, Squyres, & Moran (<u>IGNITE</u>) (12:30- 1:00pm)	Therapist Emotion, Cognition & Behavior in Session (30)- Sisti, Kohlenberg, K. Wilson, Bresler, Tirch, & Rheem (Panel)	B R E A K	Understanding Compassion in Context: Functional Contextual, Evolutionary, and Clinical Dimensions of the Science of Compassion (42)- Tirch, Gilbert, S. Hayes, K. Wilson, Forsyth, & Vilardaga (<u>Panel</u>)	B R E		ct
Ballroom F			Deactivation Therapy (MDT): Contextual Evidenced Based Treatment for Adolescents and Extension of ACT (31)- Apsche (Workshop)	ĸ	Standing on the Shoulders of Giants: Enhancing ACT Through Exploration of Contributions from Philosophy and Behavioral Science (43) - O'Neill, Szabo, Kecmanovic, & Cattivelli (Symposium)	A K		Chapter/SIG Event, Poster Session #2
Ballroom G		ACT in Sierra Leone, West Africa - Ebert, Bockarie, Nardozzi, & White (12:15-1:00pm)	Using the heart and the head: How to empower your experiential practice with RFT! (32)- M. Villatte (Workshop)					Event,
Ballroom H			ACT with	Love (33)- Ha	arris (<u>Workshop</u>)			Poster
Amphitheater		L	Where We are Today: contextual Behavioral Science and Applied Behavior Analysis with Children, Adolescents, and Families (34)- Moyer, Abbiett, Coyne, L. Hayes, Murrell, & Weil (Panel)		How to Conduct Meaningful Research in Clinical Practice Settings (44)- J. Villatte, Luoma, Koerner, Codd, & Karekla (<u>Panel</u>)			Session
Brookside A		U N C H	The Utility of Brief Defusion, Mindfulness and Acceptance Interventions (35)- Hooper, Blackledge, Larsson, & McHugh (Symposium)		Investigating Physical and Verbal Mindfulness Techniques in ACT and the User of the IRAP in Clinically Relevant Domains such as OCD and Suicidal Ideation (45)- Blackledge, Nicholson, Foody, & Hussey (Symposium)			¢ B
Brookside B			Lights, Camera ACTion! (36)- Patterson, Moran, & Oswald (<u>Workshop</u>)		Behavioral and Mental Health Services in Interdisciplinary Primary Care (46)- Zeiss (<u>Invited</u> Lecture)	в		ook Signing
Forest Glen			Comparing multiple ways of doing the same thing (37)- Carnathan, Drake, Mullen, Schaefer, Fassero, Kellum, & Guinther (Symposium)	B R E	Transformation of Function Through Relational Networks: Strategies and Establishment of Functions (47)- Daar, Stewart, McKell, Whiting, & Florentino (Symposium)	R E A K		Вu
Glen Echo		L U N	ACT as a primary group intervention for transdiagnosed veterans (38)- O'Brien, Batten, Finkelstein, Taber, & McCutcheon (Symposium)	A K	Building Flexibility with Food, Body, and Self: Contextual Behavior Science and Disordered Eating (48)- Reetz, Wisnewski, Hill, Jacobelli, Juarascio, & Manduchi (Symposium)			8:00
		С	ACT and Psychological Flexibility in the Workplace: Latest Research and Applications from the United Kingdom (39)- Flaxman, Bond, & Wardley (Symposium)		Brief group, Mobile, and Internet ACT- interventions for increasing well-being (49)- R. Lappalainen, Livheim, Kangasniemi, Sairanen, & Lundgren (Symposium)			8:00-10:30pm
Linden Oak Oakley (R&PD Sessions)			Using CBS to Rethink "Alternative" Treatments Forum (40)- Abadie, Perkins, Morrissey, Drake, & Wegener (<u>Forum</u>)		Novel Applications of CBS Forum (50)- Marks & Wilks (Forum)			В
Timberlawn		ACT ITALIA: The Italian ACBS Chapter - Miselli & Prevedini (12:15-1:00pm)						

			Tuesday, July 24 (Morning)						
	7:00am-7:50am	8:00am-8:50am	9:00am-10:30am	10:30am- 10:45am					
<u>ROOM</u>				SESSION	3				
			Using FAP to Train ACT (54)- Steinwachs & Tsai (Workshop)						
Grand Ballroom	Integrating Aikido and ACT (52)- Gallo & Matthews (Workshop)		Assessing and Training Derived Relational Responding Skills (55)- McElwee, Weil, Stewart, Kishita, Ohtsuki, Muto, & Ming (Symposium)	B R E A K	The Art of Speaking in Sound bytes: How to effectively Get your Point Across with the Media (68) Batten, Moran, & Wright (<u>Workshop</u>)				
			Live BOLDLY, become a mindful warrior: Exp	eriential ACT	for youth (56)- L. Hayes & Ciarrochi (<u>Workshop</u>)				
Ballroom B Ballroom C	-	Social Work ACT SIG Committee Meeting - Boone & Hamilton	Saving the World through Contextual Behavior Science: An alternative to the Psychopharmacology Epidemic (57)- <i>Bordieri, K. Wilson, Whitaker, Biglan, &</i> <i>S. Hayes</i> (<u>Panel</u>)	B R E	A-ontology: An in-depth discussion of this critical functional contextual feature (69)- Codd, Herbert, Leigland, Szabo, & David (<u>Panel</u>)				
Ballroom F			Contextualism, Realism, and Parsimony (58)- Kellum, W. Follette, Gresswell, Hart, Bautista Castro, & Rodrigues (<u>Symposium</u>)	A K	Mastering the Metaphor (70)- Ehrnstrom (Workshop)				
Ballroom G		Stigma SIG meeting - Luoma & Skinta	Finding Life Beyond Trauma: What ACT Can Offer T	herapists Do (Workshop)	I ping Trauma Work (59)- V. Follette, Pistorello, & Walser				
Ballroom H	ACT and Yoga: Using yoga to optimize your clinical practice (53)- Ehrnstrom & Morrissey (Workshop)		ACT with Challenging Clients (60)- Strosahl (Workshop)						
Amphitheater			The Nine Mistakes New ACT Therapists Make and How to Avoid Them: (Yes, we said "Avoid!") (61)- Moran, Bach, Brock, & Robb (Panel)		Flexibly Alone: A Discussion on Loneliness and Psychological Flexibility (71)- Frederick, Cannici, Blackledge, Myler, & Newins (Panel)				
Brookside A	-		Stigma, Self-Stigma, and Psychological Flexibility (62)- Skinta, Luoma, Masuda, LeJeune, & Gregg (Symposium)		Creating your Own Peer-Led ACT Consultation Group (72)- Thompson, Luoma, LeJeune, Terry, Bushberg, Guinter, & Robb (Workshop)				
Brookside B		Research in Clinical Practice SIG meeting - J. Villatte & Koerner	RFT in Education (63)- Je. Oliver, N. Berens, Cattivelli, & Barnes (<u>Symposium</u>)	•	Let's Talk about Sex ACBS (73)- Curtin (Workshop)				
			Internet-Based Delivery of ACT: Legal, Ethical, and Clinical Developments (64)- Herbert, Gaudiano, Yuen, Goetter, Forsyth, & Gaudiano (Symposium)	В	Approaches to Addicted Behaviors (74)- A. Wilson, Johansen, Nikolaou, & Bricker (<u>Symposium</u>)				
Forest Glen		ACBSBeNe Chapter Meeting - A-Tjak	The Role of ACT in Battling the obesity Epidemic: Current Research and Future Directions (65)- L. Martin, Butryn, Forman, Hooper, & Kalter (Symposium)	R E A K	ACT versus standard CBT for Anxiety: How do the outcome and process data compare? (75)- Arch, Forman, & Berghoff (Symposium)				
Glen Echo Linden Oak		Colorado (soon to be Rocky Mountain) Chapter ACBS meeting - <i>Witter</i>	Clinical Applications of ACT with youth: A Review of Treatment Outcomes for ACT Across Various populations (66)- Murrell, Prout, Field, & Potts (Symposium)		Examining the Utility of the IRAP in Clinical and Forensic Domains and the Role of Deictic Relations in Self-based Techniques in ACT (76)- Foody, Nicholson, & Dawson (Symposium)				
Oakley (R&PD Sessions)			Health and Wellness Forum (67)- Dindo, Clark, Bauman, & Beachy (<u>Forum</u>)		ACT with Children, Adolescents, Young Adults, and Parents Forum (77)- Hinds, McTaggart, Brotherston, Knibbs, Traficante, Frederick, & Sandoz (Forum)				
Timberlawn		Deutschsprachige ACBSIer und ACTivisten special interest group - Drossel							

Tuesday, July 24 (Afternoon)										
	Noon- 12:45pm	Plenary 12:45pm- 2:00pm	2:00pm- 2:15pm	2:15pm-3:15pm		3:25pm-4:15pm	4:15pm- 4:30pm	4:30pm- 5:45pm	8:00pm- 12:00am	
ROOM		PLENARY		SESSI	ONS			PLENARY		
Grand Ballroom	L U N C H	The Case Against Psychiatric Drugs: History, Science, and the Long-term Effects of Psychiatric Medications (78)- <i>K.</i> Wilson, Whitaker (Plenary)		Using ACT with Families of Autistic Children: S Birtwell, Davis, & Co				Finding True Refuge: Meditative Pathways In the Face of Difficulty (96)- Walser, Brach (Invited Lecture)		
Dellacom A				Rule Governed Behaviour in Clinical Practice (80)- Sawyer & Duguid (Workshop)						
Ballroom A Ballroom B				ACT for Spiritual Development: Accept, Choose, Teach Others (81)- Robb (Workshop)		Contributions of RFT to interventions for Persons with Developmental Disorders (93)- Weil, Rehfeldt (Invited Lecture)				
Ballroom C		L		Dharma in ACTion: Why ACT needs Buddhism and Buddhism Needs ACT (82)- Kaplan, Brach, Forsyth, Thompson, Guarna, & Bolles (Panel)		The Future of Doctoral Psychology Training in CBT: Report of the Inter- organization Task Force on Cognitive and Behavioral Psychology Doctoral Education (94)- Ciarrochi, Herbert (Invited Lecture)			8:00pn	
Ballroom F		U N C H		The ACT Matrix: Self-as-context work in proc					8:00pm-12:00am	
Ballroom G				Compassion Focused Therapy and the Evolved Mind: The role of Affiliative Emotions in Psychotherapy (84)- Tirch, <i>Gilbert</i> (Invited Lecture)		ACT in inpatient mental health settings: Implementation and practical structures supporting it (95)- Nordstrand Jacobsen, Heggdal, & Lillelien (Panel)				
		B R E A K	R E A	Introducing and Integrating Cognitive Defusio (Works)		echniques in Therapy (85)- Blackledge			Follies 8	
Ballroom H Amphitheater				IGNITES (86)- Long, Steinwachs, Pritchard, Bo Gregg, Froelich, Cousineau, S. Bowden & T. Bo Goldstein, Conroy, &	wder	n, Murrell & Sinha & Al-Jabari, M. Villatte,			8:00pm-12	
Brookside A				Developing Your Skills as an ACT Trainer, Par & Luoma (\\\					12:00am	
Brookside B				From Reactivity to Resilience: Acceptance an Management (88)- A	bble	tt (<u>Workshop</u>)				
Forest Glen		L U N		Science with Intention: Refining methods Behavioral Science (89)- Kellum, Dixon, Hart, (Symposium)						
Glen Echo		С Н		Introduction to the IRAP Part 1 (90)- Hussey,	, Hu	ghes, & D. Barnes-Holmes (Workshop)				
Linden Oak				ACT in Health Psychology (91)- Brandt, Jo Pakenham, & Deledda (<u>Symposi</u>		Loverich, Check out the IGNITES in the Amphitheater!				
Oakley (R&PD Sessions)				in the Amphitheater! Supervision, Training and Dissemination Forum (92)- Waltz, Henderson, Morrissey, & Yavuz (Forum)						
Timberlawn										

			Wednesday, July 25 (Morning)							
	7:00am-7:50am	8:00am- 8:50am	9:00am-10:30am	10:30am- 10:45am	10:45am-Noon					
ROOM	SESSIONS		SESSIONS New Frontiers in Innovative Practice: An Existential-Integrative approach to therapy (99)- Schneider (Workshop)							
Grand Ballroom	Embodying ACT, Embracing RFT: How to apply body-based mindfulness interventions in clinical practice (97)- O'Connell & Rovner (Workshop)		How ACT is being used in organisations to help improve performance and wellbeing: Time management course (100)- <i>Archer</i> (<u>Workshop</u>)	BR	The Course, Contribution and Verbal Nature of Valued living (113)- Plaisance, Plumb-Vilardaga, Quebedeaux, & Flynn (<u>Symposium</u>)					
Ballroom A			Clinical Intervention in Traumatic Brain Injury Rehabilitation: Mixing ABA and ACT to Improve Outcomes (101)- Weil, Szabo, Je. Oliver, Brandt, & McLean (<u>Symposium</u>)	E A K	Fit Learning: Contextual Behavior Science in Educatio (114)- N. Berens, S. Hayes, K. Berens, Newsome, & Brook Rikard (Symposium)					
allroom C			Models of Psychotherapy Development: Putting Contextual Behavioral Science strategies in their larger context (102)- S. Hayes, Onken, Gaudiano, & W. Follette (Panel)		Beyond Bars: Psychological flexibility as a model for mental health care in forensic settings (115). Jeanis, Luoma, Amrod, Polk, Brillhart, & Porche (Panel)					
Ballroom F			Behaviorally Speaking: From packages to chang	e processes	(103)- Koerner, M. Villatte, & Kanter (<u>Workshop</u>)					
Ballroom G			Fire & Ice: Working with Client's Emotions in Session (104)- J. Villatte & Walser (Workshop)		ACT as a behavior medicine to improve health: Pain management and smoking cessation (116)- Kemani, Walser, Karekla, & Holmstrom (Symposium)					
Ballroom H	JourneyDance: Dancing ACT (98)- Morris (Workshop)		ACT with Depression (105)- Zettle & Carrasquillo (Workshop)	B R E A K	What's the difference between me and you?: Broadenii perspective taking research (117)- Berkout, McHugh, Whiteman, & Schnetzer (Symposium)					
Amphitheater			ACT and Social Work: Shared values, shared goals (106)- Boone, J. Hamilton, Morrissey, Mundy, & Steinwachs (Panel)	-	Using ACT to help people with chronic health condition (118)- K. Wilson, S. Martin, Atwater, & McCabe (Panel)					
	-		Introduction to the IRAP Part 2: Clinical Application	s (107)- <i>McEn</i> t	leggart, Nicholson, & Y. Barnes-Holmes (<u>Workshop</u>)					
Brookside A			Who ACTs? An Exploration of S	elf-as-Contex	tt (108)- M. Baugh (Workshop)					
Brookside B	-		ACT for teachers, parents, and kids (109)- A. Wilson, C. Baugh, Llewellyn, Livheim, & Cattivelli (Symposium)		RFT Applications with People with Developmental Disabilities (119)- Allen, Weil, Presti, Lovett, & Cattivelli (Symposium)					
orest Glen Glen Echo	-		Just not a math person" Academic anxiety, psychological flexibility, and academic success (110)- Squyres, Kellum, Fusilier, & Mullen (Symposium)	в	ACT for Disordered Eating: Recent Findings (120)- L Martin, Eifert, Shaw, Masuda, & Jacobelli (Symposium)					
inden Oak		Chapter & SIG Support Meeting - S. Hayes	Unearthing the development of eating disorders: From conceptualization to intervention (111)- Presti, Karekle, Jacobelli, & Koushiou (Symposium)	R E A K	Buddhism and Functional Contextualism: Intersections RFT and ACT with Contemplative Wisdom and Practic (121)- Kaplan, N. Martin, Atkins, Temple, & Tirch (Symposiu					
akley (R&PD			RFT and Process Research Forum (112)- Styles, Atkins, Bordieri, & Carpenter (Forum)		ACT for Chronic Pain and Medical Disorders Forum (12 Gismervik, Børsting Jacobsen, Waagan, Helsefort, & Yavu (Forum)					
essions)										

			Wednesday, July 25 (A	Afterno	on)		
ROOM		Noon-1:15pm MEETINGS	1:15pm-2:45pm	2:45pm- 3:00pm	3:00pm-4:15pm	4:15pm- 4:30pm	4:30pm-5:45pm PLENARY
		MEETINGS	ACTs of Kindness and Compass		rsyth & Berghoff (<u>Workshop</u>)		World domination through peace, love, and understanding: ACBS World Conference at 10 (145)- Bach (Presidential Address)
Grand Ballroom		Children, Teen & Family SIG Meeting - Murrell & Coyne (12:15-1:00pm)	Using RFT to construct and deconstruct cl (⊻	B R E			
Ballroom A Ballroom B	L U N C	Department of Veteran Affairs (VA) ACT SIG Meeting - Roca & Batten (12:15-1:00pm)	Dancing around the hexaflex: Therapeutic timing	j and flexibili /orkshop)	ity in ACT (125)- Törneke, Luoma, & Lejeune	A K	
Ballroom C	Н		Beyond the ABCs: Using variability, mom psychological flexibility in ACT and enhance				
Ballroom F		Student SIG meeting - Langer (12:15-1:00pm)	It takes a village: Children in their social world (127)- Carnathan, Coyne, Hamblin, & Moyer (Symposium)	B R E A K	Processes and outcomes of the dissemination and implementation of ACT for depression in VA (137)- Walser, M. Villatte, Karlin, McCutcheon, & Steadman-Wood (<u>Symposium</u>)		
Ballroom G			The Reality Slap (128)- Harris (Workshop)				
Ballroom H		L U	OK, I had a great ACT workshop, but I'm not sure how to use it: Effective ACT Skills Building (129)- <i>Brock</i> (<u>Workshop</u>)		Involving ACBS in a Framework for Increasing the Efficacy of Groups from an Evolutionary Perspective (138)- S. Hayes, D. S. Wilson (Invited Lecture)		
Amphitheater		N C H	Humanistic psychology, systems psychology, and ACT: Is it possible to bring these different traditions into a working alliance (130)- S. Hayes, Schneider, & Fraser (Panel)		ACT in Groups (139)- Oliver, Flaxman, & Christodoulou (<u>Workshop</u>)		
			Cognitive fusion, conceptualization and empirical findings (131)- Bolderston, Blackledge, Nassar, & Gillanders (<u>Symposium</u>)		Adapting ACT to new technologies: Methodology and outcomes (140)- Savvides, Karekla, Christodoulou, Dewit, & Vilardaga (Symposium)		
Brookside A Brookside B		CBS Dissemination in Developing Nations SIG meeting - Maero (12:15- 1:00pm)	Recent developments within basic IRAP research (132)- Dack, Hussey, McEnteggart, Hughes, Henrique de Almeida (Symposium)	B	Compassionate intentions in the psychotherapy setting (141)- Wright (Workshop)		
Forest Glen	L U N C	Swedish Chapter Meeting - (12:15-1:00pm)	Exploring the Flexibility of the Psychological Flexibility Model (133)- Bordieri, Colohan, Burke, Nongard, & Razzaque (<u>Symposium</u>)	E A K	ACT after Traumatic Events (142)- Daar, Batten, Hernandez, Hart, & Connell (<u>Symposium</u>)	B R E A	
Glen Echo	Н	Getting ACT Out to the Public SIG - Curtin (12:15- 1:00pm)	More than skin deep: Understanding, evaluating, and intervening on body image flexibility (134)- Quebedeaux, Ciarrochi, Greene, & LeBlanc (Symposium)		Creating contexts of change in the clinical setting for children and families: Different ways of doing ACT (143)- Presti, Coyne, Miselli, & Cairns (Symposium)	к	
Linden Oak		Chicago Chapter Meeting - Georgescu (12:15-1:00pm)	Understanding emotions and the therapeutic relationship (135)- Balbueno, Brillhart, Muñoz Martinez, & Maitland (Symposium)		Coping with stress in the modern world (144)- Schnetzer, Kashdan, Flynn, & Hooper (<u>Symposium</u>)		
Oakley		AFSCC meeting (ACBS french chapter) - Dionne (12:15-1:00pm)	Moving Therapy Online: What do you have to know ethically and legally (136)- Ireland & Anthony Bowen (Workshop)				
Timberlawn		Ontario ACBS Affiliated Chapter Meeting - Smith (12:15-1:00pm)					

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