



ACBS WORLD CONFERENCE  
**LYON, FRANCE**  
16-19 JULY 2026

[CONTEXTUALSCIENCE.ORG/WC2026](https://CONTEXTUALSCIENCE.ORG/WC2026)

## Welcome From the 2026 Program Chairs



### Welcome to Lyon! Lugdunum, the capital of gaul!

We are very happy to welcome you to the beautiful city of Lyon. France is the home country of Jean-Christophe, even if he tells you he's Breton, and the world conferences are, in a metaphorical way, the home of Jacqueline.

World conferences have their own special atmosphere of connecting, learning and sharing. It has been an honor and pleasure to work with those who have worked hard behind the scenes to make this world conference to yet another success.

The ACBS World Conference is a unique opportunity to engage with cutting-edge research, innovative practices, and a global network of professionals dedicated to alleviating human suffering and enhancing well-being through CBS. Whether you're a seasoned attendee or joining us for the first time, your presence enriches our community.

Beyond the opportunity to strengthen the bonds that many of us already have in this CBS community, we welcome those who are coming for the first time. This 24th ACBS World Conference has been thoughtfully organized, keeping in mind our shared mission of alleviating human suffering and furthering human well-being. We hope and trust you will enjoy a program that focuses on our values of inclusion, equity and diversity.

This year's program features:

- **Over 70 workshops** spanning 1.5 to 3 hours, included with your in-person registration, offering hands-on learning experiences.
- **So many amazing invited speakers, we want to highlight them all!** See [here](#) for all the experts sharing insights from diverse fields.
- **Pre-conference intensive workshops** providing deep dives into specialized topics (14–15 July 2026).
- **A variety of sessions**, including symposia, panel discussions, and poster presentations, covering topics from psychotherapy and education to social and global topics.

We extend our heartfelt gratitude to the Program Committee, Conference Strategy Committee, ACBS staff, volunteers, and all contributors who have worked tirelessly to bring this conference to life.

Welcome to ACBS 2026! Join us to make this conference a memorable and impactful experience.

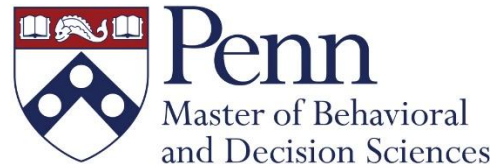
Dr Jean-christophe Seznec and Dr Jacqueline A-Tjak  
Conference Chairs  
ACBS World Conference 2026, Lyon

## Special Thank You from ACBS to our 2026 World Conference Program Committee!

See here for a full list of the fantastic volunteers who helped put the program together.  
[https://contextualscience.org/wc2026\\_program\\_committee](https://contextualscience.org/wc2026_program_committee)

## Thank You to the 2026 Sponsors:

Books in Spanish will be available through Saturday, 18 July.



## Evening Events

Wednesday • 15 July

**Opening Chapter, Special Interest Group (SIG) & Committee Social** (17:15-18:45), Hall/Foyer (Floor 0)

Say hello to your old friends and make some new ones!

Get connected with some of the Chapters, SIGs and Committees in your geographic area or area(s) of interest.

Open to conference and pre-conference attendees. Beverages available.

**Rookie Retreat: First ACBS Conference Orientation** (17:15-18:00), Perroux (Floor 1)

Translation: AI online with your phone - audio or text

Facilitators: Jenna LeJeune & Lanaya Ethington

Let us welcome you to your first (or one of your first) ACBS World Conferences. We'll give you a little information about the conference and do some icebreakers... because the networking starts now!

Thursday • 16 July

**Networking Social** (17:45-19:00), Hall/Foyer (Floor 0)

Join us for a night of networking and fun on Thursday evening!

Open to conference attendees. Beverages available.

Saturday • 18 July

**Follies** (20:00-22:30), Merieux (Floor 0)

Doors open at 20:00, Follies start at 20:30. Beverages available.

The Follies is a unique feature of ACBS conferences. Basically, it's a cabaret show, filled with funny songs, sketches, stand-up comedy routines, humorous PowerPoint presentations, pre-made videos, etc. And all of this funny and talented content is created by YOU: the conference delegates!

There are very few rules regarding the Follies content:

- Firstly, it has to be brief (around 3 minutes is perfect. Longer, and the shepherd's crook will be sweeping you off the stage!)
- Secondly, an aspect of ACT, Mindfulness, Behaviorism, therapy, RFT, CBS or any of the people you know in the ACT/CBS Community is fair game to be (gently and kindly) mocked.
- Thirdly, it has to be brief. Did we mention that?

The Follies actually comes from an important tradition: in the past 'The Truth' was what an authority deemed to be true. Then science came along, and people started to look to their direct observations to determine what was true. But of course, human beings love to categorize things in hierarchies, and began to automatically create hierarchies of people who could directly observe what was true and hence we have scientific authorities. The purpose of the Follies is to ensure that no idea, and no person in this community who has an idea, is immune to question, playfulness, and challenge.

Delegates: get your creative powers focused because anything you have seen in the CBS world that deserves to be made fun of is fair game. Produce your sketches, songs, PowerPoints, and stand up routines, and then email them to [dj@drdjmoran.com](mailto:dj@drdjmoran.com) or [drleebaggley@gmail.com](mailto:drleebaggley@gmail.com) to ensure they have your name for a place in the Follies. (At the conference, hurry and find D.J. or Dayna – you only have a short time to do it).

This event is open to conference attendees.

Want to keep the party going after the Follies? Check out these spots for the unofficial after party!

- [Caffe Bobar](#) (11 minutes walk) - Casual cocktails and bar snacks
- [La Feria](#) (30 minutes walk) - Latin bar with tapas and a dance floor

## CEs, Certificates, Evaluations

### CE Credits & Certificates (with hours)

For those who have pre-paid and signed up for continuing education credits or a certificate with hours, please remember to **scan in and out with the barcode on your name badge** at the beginning and end of each session using our scanner system in the room. If there is a problem and the scanners are not working, please make sure to sign in and out on the yellow attendance sheet provided. **We cannot give CE credit if you do not scan/sign in and out.** Those arriving more than 15 minutes late or leaving before the entire session is completed will not receive CE credits.

**CE credits are NOT available for IGNITE sessions, poster sessions, sessions 56, 148, 161, Chapter/SIG/Committee meetings, or other lunch/evening meetings.**

**CEs for BCBA's are not available for all sessions.** Check here for a list of excluded sessions.  
[https://contextualscience.org/wc2026\\_ce\\_credits](https://contextualscience.org/wc2026_ce_credits)

For those who have pre-paid and signed up for continuing education credits or a certificate with hours, **we will email you a printable copy of your certificate by 4 September.**

ALL certificates are sent via SimpleCert, so check your email for "certificates@simplecert.net".

## Evaluations

General conference evaluations and CE evaluations can be completed at <http://contextualscience.org/evals> 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 and general Evaluations

*Association for Contextual Behavioral Science (ACBS) is approved by the American Psychological Association to sponsor continuing education for psychologists. ACBS maintains responsibility for this program and its content. ACBS will issue certificates of completion.*

## Lunch/Breaks

**Morning Coffee/tea** can be found in the Hall/Foyer, Floor 0, from 10:15-10:45 and 14:45-15:15 (Thursday, Friday, Saturday) and 10:30-10:45 on Sunday. If you need additional coffee/tea throughout the day, there is a cafe, Maison Deschamps 2ème, across the street from the entrance of UCLy.

**Lunch** can be found in the Hall/Foyer and Vicat room, Floor 0, from 12:00-13:15, Thursday, Friday, and Saturday of the conference. Name badges are required, and guests are not permitted.

## #ACBSWC26 Conference Bingo!

Play #ACBSWC26 Conference Bingo for a chance to win 50% off registration to next year's World Conference in Lyon, FREE membership for a year, and more! Visit the registration desk to pick up your game card.

## Badge Requirement

Please remember that your badge is absolutely necessary to enter the conference venue, UCLY at 10 place des archives, 69002 Lyon. UCLY security requires detailed identification information for each attendee (which we already collected from you during registration) and badge verification each day. For this reason, we regret that guests are not permitted to enter, due to UCLY safety and security policies.

## Translation

### AI, phone-based translation:

14-15 July all pre-conference workshops sessions. 16-19 July all sessions (except plenary overflow rooms) in Merieux, Gounot, Mouterde, Weil, Aristote, and Perroux.

Attendees are required to provide their own internet connectable device and personal headphones. (Attendees are not permitted to use speakers on their devices for the comfort of others.)

Attendees can connect via the link in the app for each session. Links vary by room and by day.

Translation is provided as written text or as audio at the discretion of the attendee.

**DON'T FORGET YOUR PHONE, EARBUDS/ HEADSETS, AND CHARGER/ POWER BANK!**

## Plenary Overflow Rooms

For your comfort, during the plenary sessions, the audio and slides will be live streamed into Aristote, Weil, and Perroux rooms on Floor 1. Note, for those needing translation, please use the link provided for the Merieux room for the plenary.

## Luggage

If, on Sunday, 19 July, you are checked out and just need to keep your luggage with you, you are permitted to bring it to the session you are attending or drop it in our unattended luggage storage area in Vicat. All luggage must be collected by 12:30pm on Sunday, 19 July. ACBS is not responsible for luggage security.

## Internet

Complimentary internet is available at the university for conference attendees.

The network is: ACBS  
Password/Access Code: GZAcSMthWbA2sa



## Conference App



Scan this QR code or visit [my.yapp.us/ACBS](http://my.yapp.us/ACBS) to find detailed conference information, including the full program with abstracts and a map of the conference venue.

## PowerPoints/ Handouts

Any supplementary materials provided by presenters to ACBS are available via the conference app (translated when possible).

## Questions / Help

### Registration/Information desk hours

Hall/Foyer, Catholic University of Lyon

- *Mon. 16:00-16:30*
- *Tues. 7:30-17:15*
- *Wed. 8:00-16:00 & 17:00-18:30*
  - *Conference only name badge collection available after 14:00*
- *Thurs. 7:30-17:00*
- *Fri. 8:00-17:00*
- *Sat. 8:00-17:00*
- *Sun. 8:30-11:00*

If you have any questions or need any help after the conference, please reach out to ACBS staff:

- Darcy: [staff@contextualscience.org](mailto:staff@contextualscience.org)
- Abbie: [support@contextualscience.org](mailto:support@contextualscience.org)
- Renae: [office@contextualscience.org](mailto:office@contextualscience.org)

**Tuesday-Wednesday • 14-15 July • Pre-Conference Workshops**

	9:00 - 10:15	Coffee (Floor 0)	10:30- 12:15	<b>LUNCH</b> (Floor 0)	13:15- 15:00	Break	15:15- 17:00
<u>ROOM</u>							
<b>Perroux</b>	<p><b><u><a href="#">Deep Process, Brave Work: ACT and Exposure for Trauma Recovery</a></u></b>                      Robyn Walser, Ph.D.</p>						
<b>Gounot</b>	<p><b><u><a href="#">When Hope Feels Lost: Cultivating Presence, Courage, and Connection in the Treatment of Depression with Functional Analytic Psychotherapy (FAP)</a></u></b>                      Mavis Tsai, Ph.D., Sarah Sullivan-Singh, Ph.D., Barbara Kohlenberg, Ph.D., Katia Manduchi, Ph.D., Stavroula Sanida, M.Sc.</p>						
<b>Mouterde</b>	<p><b><u><a href="#">Focused ACT: Expanding the Reach of Contextual Behavioral Science in a Troubled World</a></u></b>                      Kirk Strosahl, Ph.D., Patti Robinson, Ph.D., Thomas Gustavsson, M.Sc.</p>						
<b>Aristote/ Weil</b>	<p><b><u><a href="#">ACT Beyond Protocols: Finding Beauty in the Midst of Darkness</a></u></b>                      Kelly G Wilson, Ph.D.</p>						
<b>C125</b>	<p><b><u><a href="#">Wonder and Wisdom: Building Flexibility across the Developmental Lifespan</a></u></b>                      Louise Hayes, Ph.D.</p>						

ACBS Pre-Conference experiential workshops require separate registration. See our website for details: [https://contextualscience.org/wc2026\\_preconference\\_workshops](https://contextualscience.org/wc2026_preconference_workshops)

## Program Detail • Thursday • 16 July

Thursday Morning 8:00

### Psychedelic SIG Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Gounot**

Temple Morris, LCSW-C, True North Therapy & Training

Join Us for the Psychedelic SIG Meeting! Whether you're already a SIG member or simply curious about our work, please join our annual, in-person SIG meeting. This is a perfect opportunity to learn more about what we do and to connect with colleagues who share your interests. We'll review our activities and accomplishments from the past year, celebrating the progress we've made together. We'll also share an exciting preview of what's in store for the year ahead, including upcoming initiatives and collaborative opportunities. Most importantly, this meeting is a chance to connect and reconnect. Whether you're meeting new friends or catching up with familiar faces, we look forward to building and strengthening our community. Come with questions, ideas, or just an open mind—we can't wait to see you there!

### On Becoming a Peer Reviewed Trainer

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Barrot**

Jim Lucas, PG Dip CBT, Openforwards  
Ralf Steinkopff, Dipl.-Psych., Psychotherapeutenkammer Berlin

Have you wondered about becoming a peer-reviewed ACT Trainer? Would you like to find out more how it works and whether you're ready? Being listed as an ACT trainer is a pragmatic way to help learners find high quality ACT training. If you currently deliver ACT training and want to join the ACT Training Community, come and meet some of the committee. It's your chance to ask questions and learn more about the process. You'll discover: the requirements to apply, how to know if you're ready to apply, how your training can be observed and what to do if you teach in languages other than English.

### German Speaking Chapter Meeting (DGKV)

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Mouterde**

Marilena Bertacco, DGKV, German Speaking Chapter  
Corinna Nebel, Private Practice

Come to meet us if you want to:

- connect with other German speaking contextual science professionals and enthusiasts
- reconnect with your local community
- collaborate on research projects
- find more training opportunities
- share what's important to you in context of DGKV
- know what DGKV is about
- want to get involved locally
- want to know more DGKV Jahreskongress „Metamorphosen, Metaphern und Meer“, 18.-20. September 2026 in Lübeck!

We are looking forward to see you there!

### Applying ACT to Addictions SIG Meet and Greet

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Aubert**

Deirdre Waters, Psy.D., Rutgers University  
Molly England, Private Practice

Passionate about Acceptance and Commitment Therapy and addictions work? Join the Applying ACT to Addictions SIG for a relaxed, energizing meet & greet at ACBS World Conference 2026. Connect with clinicians, researchers, and students, share ideas, and explore how ACT is being applied to addictive behaviors across settings. All levels of experience welcome. Come say hello, meet your community, and get involved.

### GSRD SIG

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Maldiny**

Sarah Levinson, LMSW, Creative Relating, Private Practice

The Gender, Sexuality, and Relationship Diversity SIG will gather to discuss previous and upcoming programming and any topics of interest to the membership. All are welcome!

### Romanian Chapter Meeting / Întâlnirea filialei românești

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C125**

Silvia Nicolescu, Private Practice

This will be a short in-person meeting, a chance to get to know each other and connect. All romanians are invited, chapter-members or not.

### Türkiye Chapter Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C154**

Zülal Celik, M.D., Istanbul Medeniyet University  
Merve Terzioğlu, M.D., Private Practice

This meeting is designed as a space for members of the ACBS Türkiye Chapter community to come together, share experiences, and build meaningful connections. Rather than a formal presentation, the session will be facilitated as an interactive community meeting where participants are invited to actively contribute their perspectives, needs, and ideas.

All members of the broader ACBS community are welcome to join this open and inclusive meeting.

### Climate Justice and Action SIG - Meet the SIG!

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C225**

Jae Villanueva, Ph.D., Swiss Institute of Sustainable Health / Schweizer Institut für nachhaltige Gesundheit (SING)  
Devin Guthrie, Ph.D., Life & Death Coaching  
Viveka Ramel, Ph.D., Sevitar & University of California Eco-Resilience Group

Join us at the meeting of the Climate Justice and Action SIG! We will provide a comprehensive overview of current activities, achievements, and strategic directions as detailed in the SIG's annual report. We explicitly welcome both current members and potential new participants and will talk about ongoing projects and initiatives within the SIG and we'll also brainstorm further actions for the SIG in small groups. This will be embedded in a dynamic and inclusive atmosphere, encouraging personal connections and networking opportunities. The session will conclude with a discussion segment, inviting feedback and ideas on increasing engagement and broadening the scope of action of the SIG within the ACBS community.

**Greece - Cyprus Chapter: A new mission**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C254**

Stavroula Sanida, Private Practice  
Vasilis Vasiliou, University of Athens

Everybody is welcome at our Chapter's meeting. We shall describe our new mission: giving our chapter a legal identity (similar to an NGO) and setting our vision. We need our members' and new colleagues' contribution in Greece and in Cyprus in order to meet our new goals. We are excited to meet in Lyon and exchange our ideas :)

**ACBS Brazil Chapter Meeting**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C302**

Giulianna de Azevedo Nasser, ACBS Brasil / Diálogos Somam

The ACBS Brazil Chapter Meeting aims to bring together Brazilian and Portuguese-speaking members to connect, exchange ideas, discuss ongoing initiatives within the chapter, and strengthen collaboration across our community. The meeting is also an opportunity to welcome and integrate those who are interested in becoming more involved in the chapter and its activities. All are welcome.

Thursday Morning Plenary 9:00

**1. The Place of Poetics in Contextual Behavioral Science**

Plenary • 9:00 - 10:15

Translation: AI online with your phone - audio or text

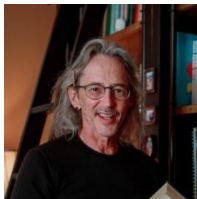
Components: *Conceptual analysis, Didactic presentation*

Categories: Theory and philosophical foundations, Clinical intervention development or outcomes, Poetics, Psychotherapy

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Merieux (Overflow Rooms: Weil, Aristote, Perroux)**

Kelly G. Wilson, Ph.D., University of Mississippi  
Introduction by: *Rhonda Merwin, Ph.D., Duke University*



In this plenary, I will explore the role of poetics within contextual behavioral science, with particular attention to how it can shape the doing and teaching of psychotherapy. By poetics, I do not mean ornament or metaphor alone, but a disciplined sensitivity to the tone, form, rhythms, textures, and unfolding of lived experience.

Human motivation is often opaque and rife with contradiction. We are shaped over time by the questions we encounter—some spoken plainly, others embedded in the quiet demands of family, work, love, and culture. Much of what we call identity emerges in response to those pressures. Although we are aware of some aspects of this shaping process, a great deal of learning and motivation occurs outside the bright, dumb light of awareness.

A poetic stance does not rush to explanation or correction. Instead, it slows, listens, and follows the living structure of experience as it reveals itself in relationship. In that shared light—between therapist and client, teacher and student, human and human—complexity is not reduced but honored. When we are willing to remain present to uncertainty, without collapsing into the certainty of pedagogy or technique, paths appear that are dignified, meaningful, and worth the pain they require. Poetics, in this sense, names the creative and ethical discipline of staying with what is alive long enough for transformation to arrive.

I am not calling for a rejection of science, but for a right-sizing of a particular scientific posture, and for recognition that this sensibility runs deeply through the intellectual history of contextual behavioral science.

Educational Objectives:

1. Describe the difference between what Curt Richter calls “free research” versus “design research.”
2. Describe the relationship between free and design research as they apply to doing and teaching psychotherapy.
3. Name three factors that suggest the need for a poetic versus problem solving stance in the doing and teaching of psychotherapy.

**CEs Available (1.00):** [CEs for Psychologists](#) [BCBA CEUs](#)

Thursday Morning 10:45

## 2. The Art of ACT

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Professional development, Supervision and training, Adults

Target Audience: *Intermediate, Advanced*

**Location: Merieux**

John P Forsyth, Ph.D., University at Albany, SUNY  
Jamie R. Forsyth, Ph.D., Freedom First Psychological Services

ACT is often taught as six core processes, but masterful practice requires more than “doing the hexaflex.” In this intermediate-to-advanced workshop, we move beyond fidelity to protocol toward the art of process work grounded in relational awareness.

When might defusion be contraindicated? How do we detect pseudo-acceptance or values used in the service of avoidance and control? How can we determine which process is operating in the moment, while recognizing when a well-intended intervention has missed its mark? Can we integrate interventions from other traditions in an ACT-consistent way and, if so, how?

Through live demonstrations and applied case examples, we will teach participants how to assess and use language as intervention, map processes in real time, and sequence interventions based on function rather than form. Special attention will be given to relational processes, including therapist-client dynamics, moment-to-moment functional responding, and the client’s relationship with self, their pain, and history.

Participants will leave with greater clarity about how to do ACT artfully while embodying their own unique voice and clinical style.

Educational Objectives:

1. Utilize language as intervention in an ACT-consistent way.
2. Describe indicators that ACT-based interventions may be contraindicated.
3. Assess therapist and client relational processes that influence intervention impact.

**CEs Available (1.25):** [CEs for Psychologists](#)

## 3. Enhancing Psychological Flexibility: Integrating Psychotherapy and Psychedelics

**Panel** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Case presentation, Didactic presentation, Literature review*

Categories: Clinical intervention development or outcomes, Processes of change, Psychedelic-Assisted Therapy, Psychedelics

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Gounot**

Chair: Brian Pilecki, Ph.D., Portland Psychotherapy, Portland Institute for Psychedelic Science  
Temple Morris, LCSW-C, True North Therapy & Training  
Kyong Yi, LCSW, Portland Psychotherapy  
Jason Luoma, Ph.D., Portland Institute for Psychedelic Science  
Eugen Secară, MCOGSc, MCLinPsych, Babeş-Bolyai University  
Stacey B Armstrong, Ph.D., The Ohio State University

Emerging evidence suggests psychological flexibility serves as a central mechanism through which psychedelic-assisted therapy produces therapeutic change. This panel examines recent advances in understanding how psychotherapy and psychedelic experiences work synergistically to enhance psychological flexibility across different therapeutic contexts. Panelists bring expertise in clinical trials, real-world implementation in legal settings, and diverse treatment modalities that illuminate the complementary roles of preparation, dosing, and integration sessions in promoting psychological flexibility. Discussion will address key questions, including: What specific psychotherapeutic processes optimize gains in psychological flexibility during preparation and integration? How do experiential processes during psychedelic sessions interact with structured therapeutic interventions? What adaptations of CBS-informed approaches are emerging across clinical trials, facilitator-guided programs, and other legal contexts? The panel will explore practical implications for protocol development, facilitator training, and treatment optimization, with emphasis on translating research findings into clinical applications. Attendees will gain current perspectives on leveraging CBS principles to maximize psychological flexibility outcomes across the evolving landscape of psychedelic therapy contexts.

Educational Objectives:

1. Describe the current evidence for psychological flexibility as a mechanism of change in psychedelic-assisted therapy.
2. Identify specific psychotherapeutic processes and CBS-informed interventions that optimize psychological flexibility gains across different phases of psychedelic treatment (preparation, dosing, integration).
3. Compare how CBS principles are being adapted and implemented across diverse contexts, including clinical trials, legal facilitator-guided programs, and integration psychotherapy.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### **4. Meeting the Challenge of Training ACT/CBS Interventions to Competency at Scale Worldwide: ACBS Competency and Dissemination Pillar Sponsored**

**Panel** • 10:45 - 12:00

Translation: Not available

Components: *Conceptual analysis, Didactic presentation, Strategic planning*

Categories: Supervision and training, Dissemination or global health strategies, Practitioner Competency, Training Pathways

Target Audience: *Beginner, Intermediate*

**Location: Barrot**

Chair: Sean P Wright, M.A., M.S., LMHC, Lutheran Community Services Northwest  
Robyn D. Walser, Ph.D., Trauma and Life Consultation and Psychological Services  
Shinji Tani, Ph.D., Ritsumeikan University  
Lou Lasprugato, MFT, Lou Lasprugato Psychotherapy & Training PLLC  
Raul Vaz Manzione, M.Sc., RVM Psychological Services

Growing attention has been directed toward the challenge of measuring and strengthening practitioner competency in ACT and other contextual behavioral science (CBS) approaches. Recently, international standards for CBS training and supervision were promulgated (Gillanders et al., 2025),

inspiring productive dialogue within the ACBS community about diverse training needs. Given the variability in local training capacity/constraints, operationalizing and implementing the international standards is an ongoing challenge. This panel will address three issues: (1) how to support ACT/CBS implementation within diverse systems of care affected by top-down and bottom-up influences; (2) how to educate prospective trainees about training pathways that foster, versus hinder, the development of competent practice; and (3) how the training community can align activities to promote practitioner competency using empirically supported methods while honoring ACBS values such as non-hierarchy and non-ossification.

The panel will introduce the new international training standards, describe key challenges in scaling CBS interventions with increasing practitioner competency, and propose potential solutions. Audience members will be invited to engage in open discussion to identify stakeholder needs and actionable next steps.

Educational Objectives:

1. Describe the core components and intended functions of the new international standards for training and supervision in ACT and other CBS approaches.
2. Identify three key challenges and contextual factors affecting the dissemination, implementation, and assessment of practitioner competency in ACT/CBS across diverse systems of care and cultural settings.
3. Describe two training and supervision strategies that promote practitioner competency using empirically supported methods while remaining consistent with ACBS community values such as non-hierarchy and flexibility.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

**5. Mourning a loss & rebuilding a future: Using the Dual Process Model alongside CBS therapy with grief & other losses: Canada - Québec Chapter Sponsored**

**Workshop** • 10:45 - 12:00

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

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

Categories: Processes of change, Behavior analysis, Deuil, Pertes, Valeurs, Sens

*Target Audience: Intermediate, Advanced*

**Location: Mouterde**

Francis Lemay, Ph.D., Université Laval

Ray Owen, DClinPsychol, DRO Psychology Services

Adjusting to significant loss or unwanted change is a common theme in psychological therapy, including death of a loved one, ending of a relationship, loss of a role or context, or changes in physical health. Contextual Behavioral Science (CBS)-based therapies provide relevant clinical tools to help process such events. However, substantial and well-evidenced approaches from other traditions, including Grief Therapy, offer models and interventions that can enhance and be enhanced through integration into CBS practice.

This workshop will present the Dual Process Model (Stroebe & Schut, 1999), review its history and evidence base and examine how it can be integrated with CBS processes (e.g. acceptance, values, and committed action), underlying explanations (e.g. deictic framing), and interventional approaches (e.g. The ACT Matrix).

As well as conceptual understanding (head) and practical skills (hands), participants will reflect on their experiences of clinical and/or personal loss to contextualise the model and practice (heart). Please be aware of this in choosing to attend, especially if you have experienced a significant personal loss recently.

Educational Objectives:

1. Describe the Dual Process Model (DPM) of loss and grief, its history and evidence-base & understand how it interacts with CBS models and practices.
2. Formulate a clinical example of adjustment to loss using this combined (CBS and DPM) approach.
3. Choose appropriate interventions based on this approach.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **6. How to ADHD Compassionately: Authentically Integrating ACT and CFT with ADHD Adolescents: USA - Ohio Chapter Sponsored**

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Experiential exercises, Role play*

Categories: Clinical intervention development or outcomes, Processes of change, Adolescents

Target Audience: *Beginner*

**Location: Weil**

Chris P Fraser, MSW, Positive Path Counseling, LLC  
Sarah Cassidy, Ph.D., Psychological Society of Ireland/Smithsfield Clinic

This workshop explores how to support ADHD adolescents by authentically integrating ACT and Compassion Focused Therapy (CFT).

In this workshop, we will be illustrating mindfulness techniques tailored for ADHD adolescents, strategies to help ADHD adolescents identify/discover their values, along with ways to help them cultivate compassionate mind skills. This workshop will have a strong emphasis on experiential learning that will include short guided mindfulness practices, movement-based practices designed specifically for ADHD adolescents, and group discussions. Together, we will deepen not only our clinical skills, but enhance our capacity to be more fully present and compassionate with the ADHD adolescents we serve.

Educational Objectives:

1. Describe how Acceptance and Commitment Therapy (ACT) and Compassion Focused Therapy (CFT) principles can be authentically integrated to support ADHD adolescents.
2. Demonstrate and integrate into clinical practice at least two mindfulness or movement-based practices tailored for ADHD adolescents.
3. Describe the value of fostering psychological flexibility and compassionate nervous system agility and apply these concepts in their work with ADHD adolescents.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **7. Less Talk, More ACT: Bringing A Deliberate Practice Method into Supervision: Supervision & Consultation SIG Sponsored**

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Supervision and training, Professional development, Deliberate Practice, Training

Target Audience: *Intermediate, Advanced*

**Location: Aristotle**

Sarah Pegrum, Ph.D., Pegrum Therapy & Training  
Jim Lucas, PG Dip CBT, Openforwards  
Sally Bradley, DClinPsy, Ahead Psychology Ltd.

Therapists often leave ACT training inspired but unsure what to practice, contributing to common missteps such as over-talking or explaining ACT rather than enacting it (Brock et al., 2015). Supervision is intended to address these pitfalls and bridge the gap between knowing and doing. However, parallel processes can occur. Supervision may rely heavily on discussion, avoid recordings or role-play, and lack structured feedback, thus limiting skill development

This workshop focuses on deliberate practice within the SEED model of ACT consistent supervision (Bradley et al., 2024). Deliberate practice involves identifying a growth edge, analyzing the function of therapist behavior, defining an alternative response, and engaging in repeated practice with feedback to shape more effective ACT delivery.

The workshop is experiential. Participants reflect on their clinical missteps and bring these into structured real-plays, where supervisors are guided step by step through the deliberate practice

process. Exercises focus on two common missteps: over-talking and conceptualizing instead of enacting.

This session is designed for ACT supervisors, trainers, and clinicians seeking supervision that moves beyond discussion into observable skill development.

Educational Objectives:

1. Describe the principles of deliberate practice and its relevance to skill development in ACT.
2. Identify functional barriers to effective supervisee and supervisor behavior (e.g., over-talking, conceptualizing ACT).
3. Implement structured supervision using analysis, rehearsal, feedback, and planning.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 8. Leveraging Digital Technology to Improve Population Health: Developing and Beta-Testing Interventions

**Symposium** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Original data*

Categories: Mobile or digital technology, Health / behavioral medicine, ACT

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Perroux**

Chair: Rhonda Merwin, Ph.D., Duke University

Discussant: Michael Levin, Ph.D., Utah State University

Megan Kelly, Ph.D., VA Bedford Healthcare System; UMass Chan Medical School

Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

Digital interventions can improve access to needed behavioral health services. The current symposium will present several of these new and emerging, fully digital interventions designed to increase psychological flexibility to improve human health and well-being. Three empirical studies will be presented, each describing the process of developing or refining digital interventions. Dr. Kelly will present on ACTsocial, an app designed to improve social support in Veterans in the VA. The presentation will focus on integrating Veteran and provider perspectives into the app. Dr. Merwin will present on the development of FlexED, a digital, gamified intervention to engage young women and girls with maladaptive eating and weight control behaviors, and outcomes of a multiple baseline experiment testing impact on body-related psychological flexibility. Dr. Bricker will present on community-based participatory cultural adaptation of iCanQuit, an ACT-based smartphone intervention, into IndigeQuit, designed specifically for American Indian and Alaska Native (AI/AN) people. Presentations will highlight co-development with end users, mechanism engagement and individual patterns of treatment response, and the potential of digital technology to improve population health.

- *Development of an Acceptance and Commitment Therapy Mobile Application to Improve the Social Support of Veterans with PTSD: A Qualitative Study*  
 Megan Kelly, Ph.D., VA Bedford Healthcare System, UMass Chan Medical School  
 Scott Reece, B.A., VA Bedford Healthcare System  
 Tracy Claudio, A.A.S., VA Bedford Healthcare System  
 Kendra Pugh, Ph.D., VA Bedford Healthcare System

Veterans with PTSD often have substantial interpersonal problems and low perceived social support from family, partners, and peers. ACTsocial is a mobile application that focuses on helping Veterans with PTSD who are socially isolated and having difficulty maintaining social connections. For additional development and implementation of the ACTsocial app in the U.S. Veterans Health Administration (VHA), we conducted qualitative interviews about veteran-preferred elements of the app (n=12 Veterans) and implementation constructs from the Consolidated Framework for Implementation Research (n=12 mental health providers). Veterans liked the design and content of the app, particularly the treatment rationale, common barriers to relationships (e.g., mistrust), and embedded exercises. Provider interviews indicated that providers thought that the app would be acceptable to veterans and would be feasible to include within VHA mental health services. Both veterans and providers indicated that the app could be used for both self-management purposes and facilitated by providers within mental health sessions. Overall, this

study demonstrated that the ACTsocial app was acceptable to veterans and would be a valuable addition to veterans' mental health care.

- *FlexED: Development of a Digital, Gamified Early Intervention for Eating Disorders*

Rhonda M. Merwin, Ph.D., Duke University, School of Medicine  
 Maria Karekla, Ph.D., University of Cyprus  
 Ashley A. Moskovich, Ph.D., Duke University  
 Max Roberts, Ph.D., Duke University  
 Caitrin Murphy, M.A., Duke University

Young women and girls are at disproportionate risk for developing life-threatening eating disorders. Intervening early has the best outcomes, however, there are significant barriers to accessing help and up to 70% of the people affected are untreated. This paper describes the development and testing of FlexED, a digital intervention that uses gamification to engage young women with early signs of an eating disorder and teach psychological flexibility skills with body image distress. Development included engagement of end-users in surveys (n=53), interviews and beta-testing of segments and sessions (n=5), followed by a multiple baseline experiment (n=21) testing mechanism engagement and treatment dose, with multidimensional, multi-level assessment of psychological flexibility (measurements of attentional, affective/physiological and cognitive flexibility). Adaptations were made to characters, storylines and interactive exercises based on user feedback and entries during app use. Standardized treatment effect estimates for the multiple baseline experiment were: CompACT=0.42, BIAAQ=.19, Stroop bias (cognitive inflexibility)= -0.35 and body fixations (attentional inflexibility)=-0.38. Standardized mean difference by individual and examination of individual patterns of change (e.g., CompACT subscales) revealed variability in treatment response.

- *Culturally Adapting an ACT-Based Smoking Cessation App for American Indian and Alaska Native Communities: A Community-Based Participatory Process*

Jonathan B. Bricker, Ph.D., Fred Hutchinson Cancer Center, University of Washington  
 Margarita Santiago-Torres, Ph.D., Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Brianna M. Sullivan, M.S., Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Kristin E. Mull, M.S., Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Hershel W. Clark, Cancer Consortium, IndigeQuit Community Advisory Board; Navajo Nation  
 Camille A. Fogel, M.S., Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Soo Bin Hwang, Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Alison R. Keith, Public Health Sciences Division, Fred Hutchinson Cancer Center; Descendant of the Squaxin Island Tribe  
 Chase Kornacki, MPH, Cancer Consortium, IndigeQuit Community Advisory Board; Navajo Nation  
 Trivia Afraid of Lightning-Craddock, MA, Cancer Consortium, IndigeQuit Community Advisory Board, Seattle, WA, USA; Mniconjou; Lakotah  
 Sydney A. Martinez, Ph.D., Cancer Consortium, IndigeQuit Community Advisory Board; Cherokee Nation Citizen; University of Oklahoma  
 Dean S. Seneca, MPH, Cancer Consortium, IndigeQuit Community Advisory Board; Seneca Scientific Solutions+; University of Rochester Medical Center; University of Buffalo  
 Crystal M. Stanford, Cancer Consortium, IndigeQuit Community Advisory Board; Lakotah; Chiricahua Apache  
 Christeine Terry, Ph.D., Public Health Sciences Division, Fred Hutchinson Cancer Center  
 Sierra L. Wilcox, BSPH, Cancer Consortium, IndigeQuit Community Advisory Board; Navajo Nation  
 Lonnie Nelson, Ph.D., Public Health Sciences Division, Fred Hutchinson Cancer Center; Cherokee Nation Citizen  
 Patricia Nez Henderson, M.D., Navajo Nation; Black Hills Center for American Indian Health

American Indian and Alaska Native (AI/AN) people experience the highest commercial cigarette smoking rates in the world. ACT's principles of values-based action, acceptance of internal experiences, and contextual sensitivity closely align with Indigenous worldviews. This presentation describes the community-based participatory cultural adaptation of iCanQuit, an ACT-based smartphone intervention, into IndigeQuit, designed specifically for AI/AN adults who smoke commercial cigarettes. Using a three-step, user-centered mixed-methods process, AI/AN community members and researchers collaborated to refine ACT metaphors, values content, imagery, and language. Step 1 involved qualitative interviews with prior AI/AN iCanQuit users (n=8). Step 2 engaged a Community Advisory Board and prototype-testing interviews with additional AI/AN participants (n=4). Step 3 included beta testing via a six-day diary study of AI/AN adults who smoke (n=7). Key adaptations included replacing colonial metaphors with culturally resonant ACT-consistent exercises, distinguishing ceremonial from commercial tobacco use, emphasizing values such as honoring the Earth and community, and introducing a trusted elder guide character. Beta testing demonstrated high acceptability and cultural resonance, with participants reporting the app "felt made for them." Findings offer a replicable model for culturally adapting contextual behavioral interventions.

Educational Objectives:

1. Identify and apply community-informed strategies for culturally adapting ACT metaphors, values, and intervention components when designing or delivering ACT-based interventions for underserved populations.
2. Describe strategies for intervention development that can increase treatment acceptability, efficacy or efficiency.
3. Describe challenges and opportunities in the use of digital interventions to improve human health and well-being.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 9. Values-Based Interpersonal Skills in Prison: An ACT-Informed Experiential Protocol

Workshop • 10:45 - 12:00

Translation: Not available

Components: *Experiential exercises*

Categories: Clinical intervention development or outcomes, Inmates, Valued Based Interpersonal Skills in Prison

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Aubert**

Maria Petridou, Ph.D., University of Limasol  
Vasiliki Christodoulou, Psy.D., UCLan Cyprus

Correctional environments are marked by conflict, mistrust, and emotionally intense interactions that challenge both incarcerated individuals and staff. Acceptance and Commitment Therapy (ACT) offers a practical, values-based framework for strengthening psychological flexibility, interpersonal effectiveness, and prosocial behavior in these high-constraint settings. However, structured protocols translating ACT principles into concrete interpersonal skill development in prisons remain limited.

This experiential workshop introduces an ACT-informed protocol designed to enhance interpersonal skills among incarcerated individuals. Participants will engage in three core modules: (1) Discovering Values in Incarceration, using virtual reality to explore values within constrained environments; (2) Values-Based Disclosure at Work, a structured exercise examining how personal values guide professional self-disclosure, informed by a meta-synthesis of reentry experiences; and (3) Values-Based Decision Making, a guided reflection on making work-related decisions grounded in values rather than avoidance or short-term emotional relief.

Throughout the session, facilitators will model core ACT processes: Values clarification, Acceptance, Defusion, and Committed Action, while discussing adaptations for correctional contexts. Participants will leave with practical exercises and implementation strategies applicable to institutional settings.

Educational Objectives:

1. Demonstrate three ACT-based exercises that have been adapted for correctional settings.
2. Identify how values processes can support prosocial behavior in high-constraint environments.
3. Apply values-based communication and decision-making exercises to correctional or other institutional contexts. Participants can experience some activities in the Virtual Reality Environment (if it is possible)

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 10. Getting into the Body to Get Out of the Mind: Embodied Presence and Safety as a Pre-Introduction to Acceptance

Workshop • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Somatic, Acceptance and Mindfulness Based Interventions

*Target Audience: Beginner, Intermediate*

**Location: Maldiney**

Karen Vogel, University of Sao Paulo  
 Michaele T. Saban Bernauer, University of São Paulo

For many individuals—especially those living under chronic stress or the effects of trauma—being invited to “accept” internal experiences through cognitive processes alone can feel inaccessible or even unsafe. When the nervous system is dysregulated, the mind may not yet be a reliable doorway to acceptance.

This workshop explores the body as a primary gateway to presence, regulation, and psychological flexibility. Drawing on embodied mindfulness, Acceptance and Commitment Therapy (ACT), and trauma-informed perspectives, we propose that cultivating a felt sense of safety in the body is a necessary pre-introduction to acceptance.

The experiential practices emphasize reconnecting with bodily sensations in a gentle, choice-based, and compassionate manner. By learning to sense the body from within—through breath, posture, movement, and interoceptive awareness—participants can reduce cognitive fusion, soften experiential avoidance, and anchor attention in the present moment. As the body begins to feel safer, the nervous system naturally shifts toward regulation, allowing openness to experience. In this sense, getting into the body may be a compassionate and effective way of getting out of the mind—and into acceptance.

Educational Objectives:

1. Apply practices focused on body awareness, grounding, and present-moment presence.
2. Demonstrate how internal experiences manifest in the body and are perceived as emotional processes through experiential exercises.
3. Demonstrate the ability to experience emotions in the body while applying an attitude of kindness, care, and self-compassion.

**CEs Available (1.25):** [CEs for Psychologists](#)

## 11. Active Compass Crafting: Navigating Core Values through Emotions and Embodied Awareness

**Workshop** • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Processes of change, Mindfulness, Core Values, Emotions, Sensation, Embodied Awareness, Acceptance, Self-Compassion

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C125**

Caroline Theau, Ph.D., Stand Up Therapie

Participants embark on a self-discovery journey to create their personal ACTive Compass based on bodily sensations, emotions, and core values.

The educational objectives guide attendees through four experiential steps:

**Connect to Core Values:** Through a reverse-presentation icebreaker, participants describe themselves as their opposite. This values clarification exercise uses meaningful contrast to make authentic values tangible through the physical discomfort experienced when expressing values-inconsistent perspectives.

**Embody Perspective-Taking:** Participants engage in role-play that develops self-as-context while learning to discriminate bodily sensations associated with values-consistent versus values-inconsistent actions—creating reliable somatic markers for workable choices.

**Enhance Present-Moment Awareness:** Attendees practice contacting emotions and bodily sensations in the present moment, recognizing how emotional responses—particularly strong reactions like indignation or gratitude—signal deeply held values and guide values-based action.

**Integrate Your Personal Compass:** Participants synthesize core values, emotional responses, and physical sensations into a practical body-based compass for navigating daily choices with psychological flexibility.

Acceptance and self-compassion practices support participants in staying open to difficult internal experiences during values exploration, strengthening their capacity for committed action.

Educational Objectives:

1. Identify personal core values and discriminate bodily sensations associated with values-consistent versus values-inconsistent actions through contrast-based exercises and present-moment awareness.
2. Demonstrate perspective-taking and role-play techniques that facilitate values clarification and self-as-context in clients, using embodied awareness to differentiate alignment versus misalignment experiences.
3. Apply and integrate a body-based values compass framework combining physical sensations, emotional responses, and core values to guide clients in making values-aligned choices.

**CEs Available (1.25):** CEs for Psychologists

**12. Neuro-ACT: Adapting ACT for Neurorehabilitation**

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Original data*

Categories: Clinical intervention development or outcomes, Health / behavioral medicine, ACT, Neuropsychology, Neurorehabilitation, Stroke, Parkinson's Disease

Target Audience: *Beginner, Intermediate*

**Location: C154**

Chair: Simon Ladwig, Ph.D., Universität Bielefeld  
 Emma Patchwood, Ph.D., University of Manchester  
 Angeliki Bogosian, Ph.D., City St George's, University of London

Acceptance and Commitment Therapy (ACT) is well established across mental health settings, yet its application within neurological populations remains an emerging field. This symposium presents three innovative studies exploring the feasibility, accessibility, and scalability of ACT-informed interventions for people affected by stroke and Parkinson's disease. Emma Patchwood (Manchester, UK) presents the results of WAterS-2, which evaluated an inclusive, online, group-based ACT programme for stroke survivors, including those with aphasia and from minoritised backgrounds. High engagement and workforce capability gains demonstrated its potential for integration into routine stroke services. Simon Ladwig (Bielefeld, Germany) reports on the adaptation and feasibility of a manualized ACT group protocol for the German healthcare system, tested among stroke and mixed neurological populations. Preliminary findings show strong adherence and acceptance, with differences across groups informing tailored implementation strategies. Angeliki Bogosian (London, UK) introduces PACT, a co-designed digital ACT intervention for people with Parkinson's, showing strong usability and promising effects on depression and committed action. Collectively, these projects demonstrate diverse, scalable approaches to embedding ACT within neurorehabilitation.

- *Making ACT Work after Stroke: Insights from the WAterS-2 Mixed Methods Study Upskilling Diverse UK Workforces to Deliver Inclusive Online Group Support*

Emma Patchwood, University of Manchester  
 Kate Woodward-Nutt, University of Manchester; Northern Care Alliance NHS Foundation Trust  
 Verity Longley, Manchester Metropolitan University  
 Sarah Cotterill, University of Manchester  
 Niki Chouliara, Loughborough University  
 Shirley Thomas, University of Nottingham  
 Ann Bamford, University of Manchester  
 Paul Conroy, Trinity College  
 Research Advisory Panel, Public Contributors across North West England  
 Audrey Bowen, University of Manchester

Stroke survivors commonly experience long-term psychological distress, with particularly high unmet need among people with aphasia (communication difficulty) and those from minoritised ethnic communities. Wellbeing After Stroke-2 (WAterS-2) is an inclusive, online, group-based intervention informed by Acceptance and Commitment Therapy (ACT), adapted for delivery within UK stroke services by a diverse workforce. This paper reports mixed-methods findings from a multi-site feasibility and acceptability study, with a focus on workforce upskilling and ACT-informed practice. Clinical psychologists trained and supervised staff from varied professional and lived-experience backgrounds to deliver a

structured eight-session group programme. Nineteen stroke survivors participated across four NHS sites, over half of whom had aphasia and one-third from minoritised ethnic backgrounds. Retention was high (17(89%) completed the programme), and fidelity to the ACT-informed protocol was good. Qualitative data indicated strong acceptability, highlighting the value of peer connection, experiential exercises, and grounding practices, while also identifying challenges in adapting ACT metaphors for accessibility. Staff reported increased confidence and capability, integrating ACT processes into routine care. Findings inform scalable implementation strategies for inclusive ACT-based stroke rehabilitation.

- *Feasibility of an adapted ACT group intervention for people with neurological conditions: Comparison of a pilot study and ongoing study findings*

Dr Simon Ladwig, University of Bielefeld  
 Franziska-Marie Supe, University of Bielefeld  
 Professor Katja Werheid, University of Bielefeld

People with stroke and other neurological conditions face unmet mental health needs. A manualized Acceptance and Commitment Therapy group protocol was adapted for the German health care system, including adjustments to language and session length.

This paper reports feasibility results from two studies using this adapted manual: a pilot trial with ten stroke survivors and an ongoing trial with mixed neurological conditions (currently n=12, target N=44). Feasibility criteria encompassed drop-out rates, session adherence, homework and outcome measure completion, therapy acceptance, and preliminary effectiveness, evaluated through reliable change indices.

Both studies met predefined thresholds for session adherence ( $\geq 80\%$ ), homework completion ( $\geq 50\%$ ), outcome completion ( $\geq 80\%$ ), and therapy acceptance (mean  $> 2$ , range: 0–4). The pilot study met the drop-out criterion ( $\leq 20\%$ ), while the ongoing study slightly exceeded it (25%). Improvements in psychopathology were more frequent among stroke survivors (7/9) than in the mixed group (4/9), with low changes in psychological flexibility across both.

The findings suggest higher feasibility for stroke-focused groups, while mixed groups may better address health care needs. Reasons for discrepancies between studies are discussed.

- *Developing a Digital Personalised Acceptance and Commitment Therapy Application for People with Parkinson's Disease*

Dr Angeliki Bogosian, City St George's, University of London  
 Riccardo Volpato, University of Glasgow  
 Simone Stumpf, University of Glasgow  
 Sam Norton, King's College London  
 Patricia Cubi-Molla, Office of Health Economics  
 Catherine Hurt, City St George's, University of London  
 Sulayman Chowdhury, Office of Health Economics  
 Niamh Dooley, King's College London  
 Augusto Federico Cattorini, City St George's, University of London  
 Lance McCracken, Uppsala University

People with Parkinson's disease sometimes face mental health problems and can find it difficult to access the help they need. Digital interventions can be a useful option to support mental health. We co-designed, developed and evaluated a self-guided and personalised web-based application, PACT, that delivers Acceptance and Commitment Therapy (ACT) through daily micro-learning content. We conducted four workshops with ten people affected by Parkinson's disease to develop guiding principles, user personas, and app requirements. We obtained user feedback through eight qualitative interviews embedded within a feasibility randomised controlled trial (n=57). The resulting design of our web application met user needs for clarity, motivation, and accessibility. Feasibility trial showed large effects for measures of depression (Hedges  $g = -0.96$ ; 95%CI = -1.47 to, -0.46) and committed action (Hedges  $g = 0.87$ ; 95%CI = 0.38 to 1.35). Our findings highlight effective ways to co-design, implement, and evaluate digital interventions to support mental well-being, that can be readily integrated into the daily lives of people living with Parkinson's disease.

Educational Objectives:

1. Apply adaptations to make ACT-informed group content accessible for delivery by non-experts to stroke survivors.
2. Evaluate and apply key feasibility indicators for ACT-based group interventions.
3. Apply the presented process to develop a functional mental health app.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 13. From Classroom to Career: Building Resilient Learners

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Academics or education, Clinical intervention development or outcomes, Children, School-Based Interventions, High-Adversity Contexts, Trauma, Resilience, Students, Adolescents, School Interventions, Process-Based, ACT, Mindfulness, Stress-Reduction, Professional Wellbeing, MAAQ, Cross Cultural Adaptation, Musicians, Psychological Flexibility, Higher Education, Professional Development, Self-Compassion, Adaptive Coping

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

Chair: Henna Asikainen, Ph.D., University of Helsinki  
 Simone Gorinelli, Ph.D., University of Jyväskylä  
 Lidia Budziszewska, Ph.D., Universidad Europea de Madrid  
 Ella Kämper, M.A., University of Helsinki

From primary school classrooms to professional training programs, students face increasing academic, social, and performance-related demands. These pressures can undermine wellbeing and engagement if educational systems focus solely on academic achievement without cultivating the psychological skills needed to navigate challenge and uncertainty.

This symposium explores how educational settings can foster resilience, adaptive coping, and sustained engagement across the learning journey. Across diverse contexts, research demonstrates how interventions that build psychological flexibility, self-awareness, and value-guided action can enhance students' ability to manage stress, perform under pressure, and maintain wellbeing. By embedding these skills directly into curricula, training programs, and experiential learning, educators can support learners in developing both competence and resilience, equipping them to thrive academically, professionally, and personally.

Using methodologies including randomized trials, quasi-experimental designs, psychometric evaluation, and person-centered analyses, the research highlights how educational systems can serve as proactive environments for cultivating enduring skills that prepare students for the challenges of both school and career. Implications for designing scalable, preventive wellbeing supports within education will be discussed.

- *A person-centred study of an ACT online intervention for pre-service teachers' well-being during teaching practicum*

Ella Kämper, University of Helsinki  
 Kristiina Räihä, University of Helsinki  
 Minna Huotilainen, University of Helsinki  
 Nina Katajavuori, University of Helsinki  
 Veera Lampinen, University of Helsinki  
 Henna Asikainen, University of Helsinki

ACT-interventions have shown benefits for students' and teachers' well-being, yet evidence for pre-service teachers remain unexplored. Given that the transition into teaching and early practicum experiences can be highly stressful, preventive, curriculum-embedded support is needed in teacher education. Research should also clarify how individuals experience such support and how interventions can be adapted to person-specific needs.

This study evaluates a 7-week ACT-based online intervention completed alongside a teaching practicum, aiming to strengthen emotional competencies through psychological flexibility. Outcomes were examined using a mixed-methods, person-specific design (N=16), including pre- and post-measures (well-being, self-compassion and psychological flexibility) and ecological momentary assessment (PBAT; values, presence and self-compassion, life satisfaction, happiness, stress and stress mindset) with daily qualitative reflections.

Changes in ACT processes and well-being outcomes varied across individuals and showed nonlinear temporal patterns. Stress decreased most consistently across participants. Higher daily ACT process levels were generally associated with better same-day well-being, although associations differed between individuals. Qualitative findings contextualized these patterns, highlighting the role of contextual factors and course engagement. Findings inform process-focused insights into ACT-based support during teacher education.

- *From Learning to Practice: Well-being and Competence Among Finnish University Students and Practitioners*

Simone Gorinelli, Ph.D., University of Jyväskylä  
 Essi Sairanen, Ph.D., University of Jyväskylä  
 Stefan G. Hofmann, Ph.D., Philipps-Universität Marburg  
 Joseph Ciarrochi, Ph.D., Australian Catholic University  
 Martti T. Tuomisto, Ph.D., Tampere University  
 Katariina Keinonen, Ph.D., University of Jyväskylä

It is widely recognized that both university students and mental health professional often experience significant psychological stress. As students move to a professional life, the focus is often on developing client-related competencies, while skills that benefit their own well-being do not always receive the same priority. Professional quality of life can entails compassion satisfaction, the rewarding side of helping others, and compassion fatigue, the stress and burnout generated by helping people experiencing distress. In Finland, healthcare professionals experience elevated distress and face challenges in their ability to work. Psychological flexibility can help adapt to difficult and stressful situations, leading to a reduction of these factors on overall well-being. This study examines the relationships between psychological flexibility, professional quality of life, and perceived self-assessed competencies. These variables are observed across three different samples: university students, psychotherapists in training and practicing psychotherapists. Preliminary finding will be presented and discussed. This study is part of PROCEED, a research project focused on developing and validating a novel method for evaluating therapist competence.

- *Cross-Cultural Adaptation and Preliminary Psychometric Evaluation of the MAAQ in Spanish Musicians*

Oscar Belloso Leon, Universidad Europea de Madrid  
 Lidia Budziszewska, Universidad Europea de Madrid  
 Alejandro Garcia Pardina, Universidad Europea de Madrid  
 Alberto Bellido Esteban, Universidad Europea de Madrid

Musicians encounter multiple stressors during training and professional careers, including exams, auditions, solo performances, and the ongoing demands of independent practice. Performance anxiety is a common challenge, and mindfulness- and acceptance-based interventions, such as Acceptance and Commitment Therapy (ACT), aim to enhance psychological flexibility to support coping with these demands. The Multidimensional Acceptance and Action Questionnaire (MAAQ) is a well-established measure of psychological flexibility, but no Spanish version existed. This study evaluated the preliminary psychometric properties of the Spanish adaptation (MAAQ-ES) in a pilot sample of 60 adult musicians. Internal consistency, convergent, divergent, and criterion validity were assessed using measures of general psychological flexibility, performance anxiety, emotional distress, life satisfaction, and perceived performance quality. Results indicated adequate internal consistency ( $\alpha = .751$ ;  $\omega = .762$ ), with higher MAAQ-ES scores (greater inflexibility) associated with higher performance anxiety and lower perceived performance quality. These findings provide preliminary support for the reliability and validity of the MAAQ-ES. Future research should employ larger samples and factor analyses to strengthen its psychometric evaluation.

#### Educational Objectives:

1. Define the core design principles of a curriculum-embedded ACT-based intervention to enhance psychological flexibility in higher education.
2. Describe the urgent and emerging mental health needs of students in the context of examinations and challenging contexts.
3. Analyze how psychological flexibility, professional quality of life, or perceived competencies can inform training needs, supervision focus, and professional development strategies at different stages of therapist development.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### 14. Understanding and Treating Appearance Related Distress: Mechanistic and Applied Perspectives From CBS: Greece & Cyprus Chapter Sponsored

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Original data*

Categories: Health / behavioral medicine, Processes of change, Skin Conditions, Appearance Concerns, Distress, CBS Applications

Target Audience: *Intermediate, Advanced*

**Location: C254**

Discussant: Andrew Thompson, Ph.D., Cardiff University  
 Vasilis S Vasiliou, Ph.D., Royal Holloway, University of London  
 Dafni Kyriakou, M.Sc., University of Cyprus  
 Michelle Wilson, DCLinPsy, Royal Holloway, University of London

Visible skin conditions and appearance concerns can profoundly affect wellbeing, often triggering shame, social anxiety, and heightened self consciousness. Distress stems not only from physical symptoms but also from stigma, internalised appearance ideals, and struggles to live meaningfully amid perceived imperfections. These pressures can restrict behavioural flexibility, highlighting the value of contextual behavioural science (CBS) in targeting mechanisms—such as avoidance, fusion, and inflexible self-evaluations—that maintain appearance-related distress. Dr Vasiliou will present a network analysis examining reciprocal interactions among CBS and conventional coping strategies in addressing stigma and skin-related shame in women’s sexual wellbeing. Dr Wilson will describe a proof-of-concept SCED self-compassion intervention for people with psoriasis. Ms Kyriakou will report on the accuracy in estimating body shape and its associations with psychological flexibility and eating disorder risk. Professor Thompson will synthesise these contributions, demonstrating how CBS can enhance research and clinical practice for those living with appearance concerns.

- *From Skin Shame to Sexual Wellbeing: A Network Analysis of Adaptive Coping in Women with Visible Skin Conditions*

Vasilis S. Vasiliou, Royal Holloway, University of London & Nuffield Department of Orthopaedics, Rheumatology  
 Azizah Ahmed, Royal Holloway, University of London  
 Zoe Hurrell, Cardiff University  
 Fuschia M. Sirois, Durham University  
 Andrew R. Thompson, Cardiff University

Visible skin conditions can significantly affect psychological wellbeing among women, influencing self esteem, social interactions, and sexual activity. Body image concerns and societal pressures—particularly stigma and skin related shame—are key contributors to reduced sexual wellbeing. Understanding how these stressors interact with coping strategies is essential for identifying effective psychosocial interventions. However, traditional distinctions between problem focused and emotion focused coping overlook the context dependent nature of coping responses and their variable adaptiveness. This study used network analysis to examine reciprocal relationships among multiple coping strategies, skin shame, and sexual wellbeing in n=277 women (aged 18–70) with visible skin conditions. Participants completed validated measures of skin shame (SSS), sexual quality of life (SQoL-F), and adaptive coping (Brief COPE and SCS-SF). Self kindness, positive reframing, emotional support, and active coping were associated with higher sexual wellbeing and lower shame, whereas venting and planning were linked to greater shame. Planning and active coping emerged as central network nodes, and positive reframing bridged skin shame with sexual well-being. Findings highlight the importance of interventions that foster cognitive and emotional flexibility, suggesting that personalised coping-focused approaches may enhance sexual wellbeing in psychodermatology settings.

- *Improving Psychosocial Adjustment in Psoriasis Through Online Psychoeducation and Compassion Training: Evidence from a Randomised-Baseline SCED*

Michelle Wilson, Psy.D., Royal Holloway, University of London  
 Rebecca Purewal, DCLinPsy, NHS Trust  
 Amanda C de C Williams, UCL Department of Clinical, Educational and Health Psychology  
 Alexandra Mizara, Royal Free Hospital NHS Foundation Trust)

Psoriasis is a lifelong chronic inflammatory immune condition which can often be highly visible and disfiguring, with mental health comorbidities being high. Stigma is common and can result in feelings of shame and low self-compassion making adjustment to and living with psoriasis difficult. A multiple randomised baseline single case experimental design (SCED) was used to explore the impact of two online interventions: a psychoeducation video followed by a four session guided self-help compassion intervention, focusing on illness perceptions, shame and compassion, in people with psoriasis. Twenty-three participants were recruited, 17 completing the study. For most participants, results from RCI and visual analysis indicated that the psychoeducation intervention was effective in reducing the impact of illness perceptions, and the compassion intervention was effective in decreasing shame. This study provides promising results for the use of online psychological interventions and offers encouragement to

healthcare providers that online formats can be used to increase the accessibility and scalability of psychological interventions in skin conditions.

- *Body Image Distortions, Estimation Accuracy of Own, Others', and Objects' Figure, and Psychological Flexibility.*

Dafni Kyriakou, University of Cyprus

Maria Karekla, University of Cyprus

Rhonda M. Merwin, Department of Psychiatry and Behavioral Sciences, Duke University Medical Center

Yvoni Konstantinidou, University of Cyprus

This study investigated participants' own, others', and an object's shape estimation accuracy, its association with psychological flexibility, and estimation tendencies, based on weight status (under-, average-, overweight) and risk (low, high) for developing an eating disorder (ED). The sample consisted of 124 women, who completed three estimation tasks. Significant positive correlations were found between psychological flexibility and one's own and others' figure estimation accuracy. Significant differences were identified for self-figure estimation between weight groups, but not risk groups, with under- and overweight individuals showing lower accuracy. Significant differences were identified for estimation of others' and an object's figure between risk groups, but not weight categories, with low-risk individuals showing greater accuracy. Estimation tendencies within weight groups, but not risk groups, were observed, with underweight participants overestimating and overweight individuals underestimating their figures. Findings highlight the presentation of perception distortions of individuals based on their weight status and risk of developing an eating disorder. Reduced psychological flexibility might be a key feature of estimation biases, supporting the focus of interventions on perceptual and cognitive distortions.

#### Educational Objectives:

1. Describe key psychosocial mechanisms-such as shame, stigma, experiential avoidance, and inflexible self-evaluation-that contribute to appearance-related distress in people with visible skin conditions.
2. Explain how contextual behavioural science (CBS) strategies (e.g., psychological flexibility processes, compassion, and defusion) are used in empirical studies to address appearance and skin concerns.
3. Evaluate how CBS-informed approaches can be integrated into research and clinical practice to enhance wellbeing among individuals experiencing appearance concerns, using examples from the symposium presentations.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 15. When Being Nice Isn't Enough: Deliberate Practice of Challenging Interventions

**Workshop** • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Supervision and training, Deliberate Practice

*Target Audience: Intermediate*

**Location: C302**

Marcin Domurat, Ph.D., Behavioralnle Psychotherapy School  
Ralf Steinkopff, Dipl.-Psych., Psychotherapeutenkammer Berlin

Interventions involving interruption, confrontation, or stopping unhelpful processes often carry interpersonal and clinical risk, including fears of harming the alliance, creating conflict, client dropout, or therapist uncertainty when approval is not readily available. Because such moments are emotionally costly and rarely trained explicitly, they are commonly avoided, particularly by practitioners who recognize people-pleasing tendencies in their work.

This skills-based workshop offers a structured, low-risk training context using deliberate practice. Participants work with brief clinical moments and rehearse specific micro-interventions, receiving focused feedback on timing and functional impact.

The workshop integrates experiential exercises, reflective dialogue, and tools from theatrical improvisation to create a playful training playground for embodiment and experimenting with unfamiliar behavioral repertoires. By lowering the cost of error, this setting supports tolerance of discomfort while helping participants connect rehearsed responses back to clinical situations.

Participants practice noticing avoidance of interpersonal risk and learn to choose between “pleasant” and “unpleasant” interventions based on function rather than defaulting to lowest-risk responding.

The workshop aims to broaden clinical repertoires and strengthen psychological flexibility in high-impact therapeutic interactions.

Educational Objectives:

1. Assess moments in clinical interactions where avoidance of interpersonal discomfort limits therapeutic effectiveness.
2. Demonstrate brief, directive, or interruptive micro-interventions with increased sensitivity to timing and functional impact.
3. Conduct flexible clinical responding by choosing between "pleasant" and "unpleasant" interventions based on function rather than defaulting to lowest-risk responding.

**CEs Available (1.25):** [CEs for Psychologists](#)

Thursday Afternoon 13:15

### **16. Mastering Creative Hopelessness: From Concept to Compassionate Clinical Skill**

**Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

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

Categories: Processes of change, Clinical intervention development or outcomes, Creative Hopelessness

*Target Audience: Intermediate*

**Location: Merieux**

Rikke Kjelgaard, M.Sc.

Robyn D. Walser, Ph.D., Trauma and Life Consultation and Psychological Services

Creative Hopelessness is one of the most powerful processes in ACT. While many clinicians understand the concept, staying with the lived experience of Creative Hopelessness in the therapy room can be surprisingly difficult. When clients reach the limits of familiar problem-solving, urgency often emerges, and therapists may feel pulled to reassure, direct, or “help” in ways that subtly restore control rather than allow genuine contact with unworkability. In this experiential workshop, participants are invited to deepen their capacity to engage Creative Hopelessness as a compassionate, embodied clinical skill rather than a conceptual intervention. We'll explore why this process is so challenging for both clients and therapists, and how well-intended qualities such as competence, responsiveness, and care can inadvertently interfere when discomfort with not knowing takes the lead. Through demonstrations and experiential exercises, participants will practice noticing and staying with the urge to fix, while learning to recognize the subtle shifts that reflect contact with the limits of control and the opening that follows. The emphasis is on presence, timing, and trust in the process itself.

Educational Objectives:

1. Describe why Creative Hopelessness is clinically challenging and identify common therapist responses that unintentionally pull the work back into problem-solving or control.
2. Demonstrate how to stay present as the urge to fix arises, engaging Creative Hopelessness as a compassionate clinical skill rather than a control strategy.
3. Demonstrate how to respond in ways that allow the unworkability of the control agenda to be explored and create space for what may emerge next.

**CEs Available (1.50):** [CEs for Psychologists](#)

### **17. Advancing Personalised Care in Chronic Health Conditions: Idiomonic Process-based Clinical Research Applications**

**Symposium** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Original data*

Categories: Health / behavioral medicine, Processes of change, PBT, Idionomic Analyses, Personalised Changes, Chronic Health Conditions

Target Audience: *Intermediate, Advanced*

**Location: Gounot**

Chair: Vasilis S. Vasiliou, Ph.D., Royal Holloway, University of London

Rhonda Merwin, Ph.D., Duke University

Lance M. McCracken, Ph.D., Uppsala University; Centre for Biomedical Research in Epidemiology and Public Health (CIBERESP)

Psychological interventions for chronic health conditions have strong evidence of benefit, yet progress has stalled. High heterogeneity in how conditions affect individuals, reliance on preset treatment packages, and inconsistent findings on mediators and moderators continue to limit our ability to determine what works for whom and why. Advancing this requires shifting from nomothetic, protocol-driven models toward idiographic and process-based approaches that prioritise within-person mechanisms of change. These approaches depend on ongoing, context-sensitive assessment to dynamically guide intervention decisions. This symposium presents three empirical studies applying idiographic methods in chronic health contexts. Dr Vasiliou reports a process-based proof-of-concept study using a non-concurrent single-case design (n=5) with high-frequency EMA in a paediatric headache intervention. Prof. Merwin presents idionomic analyses identifying person-specific, pre-meal predictors of insulin restriction in an EMA study of 83 individuals with Type 1 diabetes. Prof. McCracken shares findings from an ACT mobile app intervention for chronic pain, examining intra- and inter-individual relations between processes and outcomes. Finally, Prof. McCracken will discuss future directions of Process-Based Therapy, emphasising the importance of context, treatment utility, and personalisation.

- *From Personalisation to Processes: A Single Case Experimental Design (SCED) Evaluation of PBT for Adolescents with Recurrent Headaches*

Anastasiia Calladine, Royal Holloway, University of London

Vasilis S. Vasiliou, Royal Holloway, University of London, UK & NDORMS, University of Oxford

Rhonda Merwin, Duke Department of Psychiatry & Behavioral Sciences

Clarissa W. Ong, University of Louisville

Cristobal Hernandez, Universidad de los Andes

Standardised psychological interventions for paediatric headaches have been developed from trials that treat young people as relatively homogenous groups, producing only small to moderate effects and limited applicability to real-world care. In practice, adolescents present with substantial heterogeneity, including comorbid mental and physical health conditions, sex and age differences, varied pain profiles, and sensory sensitivities, while therapist protocol drift is common. Process-Based Therapy (PBT) offers a principled framework for personalising care by targeting person-specific mechanisms of change. We tested the feasibility and preliminary proof of concept efficacy of a brief personalised PBT intervention using a single case experimental design supported by daily ecological momentary assessment (EMA). Five adolescents completed a 1–2 week baseline, five 30-minute online sessions, and a 1–2 week follow-up. EMA informed case conceptualisation and intervention selection, while weekly scales tracked headache interference and disability. Visual analysis, Tau U, and person-level time series models showed four participants progressing toward personalised goals, with shifts in targeted processes. Network structures tended to simplify over time, and three participants showed reduced pain interference. Findings suggest personalised PBT is feasible, though longer formats may be needed for broader impact.

- *Person-specific Pre-meal Predictors of Insulin Restriction Among Adults with Type 1 Diabetes: An Idionomic Analysis*

Rhonda M. Merwin, Ph.D., Duke University School of Medicine

Ashley Moskovich, Duke University School of Medicine

Max Roberts, Duke University School of Medicine

William Li, Australian Catholic University, Institute for Positive Psychology and Education

Baljinder K. Sahdra, Australian Catholic University, Institute for Positive Psychology and Education

Type 1 diabetes (T1D) is a chronic illness that requires close monitoring of blood glucose and administering insulin multiple times a day. Insulin restriction (intentionally taking less insulin than is prescribed) is associated with early and severe diabetes complications and premature death. This behaviour is common in eating disorders, and as we previously reported, using multi-level modelling is associated with momentary increases in anxiety and guilt/shame and the experience of breaking a food rule or losing control over eating (Merwin et al., 2015). The current study is a secondary idionomic

analysis of Merwin et al. (N=383 adults with T1D). Our primary aim is to identify person-specific, pre-meal predictors of insulin restriction at the upcoming meal using a tiered idiographic feature selection approach (tsBoruta or iBoruta) and summarise group-level patterns across individuals. We expect individuals to show unique subsets of important pre-meal predictors of insulin restriction, reflecting significant heterogeneity in within-person pre-meal predictors, as well as potential common predictors reflective of group-based effects. We will compare results with Merwin et al. and consider implications for treatment planning.

- *Outcome and Process in Brief Digital Acceptance and Commitment Therapy for Chronic Pain: A Single-Case Series*

Lin Yu, Middlesex University

Kitty Kioskli, Trustilio, B.V.

Miznah Al-Abbadey, Hampshire and Isle of Wight Healthcare NHS Foundation Trust

Felicia Sundström, Uppsala University

Lance M. McCracken, Uppsala University, and Centre for Biomedical Research in Epidemiology and Public Health (CIBERESP)

Acceptance and Commitment Therapy (ACT) helps people with chronic pain. However, we need to improve outcomes, and better understand processes of change underlying treatment results. This study examines outcome, and relations between treatment process and outcomes, in people with chronic pain from ACT delivered via a mobile app. Participants were recruited from social media and relevant websites. A multiple-baseline single case design was used. Treatment included short, pre-recorded, audio instructions and three brief therapist contacts during five weeks. Five participants (a) completed the treatment; (b) provided twice daily data on pain, psychological flexibility (PF), disability, and depression; and (c) completed full-length measures before and after treatment. Overall, participants showed considerable intra- and inter-person variability in changes in processes and outcomes. Three participants had reduced disability, three for depression, and three improved in PF. There were generally significant concurrent association between PF and outcomes. The most remarkable feature of the data here is the considerable individual variability in responses to treatments. Future research should address personalization of treatment and, look for subgroups in patterns of responding.

Educational Objectives:

1. Describe the limitations of traditional nomothetic, protocol-driven psychological interventions for chronic health conditions and explain why idiographic, process-based approaches offer advantages for personalised care.
2. Analyze empirical examples of idiographic methods-including single-case experimental designs, ecological momentary assessment (EMA), and idionomic modelling-and identify how these approaches reveal person-specific mechanisms of change.
3. Evaluate how findings from the three presented studies can inform the design and clinical application of Process-Based Therapy (PBT), with attention to context, treatment utility, and personalised client goals.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

**18. Stop Averaging Us Away: When Neurodivergent “Noise” Is the Signal**

**Panel** • 13:15 - 14:45

Translation: Not available

Components:

Categories: Methods/approaches for individual variation, Social justice / equity / diversity, Neurodivergence

Target Audience: *Intermediate*

**Location: Barrot**

Chair: Lauren Lawson, Ph.D., La Trobe University

Sarah Cassidy, Ph.D., Psychological Society of Ireland/Smithsfield Clinic

Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin

Michael Swadling, MPsych, RMIT University

Michael Levin, Ph.D., Utah State University

Psychological science often treats variability as a problem to be controlled - something to smooth out in the pursuit of clean results and generalisable conclusions. Yet in clinical work, and in

neurodivergent lives, this so-called “noise” is often where meaning resides. This panel will explore what gets lost when science privileges averages over individuals. Using neurodivergence as a central example, panellists will reflect on how standard research practices can obscure important differences in psychological processes, pathways to distress, and routes to wellbeing, and how these assumptions play out in real-world care. The panel brings together complementary expertise across research, clinical practice and supervision, and lived experience leadership. The panel will discuss tensions between rigour and relevance, standardisation and personalisation, and research priorities and lived realities. Drawing on process-based and contextual behavioural perspectives, panellists will consider how we might design science and practice that work with heterogeneity rather than against it, and what becomes possible when difference is treated as signal, not error.

Educational Objectives:

1. Describe how reliance on group averages and standardised designs can obscure meaningful heterogeneity, particularly in neurodivergent populations, and identify the implications for psychological theory and intervention development.
2. Critically evaluate what "rigour" means in heterogeneous clinical populations, including how research methods, measurement choices, and analytic approaches may inadvertently erase clinically relevant process variation.
3. Identify practical ways process-based and contextual behavioural approaches can be used to work with heterogeneity, including implications for formulation, personalised intervention planning, and future research design.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

## 19. Applications of CBS in Education

**Symposium** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Original data*

Categories: Academics or education, Clinical intervention development or outcomes, Young People

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Mouterde**

Chair: Duncan Gillard, D.Ed.Psy, Enable Trust

Discussant: Louise Hayes, Ph.D., LaTrobe University

Nic Hooper, Ph.D., Connect Curriculum

Paul WB Atkins, Ph.D., ProSocial World

Owen Cogan, DEdPsy, Enable Inclusion Trust

This symposium presents three complementary studies examining psychological flexibility interventions across educational contexts and cultures. The first paper reports quantitative outcomes of a DNAV intervention for young people at risk of school exclusion, evaluating changes in engagement, wellbeing, and behavioural indicators. The second paper explores children’s lived experiences of the Connect Curriculum through qualitative interviews, highlighting how the curriculum shape belonging, voice, and wellbeing. The third paper offers an idiographic analysis of a psychological flexibility programme delivered in a Mexican university, tracing individual change processes and contextual influences. Together, the papers integrate quantitative, qualitative and cutting edge idiomonic analysis methodologies to assess applications of acceptance-based approaches in education. Cross-paper dialogue will consider implications for theory, practice, and policy, emphasising prevention, inclusion, and student agency across systems. Discussion, led by Louise Hayes, will synthesise findings and identify future directions for research and implementation. The symposium aims to foster interdisciplinary collaboration, critical reflection, and practical strategies for scaling flexible interventions that support diverse learners in complex educational environments worldwide. Extending impact beyond academia.

- *Supporting Young People either at Risk of School Exclusion or Experiencing Emotionally Based School Avoidance through DNA-V, ACT and Allied Models.*  
Owen Cogan, DEdPsc, Enable Inclusion Trust

Permanent school exclusion (expulsion) and emotional-based school avoidance (EBSA) represent escalating crises in UK education, with profound long-term consequences including links to criminality, mental health difficulties, and social isolation. This paper presents outcomes from the Enable Inclusion Team (EIT), an innovative Educational Psychology service applying DNA-V, Acceptance and Commitment Therapy (ACT) and allied models to support young people at risk of exclusion or experiencing EBSA. Operating through a holistic, contextual approach, EIT delivers direct therapeutic work with young people, alongside coaching for parents and school staff to build psychological flexibility skills and modify behavioural contingencies in play at school and at home.

Updated service-level data will be presented demonstrating substantial impact across both populations. For young people at exclusion risk, findings show improvements in school attendance with a reduction in permanent and short-term exclusions during intervention periods. For EBSA cases, data reveals marked increases in school engagement and attendance alongside improvements in emotional wellbeing and reductions in behavioural difficulties. These outcomes provide compelling evidence for psychological flexibility approaches in education, offering a promising alternative to traditional interventions.

- *Young Learners Experiences of the Connect Curriculum*  
Nic Hooper, Ph.D., Connect Curriculum

This qualitative study explored primary school students' experiences of the Connect Curriculum, a weekly teacher-delivered DNAV-based psychological flexibility programme for children aged 4–11. Semi-structured interviews were conducted with pupils across year groups to understand how they made sense of the curriculum and whether they applied its ideas in daily school life. Data were analysed using reflexive thematic analysis. Findings indicated that children readily understood the shared language of the programme and could describe using it to navigate emotions, relationships, and challenges. Participants reported that the curriculum supported their wellbeing, helped them act in ways consistent with personal values, and strengthened their sense of belonging within the wider school culture. Children described increased awareness of choices, kindness toward themselves and others, and confidence in managing difficult thoughts and feelings. The study highlights the accessibility of psychological flexibility concepts in early education and underscores the value of embedding preventative wellbeing practices within everyday classroom teaching.

- *The Individual Within the Group: Idionomic Analysis of Prosocial Development Across a University-Community Partnership*  
Beth Hawkins, ProSocial World  
Paul Atkins, ProSocial World  
Robert Styles, ProSocial World  
David Sloan Wilson, ProSocial World

This study examines "INSPIRE: Compassion in Action," a 10-week participatory action research program integrating principles of prosocial governance, psychological flexibility training, and contemplative practices within a Mexican university-community partnership. University students (n=26) co-designed action learning projects with community members (n=11), enabling bidirectional knowledge transfer across educational, cultural, and socioeconomic boundaries. Using intensive longitudinal measurement (mean 27 daily observations per participant), idionomic analysis addressed the ergodicity problem by characterizing individual trajectories rather than relying on aggregate effects. Five of six psychological flexibility processes showed significant pre-post improvement with large effect sizes. Idionomic meta-analysis revealed contrasting universality profiles: the self-intolerance ↔ other-intolerance linkage was the only truly universal within-person effect (100% positive,  $I^2=23\%$ ), while self-compassion ↔ other-compassion linkage was near-universal but heterogeneous (85% positive,  $I^2=72\%$ ). To our knowledge, this daily within-person intolerance covariation has not been previously demonstrated despite theoretical predictions from threat-system models (Gilbert, 2014; Blatt et al., 1976). Mixed-methods case profiles demonstrated that multi-construct idionomic analysis reveals what single-outcome assessment obscures (Sahdra et al., 2024; Molenaar, 2004).

Educational Objectives:

1. Identify how person-specific analysis (idionomic) reveals individual response patterns that aggregate statistics obscure.
2. Apply DNA-V, ACT, and behavioral psychology principles in a multi-systemic approach with young people, families, and school systems to facilitate productive educational re-engagement.
3. Assess and apply preventative psychological flexibility strategies for younger children.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**20. The Relational Matrix – A Relationship Journey Through the Four Quadrants: Poland Chapter Sponsored**

**Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, Processes of change, Couples Therapy

Target Audience: *Intermediate, Advanced*

**Location: Weil**

Lidia N Baran, Ph.D., University of Silesia in Katowice

A meta-analysis of existing research indicates that ACT therapy is as effective as other established approaches for addressing couples' difficulties (Barraca et al., 2025). It employs numerous experiential practices designed to distinguish between inflexible and flexible functioning in the relationship (Lev & McKay, 2017). One available technique for working with couples is the relational matrix, whose experiential use—with an element of bodywork—can lead to drawing attention not only to thoughts associated with each quadrant of the matrix but also to bodily sensations. Focusing on these sensations lays the foundation and can facilitate the processing of mental content that impacts couple functioning (Wagner & Hurst, 2018). The workshop aims to present an experiential matrix focused on a close relationship, within which participants will move between its four parts: 1) values and needs in a close relationship, 2) values-based actions /meeting needs in a close relationship, 3) difficult experiences and vulnerabilities in a close relationship, and 4) actions that realize pseudo-values and move one away from meeting needs in a close relationship.

Educational Objectives:

1. Describe how to incorporate bodywork into matrix quadrants for couples.
2. Demonstrate ways to navigate the matrix for couples, with a focus on bodily sensations.
3. Design an experiential matrix with elements of bodywork focused on specific behavioral functions.

**CEs Available (1.50):** [CEs for Psychologists](#)

**21. FAP: Creating Intense and Curative Therapeutic Relationships**

**Workshop** • 13:15 - 16:30

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, Processes of change, FAP

Target Audience: *Beginner, Intermediate*

**Location: Aristotle**

Mavis Tsai, Ph.D., University of Washington; ACL Global Project

Chauncey R. Parker IV, Ph.D., University of Washington

Tien Kuei, M.Sc., Power To Live Foundation

Ralf Steinkopff, Dipl.-Psych., Psychotherapeutenkammer Berlin

Eugen Secară, MCOgSc, MCLinPsych, Babeş-Bolyai University

Increase the emotional intensity, interpersonal focus and impact of your treatment. Functional Analytic Psychotherapy (FAP) uses functional analysis to create deep, meaningful and healing therapeutic relationships. By focusing on the subtle ways clients' daily life problems occur in the context of therapy and by augmenting the therapist repertoires identified as awareness, courage and love (behaviorally defined) in responding contingently to emotional and interpersonal target behaviors, clients are helped to resolve presenting symptoms and to delve into their purpose and passion for living. FAP calls for therapeutic stances and techniques that no single orientation would predict, and provides a conceptual and practical framework that concretely builds skills to help practitioners reach their highest aspirations. A model also will be presented for how to disseminate FAP more broadly by going beyond the therapy office and creating a community and sense of belonging for individuals who want to connect more open-heartedly and support one another in rising to live more true to themselves.

Educational Objectives:

1. Apply the rules of FAP in a variety of experiential exercises in order to increase intensity, connection and impact in your clinical work.
2. Identify your own therapist avoidance repertoires, and gain a more functionally precise understanding of the contexts in which commonly used interventions may be inadvertently counter-therapeutic.
3. Implement the FAP principles of Awareness, Courage and Love beyond the therapy room to impact greater change in your community.

**CEs Available (2.75):** CEs for Psychologists BCBA CEUs

**22. Who Accepts, Who Acts? Self-Processes in ACT for Suicidality and Borderline Personality Disorder**

**Invited** • 13:15 - 14:45

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Clinical intervention development or outcomes, Processes of change, Suicidality, Borderline Personality Disorder, Self-as-Context

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Perroux**

Déborah Ducasse, M.D., CHU Montpellier



People with borderline personality disorder (BPD) – which can be understood as a form of relational addiction – typically describe three interwoven forms of suffering: overwhelming emotional pain, a pervasive lack of meaningful, internally generated motivation, and a profound feeling of shame and disconnection. Suicidal ideation and behaviour can then emerge as functional attempts to escape these inner experiences. Acceptance and Commitment Therapy (ACT) offers a powerful process-based framework for working with these difficulties, but clinical practice raises a crucial question: who is the “self” that is asked to accept and to act? In this

keynote, we will explore suicidality, both in general and as it manifests in BPD, through three psychological mechanisms—experiential avoidance, externally driven motivation, and self-evaluation based on social worth—each linked to a vulnerable, insecure sense of self. Drawing on an optimized use of the ACT Matrix, a deepened role for self-as-context, and recent advances in relational frame theory, I will show how a refined, self-process-focused delivery of ACT may transform suicidal trajectories more broadly, and those observed in BPD in particular.

Educational Objectives:

1. Describe three core dimensions of suicidal suffering and illustrate how they appear in suicidality generally and in their amplified form in borderline personality disorder.
2. Explain how each dimension is rooted in specific vulnerabilities in self-representation: lack of inner safety, lack of inner satisfaction, and lack of inner social worth.
3. Apply an ACT Matrix and self-as-context-focused case formulation to identify opposite therapeutic processes that can transform suicidal trajectories, particularly in borderline presentations.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**23. Contextual Functional Analysis: Functional Analysis More Adequate to the Challenge of Human Condition**

**Workshop** • 13:15 - 14:45

Translation: Not available

Components: *Conceptual analysis, Experiential exercises, Literature review, Strategic planning*

Categories: RFT / RGB / language, Functional Analysis

Target Audience: *Intermediate, Advanced*

**Location: Aubert**

Bartosz Kleszcz, M.A., Szkoła Psychoterapii Behavioralnie

CBS seeks a progressive science of human behavior, including language and cognition. Relational Frame Theory treats arbitrarily applicable relational responding as operant behavior, yet its integration with functional analysis remains incomplete. In clinical practice, the three-term contingency (ABC) still dominates, despite often missing how relational framing changes the behavioral stream in verbally sophisticated clients.

This workshop introduces Contextual Functional Analysis (CFA), a practical extension of ABC that integrates key RFT developments while staying usable in-session. CFA strengthens prediction and influence by specifying how relational networks shape what events mean and what consequences do.

After a theoretical overview, participants will practice on short vignettes to (1) map an ABC episode, (2) identify likely relational networks, and (3) build a case conceptualization that specifies what new meanings may be derived in interaction and through which consequences. For each vignette, participants will generate and contrast helpful versus unhelpful therapist responses—responses that promote flexible, workable relating or inadvertently strengthen rigid, problem-maintaining networks.

Educational Objectives:

1. Apply CFA to verbally-relevant client situations.
2. Analyze a case to define probable consequences and deriving for a client-therapist interaction
3. Analyze a client's ABC patterns to predict probable relational networks.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

#### **24. Close Isn't Good Enough: Precision Matching Your Metaphors to Hexaflex Targets: Sport, Health, and Human Performance SIG Sponsored**

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Methods/approaches for individual variation, ACT Function-Matched Intervention

*Target Audience: Intermediate*

**Location: Maldiney**

Thomas G Szabo, Ph.D., McNeese State University

Erica Jowett Hirst, Ph.D., Curis Functional Health

ACT practitioners often create distinctive interventions that fit the unique individual seated in front of them (Borges et al., 2022). This individuated approach is a hallmark of the functional analytic enterprise in CBS. Some practitioners have difficulty creating client-centered metaphors and exercises (Manuge et al., 2024). Others catch their clients' metaphors in flight and create interesting exercises but fail to match these to the Hexaflex processes that showed up in their functional assessment (Tarbox et al., 2022). In this workshop, participants will practice assessing ACT processes in session, listening for client metaphors, and shaping these into crisp, provocative interventions that are matched to Hexaflex processes identified in the functional assessment. Participants will also practice creating exercises to meet the needs of clients who do not seem to readily speak in metaphors will be addressed.

Educational Objectives:

1. Identify ACT processes during dyad interactions.
2. Identify, shape, and build new metaphors with clients
3. Construct metaphor-based interventions directly linked to ACT targets identified during assessment.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

#### **25. Clinically Addressing Emotional Dysregulation in Adolescents in Times of Global Polycrisis from ACT and DBT**

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Social justice / equity / diversity, Adolescence, Emotional Dysregulation, Global Polycrisis

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C125**

Carolina Principi, Licenciada en Psicología, Fundacion Foro

Bárbara Camila Silva, Licenciada en Psicología, Private Practice

Verónica Piorno, M.A., National University of Mar del Plata and private practice

In the context of the increase in adolescent mental health consultations observed in recent years, a significant proportion involves difficulties related to emotional dysregulation and the impulsive behaviors. This occurs within a broader macro-context of global polycrisis, characterized by climate change and natural disasters, armed conflicts, and socio-political and economic crises.

To address these challenges in adolescence, contextual behavioral therapies—and particularly Acceptance and Commitment Therapy (ACT) and Dialectical Behavior Therapy (DBT)—offer effective conceptual frameworks and therapeutic strategies. While DBT is grounded in a skills-deficit model, ACT emphasizes psychological inflexibility and experiential avoidance as central processes.

For many clinicians trained in both models, attempts at integration may appear to enhance the benefits of each approach. However, such integration should not occur without a thorough analysis of its theoretical coherence and practical utility, including clinical outcomes.

This workshop will examine the treatment of emotional dysregulation and impulsivity in adolescence from both ACT and DBT perspectives, highlighting commonalities and differences, as well as potential advantages and challenges involved in integrating these two approaches.

Educational Objectives:

1. Identify and analyze the impact of the global polycrisis on adolescent mental health, particularly among youth presenting with severe emotional dysregulation difficulties.
2. Discuss and critically examine the theoretical foundations of ACT and DBT, and assess the potential benefits and challenges of integrating these two therapeutic models in clinical practice with this population
3. Apply a functional contextual framework to conceptualize and analyze clinical interventions implemented with adolescents experiencing emotional dysregulation and impulsivity, in order to provide coherent and contextually grounded behavioral treatments

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

## **26. Maps for Difficult Journeys: ACT and Non-Conventional Interventions Across Loss, Institutions, and Creativity: Italy Chapter Sponsored**

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Case presentation, Experiential exercises, Original data*

Categories: Health / behavioral medicine, Clinical intervention development or outcomes, Grief, Health, Chronic pain, Disability, Virtual reality, Music

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C154**

Chair: Giovambattista Presti, Ph.D., University of Enna Kore

Discussant: Giovanni Miselli, Ph.D., Psy.D. BCBA Peer Rev ACT Trainer, Fondazione Sospiro, AMICO-DI

Giuseppe Deledda, Psy.D., ACT-Italia

Laura Casetta, Psy.D., Scuola Di Psicoterapia Musicart

Simone Napolitano, Psy.D., Qui e ora- centro per il benessere psicologico; Act-Italia

Anna Bianca Prevedini, Ph.D., Centro Interazioni Umane

Nicola Lo Savio, Psy.D., Istituto Tolman, ACT-Italia, CBT-Italia

This symposium explores how Acceptance and Commitment Therapy (ACT) can be applied—and creatively adapted—in complex health-related contexts, including cancer adjustment, chronic pain,

bereavement, and support for people living with disability. Across these settings, distress is often intensified by uncertainty, ongoing symptoms, and profound changes in identity and life direction.

A key theme of the symposium is responsiveness: adapting ACT to the uniqueness of each person and context without losing its core principles. Speakers will illustrate how creative tools—such as virtual reality experiences, music-based interventions, and narrative meaning-making—can support perspective-taking, emotional regulation, and values-based action. By integrating these modalities, we aim to enhance engagement, strengthen psychological flexibility, and open new routes toward living with greater vitality even in the presence of pain, loss, or limitation.

Overall, the symposium focuses on helping people recover flexibility, widen perspective, and return to their own center, fostering compassionate, workable ways forward in the midst of complex health challenges.

- *ACT Applied with Virtual Reality (VR) for Cancer Patients with Fears Related to the Disease Context*

Giuseppe Deledda, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Sara Poli, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Isabella Gravina, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Giovanna Fantoni, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Eleonora Geccherle, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia

Daniele Lombardo, Behaviour Labs srl, Catania, Italy

Marco Lombardo, Behaviour Labs srl, Catania, Italy

Filippo Alongi, IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella

Stefania Gori, IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella

Giovambattista Presti, Ph.D., Kore University of Enna; ACT-Italia

This study explores the feasibility of using Acceptance and Commitment Therapy (ACT) process exercises supported by Virtual Reality (VR) with cancer patients who experience fear and worry related to their illness. The aim is to understand whether VR can make ACT techniques easier to engage with and more effective when patients are dealing with intrusive, threatening thoughts about the disease.

An experimental multiple-baseline design across participants was used, allowing us to track each individual's responses across both control and intervention phases. Before and after the intervention, participants completed a set of self-report measures, including the MPFI, VAS, the Target Thought Negative Scale, and the DASS-21.

Nine patients took part in the study (mean age = 52.2 years). Ratings collected on the Visual Analogue Scale before and after the training suggested a decrease in how credible the worrying thought felt, and in several cases participants also reported reduced discomfort associated with that thought. Overall, the protocol was described as manageable and sustainable. Participants also highlighted VR as a valuable support in "objectifying" intrusive thoughts—making them feel more separate and observable—which in turn helped them relate to these thoughts more effectively.

These preliminary findings introduce an innovative methodology that will be integrated into a broader ACT protocol, with the goal of enhancing the quality of care and strengthening the interventions available to patients.

- *Transforming the Meaning of Pain: An Integrated Process-Based Model of Grief through RFT and ACT*

Giuseppe Deledda, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Simone Napolitano, Psy.D., Qui e Ora, Centro per il benessere psicologico; ACT-Italia

Loss and grief are universal experiences that may develop into clinically significant suffering when associated with psychological rigidity and intolerance of uncertainty. Evidence suggests that psychological inflexibility mediates the relationship between uncertainty and psychopathology, including prolonged grief, PTSD, and depression. Within a Process-Based framework, pain is understood not merely as a traumatic event, but as an ongoing linguistic process of meaning-making.

Relational Frame Theory (RFT) highlights how language transforms the function of experience.

Through derived relational networks (coordination, opposition, causality, hierarchy, deixis), memories and symbolic cues can evoke intense emotional responses even in the absence of the deceased person. When these relational networks become rigid and fused with the sense of self, behavior narrows into avoidance and existential paralysis.

Acceptance and Commitment Therapy (ACT) promotes psychological flexibility through acceptance, cognitive defusion, deictic perspective-taking, and values-based action, fostering a functional transformation of pain rather than its elimination. Clinical creativity involves applying process-based principles to the individual's unique history, generating more flexible meanings aligned with what truly matters.

- *Listening for Flexibility: Music-Informed ACT to Support Mindfulness and Values in Fibromyalgia*  
 Laura Casetta, Psy.D., MusicArt School of Psychotherapy, Ass. Centro di Psicologia e Psicoterapia Funzionale, Padova, Compassionate Mind Italia, ACT-Italia  
 Michele Bargigia, Psy.D., Sony Music e Warner Music Italy, Ass. Centro di Psicologia e Psicoterapia Funzionale, Padova, ACT-Italia  
 Luca Rizzi, Psy.D., MusicArt School of Psychotherapy, Ass. Centro di Psicologia e Psicoterapia Funzionale, Padova, FIAP, ACT-Italia

This symposium contribution describes an eight-session online intervention integrating Acceptance and Commitment Therapy (ACT) with music-based experiential exercises for people living with fibromyalgia. Fibromyalgia is often accompanied by prolonged medical and social invalidation, with many patients feeling dismissed or labelled as "mentally ill." This context can intensify anger, shame, and self-criticism, sometimes more than in other chronic pain conditions. We developed an ACT protocol in which we carefully selected music serves as a supportive "container" for mindfulness and values work. Music is used to facilitate centering, reduce arousal, and allow gentler contact with bodily experience. Pieces designed to evoke emotions such as nostalgia, gratitude, awe, hope, and compassion help participants broaden perspective, loosen struggle with pain-related thoughts and feelings, and reconnect with personally meaningful directions. Preliminary observations suggest increased psychological flexibility, reduced self-criticism, and higher frequency of positive emotions, supporting the potential scalability of online, music-informed ACT for fibromyalgia.

- *Psyflex at Work Program. Application of an In-Person and/or Online Protocol to Promote Flexibility and Psychological Well-Being in Workers: an Open-Label Study*  
 Anna Prevedini, Ph.D., Centro Interazioni Umane, Istituto Europeo per lo Studio del Comportamento Umano (IESCUM); CBT-Italia  
 Alice Barbieri, Psy.D., Centro Interazioni Umane; Sigmund Freud University  
 Francesco Dell'Orco, Psy.D., Centro Interazioni Umane, Istituto Europeo per lo Studio del Comportamento Umano (IESCUM)  
 Barbara Forresi, Psy.D., Sigmund Freud University  
 Annalisa Oppo, Istituto Europeo per lo Studio del Comportamento Umano (IESCUM); Sigmund Freud University

ACT-trainings at work generally aim to reduce work-related stress by fostering psychological flexibility. To date, there are no empirical studies on this topic conducted in Italy. The present open-label pilot study aims to longitudinally evaluate the effects of an ACT-training on outcome and process measures in Direct Support Staff (DSS).

Four groups of DSS participated in a three-session ACT-training based on Flaxman, Bond, and Livheim (2012). Burnout, well-being, and functional impairment were assessed as outcome measures, while psychological inflexibility, cognitive fusion, mindfulness skills, and values were assessed as process measures. Data were collected at baseline, during the intervention (after the second and third sessions), and at a four-week follow-up. Preliminary results suggest a decrease in functional impairment over time, alongside improvements in ACT-related process variables. Differences in patterns of change across groups were also observed and will be further discussed. Overall, these preliminary findings are consistent with previous studies and suggest the potential applicability of ACT-based trainings in occupational settings. Theoretical and practical implications will be discussed.

- *Seeing Me, Seeing You: Interpersonal Use of the ACT Matrix. Working with an Adolescent Sibling of an Autistic Person*  
 Nicola Lo Savio, Psy.D., Istituto Tolman, Palermo, ACT-Italia, CBT-Italia

ACT and FAP generate conceptualization from the shared observation of what emerges in the context of the interaction between patient and therapist, through a functional analysis of moment-to-moment processes. Each interaction represents an opportunity to discriminate CRB1s and recognize them as adaptation peaks activated within the relational context. When the therapist is overwhelmed by intense emotions or becomes trapped by language, it can be complex to respond in an aware and intentional manner, using one's internal experience for therapeutic purposes. The interpersonal use of the ACT Matrix represents a guide for cultivating the therapist's attunement to their own experiences and making disclosures that promote tracking and context sensitivity in the patient. Through the presentation of a clinical case involving an adolescent sibling of a person with autism, this contribution aims to offer a framework for sharing the therapist's experiences in clinical practice, positioning the ACT Matrix as a therapeutic tool that operates through the therapeutic relationship.

Educational Objectives:

1. Describe how core ACT processes (e.g., acceptance, defusion, values, committed action, perspective-taking) can be applied in complex health contexts, including cancer adjustment, chronic pain, bereavement, and disability support.
2. Design context-sensitive ACT process exercises that integrate a creative modality (virtual reality, music-based methods, or narrative meaning-making) to increase engagement and support values contact.
3. Apply at least ACT-consistent strategies to help clients restore psychological flexibility and perspective while tailoring interventions to individual needs and real-world constraints.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

## 27. New Perspectives on Anxiety in ACT and Process-Based Therapy

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Conceptual analysis, Didactic presentation, Literature review, Original data, Strategic planning*

Categories: Health / behavioral medicine, Processes of change, Dissemination, PBT, Experiential Acceptance, Anxiety, OCD, ACT, Stress Management, Digital Engagement

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

Chair: John P Forsyth, Ph.D., University at Albany, SUNY  
 Bogdan Tudor Tulbure, Ph.D., West University of Timisoara  
 Julie Ribeyron, Ph.D., University Paris 8  
 Rizval Fernandes, M.Sc., Christ University  
 Mehmet Emrah Karadere, M.D. Assoc. Prof, Istanbul Medeniyet University  
 Beyza Baran Boz, Dr., İstanbul Medeniyet Üniversitesi  
 Meiqi Xin, Ph.D., The Hong Kong Polytechnic University

Anxiety can trap individuals in cycles of fear, rumination, and avoidance. Thankfully, emerging innovations show a path forward. Process-based therapy and ACT interventions teach how to step into discomfort with curiosity, flexibility, and value-driven action. Evidence from qualitative studies, in-person and digital interventions, and physiological research illuminates the mechanisms that make these approaches effective across populations. Attendees will explore how acceptance, self-compassion, and adaptive engagement transform internal turmoil into resilience, equipping them with actionable strategies for modern anxiety care.

- *Measurement-Based Kernel Sequencing in Process-Based Therapy for Anxiety and Depression: A Feasibility Open Trial: Romania Chapter Sponsored*

Bogdan Tudor Tulbure, West University of Timișoara  
 Galina Pravitchi, State University of Moldova  
 Iulia Crișan, West University of Timișoara  
 Olga Bondarenco, State University of Moldova  
 Ștefan Marian, West University of Timișoara  
 Dan Andoni, State University of Moldova  
 Isabela Șimon, West University of Timișoara  
 Agnesa Gorosevschi, State University of Moldova  
 Miruna Mădălina Sarbu, West University of Timișoara

Process-based therapy (PBT) proposes flexible sequencing of intervention kernels guided by idiographic process data. Early studies combining intensive longitudinal assessment with PBT show person-level change but variable effects (Ong et al., 2025), and that online PBT treatment can improve clinical outcomes (Ong et al., 2022). We will conduct a web-based, therapist-delivered open trial designed for Romanian-speaking adults with clinically elevated anxiety and/or depression (N = 30). Following a 3-week baseline with 3 times-per-day ecological-momentary-assessment (EMA) needed for case conceptualization, participants will receive weekly individualized kernels for 8 weeks. Kernel selection will be iteratively updated using the ongoing case conceptualization plus EMA- and questionnaire-derived process indicators, allowing refinement of sequencing decision rules aligned with emerging network-based PBT methodologies (Stangier et al., 2024). Primary outcomes are feasibility/acceptability (retention, completion/adherence, satisfaction). Secondary outcomes include symptoms (PHQ-9, GAD-7, SPIN), quality of life, well-being, and process measures (psychological flexibility, cognitive fusion, values-based

action, avoidance) at post-treatment and 6-month follow-up. Mixed-effects models and clinically significant change indices will quantify within-person change and guide a subsequent controlled trial.

- *Processes of Experiential Acceptance of Anxiety: Evidence From a Qualitative study*

Julie Ribeyron, Ph.D., Paris 8 University  
 Nathalie Duriez, Ph.D., Paris 8 University  
 Rebecca Shankland, Ph.D., Lyon 2 University

Background: Experiential acceptance refers to the willingness to be open to internal experiences without attempting to change or avoid them (Hayes, 1999). Although central to third-wave CBT, its underlying mechanisms remain insufficiently specified (Wojnarowska, 2020). We used qualitative methods to model the subprocesses involved in the acceptance of anxiety to capture its complexity (Jando & Dionne, 2024). Method: Twenty-six non-clinical participants with prior acceptance-based intervention experience (e.g., ACT, MBCT, DBT) took part in semi-structured interviews exploring their experience of accepting anxiety. Grounded Theory (Corbin & Strauss, 2015) was used to develop a data-driven model of the acceptance process. Results: We identified a five-stage dynamic model involving distinct subprocesses: (1) observing through the body (interoceptive focus); (2) identifying anxiety (emotion labeling); (3) validating experience (self-compassion); (4) not reacting (decentering and nonreactivity); and (5) staying with (interoceptive exposure). We also identified facilitating factors that support engagement in the acceptance process. Conclusion: This study refines the conceptualization of acceptance as an active, dynamic, multidimensional process and identifies targetable subprocesses to support learning and individualized acceptance-based interventions.

- *Feasibility, Acceptability and Preliminary Effects of ACT for College Students with Anxiety in India*

Rizval Fernandes, M.Sc., Christ University  
 Anurekha T. K., Ph.D., Christ University

Anxiety is highly prevalent among college students in India yet research on evidence-based psychotherapies remains limited. This pilot study examines the feasibility, acceptability and preliminary outcomes of a culturally adapted Acceptance and Commitment Therapy group intervention for anxious college students in Goa. Undergraduate students were screened for anxiety using the SCAARED, and eligible participants were enrolled in the study. The study employed a single-arm mixed-methods design. One in-person ACT group (n = 8) received an 8-week intervention delivered in weekly 90-minute sessions. The program was culturally and developmentally adapted for late adolescents using contextually relevant content. Sessions targeted core ACT processes through psychoeducation, mindfulness, experiential exercises, metaphors, discussions and homework. Feasibility will be evaluated via recruitment, retention, adherence, implementation fidelity, and assessment burden, while acceptability will be assessed using the Theoretical Framework of Acceptability. The preliminary outcomes this pilot study aims to explore include anxiety symptoms, cognitive defusion, experiential avoidance and psychological wellbeing, assessed using standardised self-report measures. Findings will inform the feasibility of culturally adapted ACT for college students and guide future controlled trials.

- *Evaluation of Endothelial Function in Obsessive–Compulsive Disorder: Research Protocol Design*

Umut Kahyaoğlu, M.D., Istanbul Medeniyet University, Göztepe Prof. Dr. Süleyman Yalçın City Hospital  
 Beyza Baran Boz, M.D., Istanbul Medeniyet University, Göztepe Prof. Dr. Süleyman Yalçın City Hospital  
 Mehmet Emrah Karadere, M.D., Assoc. Prof., Istanbul Medeniyet University, Göztepe Prof. Dr. Süleyman Yalçın City Hospital

Obsessive–Compulsive Disorder (OCD) is a chronic psychiatric disorder associated with functional impairment and linked to cardiometabolic risks. Although vascular dysfunction and oxidative stress have been studied in psychiatric disorders, systematic evaluation of endothelial function in OCD is limited. Endocan, an endothelial cell-specific proteoglycan, is a potential biomarker of endothelial dysfunction but has not yet been investigated in OCD. This study aims to assess endothelial function and endocan levels in individuals with OCD using non-invasive vascular measurements. Thirty DSM-5–diagnosed OCD patients and thirty healthy controls will be recruited from a tertiary psychiatry outpatient clinic. Participants will undergo flow-mediated dilation (FMD), pulse wave velocity (PWV), and carotid intima–media thickness measurements via transthoracic echocardiography. Serum endocan levels will be biochemically analyzed. Clinical assessment will include Yale–Brown Obsessive Compulsive Scale (Y-BOCS), Hospital Anxiety and Depression Scale, and Acceptance and Action Questionnaire–II (AAQ-II). This study aims to provide a biomarker-based perspective to psychiatry, clarify endothelial dysfunction’s role in psychiatric pathophysiology, generate preliminary data for diagnostic and prognostic approaches, and integrate psychiatry with cardiovascular medicine and biochemistry through a multidisciplinary approach.

- *Disentangling the Mental Health Effects of a Digital WHO Self-Help Plus Intervention: Evidence from an RCT*

Meiqi Xin, Ph.D., The Hong Kong Polytechnic University  
 Yuqi Cai, M.A.,  
 Menglin Shang, M.A.,  
 Anise Man-Sze Wu, Ph.D., University of Macau  
 Jing Gu, Ph.D., Sun Yat-sen University  
 Jinghua Li, Ph.D., University of Macau  
 Brian Hall, Ph.D., New York University Shanghai

Background: Self-Help Plus (SH+) is a low-intensity stress management intervention developed by WHO based on ACT. A web-based SH+ program reduced depressive and anxiety symptoms at three months in an RCT among 270 Chinese healthcare workers. This study examined its mechanisms and moderators.

Methods: Path analysis tested a serial mediation model in which SH+ effects on depressive/anxiety symptoms operated through increased positive affect and self-kindness at 1 month and reduced perceived stress at 3 months. Multivariate regression assessed moderation by baseline probable depression/anxiety, engagement in self-practice, and perceived ease of understanding and practicing SH+. Significant moderators were further examined using moderated mediation models.

Results: Reduced perceived stress significantly mediated SH+ effects, accounting for 71.8% and 96.7% of total effects on depressive and anxiety symptoms, respectively. Effects were stronger among participants with high engagement in self-practice ( $\geq 2$ -3 times/month), which amplified the stress mediation pathway. No moderation was observed for other factors.

Conclusions: SH+ functions as a universal intervention, with perceived stress as a key mechanism. Enhancing engagement in self-practice is critical to optimize real-world effectiveness.

- *The Evolution of the ACT Model(s)*

John P. Forsyth, Ph.D., University at Albany, SUNY

ACT formally emerged with the publication of the classic "99 Book," yet the work was well underway before then. I am old enough to remember ACT before it was called ACT, and over the past 25+ years I have watched the model evolve both as an account of human suffering and as a framework for alleviating it.

During that time, several variations of the ACT model(s) have emerged. Some aim to simplify complexity and sharpen clinical decision-making, while others adapt ACT for specific populations. There are at least a dozen variations, with more undoubtedly on the way.

This presentation offers a perspective on where ACT has been, where it stands, and where it may be heading, particularly as the field moves toward process-based, functional, and evolutionary approaches. I will examine how ACT's models of suffering and change have developed, how they are being used (and sometimes misused), and what this may mean going forward.

Special attention will be given to ACT as a process-based therapy and the challenge of maintaining conceptual coherence while encouraging innovation.

#### Educational Objectives:

1. Describe measurement-based kernel sequencing in PBT, including baseline EMA case conceptualization, selecting process indicators, and iteratively updating kernel choices across treatment.
2. Identify the key subprocesses involved in acceptance (e.g., interoceptive focus, labeling, validation, nonreactivity/decentering, and interoceptive exposure).
3. Describe the mechanisms and moderators of the WHO Self-Help Plus intervention (based on Acceptance and Commitment Therapy).

**CEs Available (1.50):** [CEs for Psychologists](#)

## 28. Addressing the Global Mental Health Burden of Dementia Caregiving: International Advances in ACT

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Original data*

Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, Dementia

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C254**

Naoko Kishita, Ph.D., University of East Anglia  
 Golnaz Atefi, Ph.D., Radboud University Medical Center  
 Elizabeth Fauth, Ph.D., Utah State University  
 Laura Gallego-Alberto, Ph.D., Universidad Autónoma de Madrid

Over 55 million people worldwide are living with dementia, with a new diagnosis every three seconds. This number is projected to reach 139 million by 2050. Most dementia care is provided by family members, representing an estimated global economic contribution of USD 651.4 billion annually. The psychological burden on carers is substantial: approximately one third experience clinically significant symptoms of anxiety and depression. Despite this, access to timely psychological support remains limited, with many carers reporting isolation driven by restricted mobility and constrained health and social care resources. Critically, the dominant psychological approach evaluated in this population—conventional CBT—has demonstrated limited effectiveness, particularly for anxiety, with modest benefits for depressive symptoms. This international symposium presents emerging research on ACT for people living with dementia and their family carers from the UK, the Netherlands, the United States, and Spain. Presentations demonstrate how ACT must be purposefully adapted in both content and delivery to address the complex needs of this population and present the latest evidence on feasibility, acceptability, and clinical and cost-effectiveness.

- *A Multicentre, Parallel, Randomised Controlled Trial of Internet-delivered Self-help Acceptance and Commitment Therapy for Family Carers of People with Dementia (iACT4CARERS) in the UK*

Naoko Kishita, Ph.D., University of East Anglia  
 Rebecca L Gould, Ph.D., University College London  
 Lance McCracken, Ph.D., Uppsala University  
 Mizanur Khondoker, Ph.D., University of East Anglia  
 David Turner, M.Sc., University of East Anglia  
 Morag Farquhar, Ph.D., University of East Anglia

This randomised controlled trial evaluated the clinical and cost effectiveness of internet-delivered self-help ACT, guided by non-expert therapists, for family carers of people living with dementia (iACT4CARERS) in the UK. Over 14.5 months, 567 carers were screened for anxiety, and 496 eligible participants (80% female, 8% non-White) were randomised (1:1) to iACT4CARERS plus treatment-as-usual (TAU) or TAU alone. Carers in the intervention arm completed iACT4CARERS over 12 weeks. Outcomes were assessed at baseline, 12 weeks, and 24 weeks. iACT4CARERS plus TAU significantly reduced anxiety at 12 weeks compared with TAU alone (GAD-7 adjusted mean difference  $-2.62$ , 95% CI  $-3.47$  to  $-1.77$ ;  $d=0.53$ ;  $p<0.0001$ ), with effects sustained at 24 weeks ( $-2.12$ , 95% CI  $-3.01$  to  $-1.20$ ;  $d=0.42$ ;  $p<0.0001$ ). The primary outcome (anxiety at 12 weeks) remained robust across all sensitivity analyses. Similar improvements were also observed in depression (PHQ-9), psychological flexibility (CompACT), and experiential avoidance (EACQ) at both 12- and 24-week follow-ups. Health economic analysis indicated the intervention was cost effective. These findings support iACT4CARERS as a scalable, effective mental health intervention for dementia family carers.

- *Personalised Acceptance and Commitment Therapy for Dementia Caregivers: Evidence From a Guided Online Intervention in the Netherlands*

Golnaz Atefi, Ph.D., Radboud University Medical Center  
 Rosalia J.M. Van Knippenberg, Ph.D., Maastricht University  
 Sara Laureen Bartels, Ph.D., Maastricht University  
 Andrés Losada-Baltar, Ph.D., Universidad Rey Juan Carlos  
 Maria Marquez Gonzalez, Ph.D., Universidad Autónoma  
 Frans R.J. Verhey, M.D. Ph.D., Maastricht University  
 Marjolein De Vugt, Ph.D., Maastricht University

ACT has shown promise in enhancing well-being across diverse groups, yet effect sizes in caregiving contexts remain moderate and sometimes accompanied by high dropout rates. This study evaluated the feasibility, acceptability, and preliminary efficacy of a fully online 9-week ACT self-help intervention for family caregivers of people with dementia in the Netherlands. Thirty caregivers were recruited. The programme incorporated individual values-based goal setting and weekly minimal-contact motivational coaching. A mixed methods pretest–posttest design was used, including follow-up assessments at 3 and 6 months. Of the 29 participants who started the intervention, 24 completed the post-intervention assessment (83% adherence). Caregivers valued the collaborative goal-setting process, though some experienced challenges implementing ACT skills in unpredictable caregiving situations. Linear mixed-effects models showed significant improvements in depressive symptoms (mean difference  $-3.34$ ,  $d =$

-0.78), stress (-6,  $d = -1.13$ ), and anxiety (-5.55,  $d = -1.38$ ). Psychological flexibility, engaged living, inflexibility, and sense of competence (1.1,  $d = 0.45$ ) also improved. Findings indicate high feasibility, strong adherence, and promising preliminary efficacy, supporting the need for larger-scale controlled trials.

- *ACT-based Digital Mental Health Interventions for Individuals with Dementia and Their Caregivers in the United States*

Heather Kelley, Ph.D., Utah State University  
 Beth Fauth, Ph.D., Utah State University  
 Ty Aller, Ph.D., Utah State University

We will provide an overview of several trials measuring the feasibility, acceptability, and efficacy of ACT-based Digital Mental Health Interventions (DMHIs) among individuals with dementia and informal caregivers of individuals with dementia in the United States. We will review the process of adapting ACT concepts and skills to the context of caregivers and individuals with dementia, using examples and mixed-methods data from several trials, including two pilot trials of a single-session ACT-based intervention (Compassion Compass) among individuals with dementia ( $N = 17$ ) and individuals with dementia and their caregivers ( $N = 10$  dyads), as well as a randomised control trial (RCT) of a six-session ACT-based intervention (ACT for Caregivers) among informal dementia caregivers ( $N = 113$ ). The pilot trials demonstrated feasibility and strong acceptability of teaching ACT-based skills to individuals with dementia via an asynchronous DMHI, while the caregiver RCT demonstrated strong efficacy (e.g., decreased depressive symptoms ( $SMD = .60$ ,  $p < .001$ ) and improved quality of life ( $SMD = .44$ ,  $p < .001$ )). We will cover future directions for research in this area.

- *ACT-Based interventions for dementia caregivers in Spain: Achievements and Challenges*

Laura Gallego-Alberto, Ph.D., Universidad Autónoma de Madrid  
 María Márquez-González, Ph.D., Universidad Autónoma de Madrid  
 Isabel Cabrera, Ph.D., Universidad Autónoma de Madrid  
 Andrés Losada-Baltar, Ph.D., Universidad Rey Juan Carlos

Caring for a person living with dementia has been associated with significant emotional distress among caregivers. In the last two decades, Acceptance and Commitment Therapy (ACT) has been proposed and tested as a useful alternative to support family caregivers by promoting psychological flexibility, the acceptance of difficult emotions, and guiding caregiver's actions toward personal values. Results from three randomised clinical trials (RCT) developed in Spain will be presented. In the first study, data comparing an ACT-based intervention and a cognitive-behavioural intervention for caregivers will be shown, providing evidence in favour of ACT-based approaches. However, the context of manualised intervention presents some challenges, such as the limited individualisation of interventions. In response, the second RCT tested a functionally-analysis oriented treatment that incorporates ACT strategies to better address caregivers' individual needs. Additionally, a third individualised alternative, an intervention specifically aimed at addressing guilt, integrating self-compassion and ACT components, will be described.

Educational Objectives:

1. Describe how ACT content can be tailored to the context of dementia care, including integration with gerontological theories and related approaches.
2. Identify key challenges and effective solutions in conducting research on self-help interventions for people living with dementia and their family carers.
3. Evaluate the feasibility, acceptability, and clinical and cost-effectiveness of ACT for people living with dementia and their carers.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**29. How to Be (Un)Happy: Rigid Flexibility and Other Paradoxes of ACT: Poland Chapter Sponsored**

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Processes of change, Professional development, Psychological Flexibility and Inflexibility

Target Audience: *Intermediate, Advanced*

**Location: C302**

Marcin Domurat, Ph.D., Behavioralnle Psychotherapy School  
 Magdalena Hyla-Zajac, Ph.D., University of Silesia

Psychological flexibility is often treated as a way of responding to suffering and a safeguard against experiential avoidance. However, can the pursuit of psychological flexibility itself become problematic? The workshop invites participants to practice identifying the boundary between functional use of the model and its rule-governed application, fostering sensitivity to context, function, and process. Using guided experiential exercises and reflective dialogue, we will practice noticing how easily one can become rigid in the pursuit of flexibility - and how attempts to "do ACT well," as well as striving for acceptance, mindfulness or values can themselves become sources of struggle. Through humor, paradox, and embodied experience, participants will play with ACT processes rather than merely understand them conceptually. This workshop is relevant for those using ACT in clinical, coaching, support, or personal contexts, particularly when navigating uncertainty, ambiguity, and the complexity of lived experience. We also warmly invite those who notice an inner "ACT supervisor" frequently asking: Am I present enough? Is this aligned with my values? Is this truly my choice or just another thought?

Educational Objectives:

1. Assess moments in which psychological flexibility processes shift from context-sensitive responding to rigid, rule-governed patterns.
2. Apply experiential strategies to loosen entanglement with ACT-consistent rules (e.g., "doing ACT well") in clinical and personal contexts.
3. Create flexible, function-based responses when navigating uncertainty, ambiguity, and self-evaluative ACT-related language.

**CEs Available (1.50):** [CEs for Psychologists](#)

Thursday Afternoon 15:15

### 30. Trauma, the Therapeutic Relationship, and the Bridge between Psychoanalytic and Contextual Behavioral Traditions

Panel • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Didactic presentation*

Categories: Theory and philosophical foundations, Processes of change.

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Merieux**

Chair: Steven C. Hayes, Professor, PsychFlex

Robyn D. Walsler, Ph.D., Trauma and Life Consultation and Psychological Services

Peter Fonagy, Ph.D., University College London

Sheri L Turrell, Ph.D., Life in Balance Therapy

Psychoanalytic and contextual behavioral perspectives have long shared the view that human psychological actions need to be viewed functionally rather than by mere appearance. Despite that, it is a historical fact that these two traditions have often viewed each other as being an opposition. That era seems to be passing as psychotherapy work focuses more deeply on processes of change, considered in a way that doesn't ride roughshod over the details of our clients' lives. This panel will explore how a bridge might best be constructed between these traditions, focusing on trauma and the therapeutic alliance as an example. Ideas central to each tradition will be used as process lenses for seeing where the two traditions might connect with each other. From the psychoanalytic side there will be a focus on mentalization – the capacity to understand self and others in terms of intentions, feelings, and beliefs – and how it impacts flexibility and rigidity in the aftermath of trauma. CBS ideas of relational learning, psychological flexibility, and perspective taking will be explored. As with all genuine conversations, the intent is to bring a posture of openness and a willingness to see each other's viewpoint serves as a testbed for the idea that the overlapping but distinct ideas of psychoanalytic and contextual behavioral thought might be mutually beneficial when seriously and mutually considered.

Educational Objectives:

1. Describe how mentalization can be approached from a psychoanalytic and contextual behavioral science tradition.
2. Identify and justify at least two concrete, alliance-strengthening strategies that draw from both traditions.
3. Discuss how and why trauma often leads to greater psychological rigidity and how methods from both traditions may alleviate these issues.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### **31. Self and Identity in Context: Advances in ACT and RFT on the Construction, Function, and Transformation of the Self**

**Panel** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Literature review*

Categories: Theory and philosophical foundations, RFT / RGB / language, Self as Context

Target Audience: *Intermediate*

**Location: Gounot**

Louise A McHugh, Ph.D., University College Dublin

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

Beate M. E. Ebert, Clinical Psychologist, Private Practice

Harold B Robb III, Ph.D., ABPP, Private Practice

Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin

Contemporary Contextual Behavioral Science increasingly examines self and identity not as fixed internal structures, but as dynamic patterns of relating shaped by history, context, and function. Drawing on Acceptance and Commitment Therapy and Relational Frame Theory, this panel brings together scholars to explore how self related processes develop, persist, and can be therapeutically transformed. Panelists will frame the self as a relational and functional phenomenon, outlining distinctions among self as content, self as process, and self as context, and describing how these repertoires interact with language, social contingencies, and cultural narratives. The session integrates basic research on perspective taking, deictic framing, and identity related relational networks with clinical innovations addressing identity fusion, shame, stigma, and rigid self narratives across settings. Through dialogue across theory, empirical work, and practice, the panel will clarify key conceptual issues, highlight emerging methods for studying self processes, and identify practical implications for intervention, research, and training, including social identity and values based identity development.

Educational Objectives:

1. Describe how relational framing processes contribute to the development and maintenance of identity and self related processes.
2. Evaluate recent empirical findings on perspective-taking, deictic framing, and identity relevant relational networks.
3. Identify future research and clinical directions for advancing a contextual behavioral science of self and identity.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### **32. ACT in Practice: Clinical Creativity and Contextual Adaptation: Branche Francophone - French-Speaking Chapter Sponsored**

**Panel** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation*

Categories: Clinical intervention development or outcomes, Clinical Practice

Target Audience: *Beginner*

**Location: Barrot**

Anne-S everine Fraignac, Master's 2, Centre Psychoth erapique de Nancy

Thomas Hubert, Centre Psychothérapique de Nancy  
Jean-christophe Seznec, Ph.D., Cabinet Médical  
Déborah D'Hostingue, Master's, Cabinet Médical  
Martial Bouladou, M.A., ACBS

This panel offers a clinical reflection on how ACT can be implemented across diverse practice settings, with a particular focus on how process-based work can be mobilized and flexibly adjusted to different clinical frameworks in creative ways. It is grounded in a perspective of concrete application and informed methodological decision-making.

Three presentations will illustrate different ways to bring ACT to life in clinical practice: using metaphor as a therapeutic and experiential tool, drawing on the notion of "positive trauma"; applying the DNA-V model and the experiential Compass metaphor to support young people in navigating daily life; and implementing ACT within a public adult day hospital setting.

In the French context, where ACT is currently expanding, this panel seeks to contribute to the development of a humanistic and pragmatic approach to care. It aims to share clinical guidelines and practical adaptations to foster a living, embodied integration of contextual and functional behavioral sciences.

Educational Objectives:

1. Describe key principles for adapting ACT processes across different clinical contexts.
2. Analyze how clinical tools such as metaphor and DNA V model can be flexibly implemented to enhance psychological flexibility in practice.
3. Identify practical strategies for maintaining a process-based, evidence-informed, and humanistic stance in diverse clinical settings.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 33. The Self in All Its States

**Symposium** • 15:15 - 16:30

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

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

Categories: Processes of change, Clinical intervention development or outcomes, Self

*Target Audience: Beginner, Intermediate*

**Location: Mouterde**

Chair: Déborah Ducasse, M.D., CHU Montpellier

Martin Leurent, Dr., CHU Montpellier

Céline Stinus, Ph.D., University of Navarra, Institute Culture and Society, Group Infinity

Nicolas Pellerin, Ph.D., APSY-V Laboratory, Nîmes University

This symposium aims to deliver three complementary building blocks that collectively illuminate the plenary's central question: "Who is the 'self' that accepts and who is the 'self' that commits to action?" (Plenary title: Who Accepts, Who Acts? Self-Processes in ACT for Suicidality and Borderline Personality Disorder). We focus on how specific modes of self-Processes—notably those organized around social evaluation, identity threat, and externalized motivation—can structure trajectories of psychological suffering, including instability in affect, meaning, and interpersonal functioning. In contrast, we examine how processes of decentering, selflessness, and psychological resources can shift motivational dynamics, enhance flexibility, and support more stable forms of well-being. Across three integrated contributions, the symposium synthesizes emerging research on self-processes as core change processes in contextual behavioral science and process-based psychotherapy, clarifying how self-related dynamics shape motivation, resilience, and the stability of well-being across clinical presentations.

- *From a Threatened to a Decentered Self via Contemplative Practices: Self-Processes in Depressive Vulnerability*  
Céline Stinus, University of Navarra, Spain, Institute Culture and Society, Group Infinity

Depressive vulnerability depends largely on how individuals perceive and evaluate themselves, particularly when their sense of identity is experienced as threatened. This presentation offers a clinical perspective on depression centered on self-related processes, viewing identity threat as a key mechanism linking rigid self-schemas to psychological suffering. Drawing on correlational and experimental data, we suggest that the decentered self—understood as a more flexible way of relating to oneself, characterized by disidentification, impermanence, and connection with others—acts as a protective factor by altering these processes.

The findings indicate that a more decentered mode of self-functioning is associated with a reduction in depressogenic schemas and identity threat, both of which are involved in the maintenance of depressive symptoms. Experimental data further show that this mode of functioning can be cultivated through contemplative practices and is accompanied by changes in how individuals relate to their thoughts, emotions, and sense of identity.

- *The self is happiest when It becomes selfless: evidence from experience sampling in daily Life*  
Nicolas Pellerin, APSY-V Laboratory, Nîmes University, Nîmes Cedex, France

Common intuition suggests that happiness comes from accumulating pleasures, possessions, or achievements. However, psychological research paints a more nuanced picture, and the mechanisms that explain day-to-day fluctuations in happiness remain insufficiently understood. The Centered–Decentered Self Model offers an innovative perspective on these dynamics: when the self is focused on itself, it primarily gives rise to fluctuating happiness; conversely, when the self becomes decentered, it opens the way to a more authentic and enduring form of happiness.

After presenting this model of happiness, we will discuss recent empirical findings that support it, with particular attention to studies using experience sampling methods in everyday life. These studies make it possible to observe, in naturalistic settings, the co-occurring changes in happiness and in centered or decentered states of self.

- *Borderline personality disorder as an extreme model of ontological addiction: relationship-use processes and testable clinical markers*  
Martin Laurent, CHU Montpellier

When the “I” is conceived of and experienced as intrinsically deficient, attempts at repair become persistent compensatory strategies (avoidance, control, validation seeking, overinvestment in roles, sensation seeking). This dynamic, which is universal in nature, is conceptualized as ontological addiction: an attempt to repair an existential sense of lack through behaviors rather than through a transformation of identity.

Borderline Personality Disorder is proposed as an extreme model of ontological addiction, in which close relationships become the primary means of regulating the “deficient self.” This gives rise to dynamics resembling relational addiction (attachment–aversion, idealization–devaluation, withdrawal, relapse) and to empirically testable markers.

A common feature of third-wave cognitive-behavioral therapies (ACT, DBT, MBSR, MBCT, and CFT) is that they each target one aspect of this “deficient self.” But what if a deeper approach were to focus on self-identification in all its facets? What if the contextual behavioral view of the self could guide a comprehensive, progressive, and rigorous developmental pathway?

This is the aim of the Self Identification Program (SIP), whose identity-related processes will be described.

#### Educational Objectives:

1. Describe how identity threat and rigid self-schemas contribute to depressive vulnerability, and how decentered self-processing relates to reduced depressogenic schemas and symptoms.
2. Summarize evidence (including experience sampling) showing how self-centered vs. selfdecentered states predict moment-to-moment well-being in daily life.
3. Explain borderline personality disorder as ontological addiction, identifying relationship-use processes and testable clinical markers linked to a “deficient self” and third-wave CBT targets.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 34. Measuring Psychological Flexibility in High Conflict Parents to Inform Treatment Decisions

**Workshop** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

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

Categories: Behavior analysis, Processes of change, Families, Conflict, Family Violence, Separated Parents, Child Therapy, Psychological Flexibility

Target Audience: *Intermediate*

**Location: Weil**

Tiffany Rochester, B Psych, MAppPsych(Clin), Co-Parenting Companion & The Same Mountain

Separated family cases carry heightened risks of clinician triangulation, administrative burden, and vexatious complaints, often resulting in clinicians working out-of-scope or children being denied care.

Precision triage at the first point of intervention can save families years of emotional trauma and thousands of dollars. While CBS clinicians understand the ACT Hexaflex, no previous framework has mapped psychological flexibility onto validated models of interpersonal conflict for this population, to identify the factors that place clinicians and clients at higher levels of risk.

This workshop introduces a triage tool that objectively measures psychological flexibility and behavioural capacity of separated parents in conflict. This short-cuts conflict conceptualisation and provides a process-based methodology for precision treatment, improving outcomes for the 1 in 4 children being raised across two homes.

Participants will engage in experiential training to:

Identify functional conflict levels.

Translate assessment data into precision recommendations for therapy models and required practitioner competencies.

Identify behavioral "Red Flags" where direct child therapy is contraindicated and solo-parent resourcing must be prioritized to protect the child - and the clinician.

Educational Objectives:

1. Analyze complex parental narratives using the 13-item RACPS to determine the specific level of interpersonal conflict and psychological inflexibility.
2. Critique the suitability of various therapeutic interventions based on objective functional assessment data.
3. Identify behavioral "Red Flags," including narrative fusion and limited perspective taking, to maintain protective practice boundaries in high-risk cases.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **35. Navigating the Masculinity Hexaflex: Shaping Flexibility Among Polarized Masculinities: Men and Masculinities SIG Sponsored**

**Workshop** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

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

Categories: Social justice / equity / diversity, Dissemination or global health strategies, Masculinity

Target Audience: *Beginner, Intermediate*

**Location: Perroux**

Mark Sisti, Ph.D., NYC Cognitive Behavioral Psychology, PLLC

Brian Pilecki, Ph.D., Portland Psychotherapy, Portland Institute for Psychedelic Science

Julian L Manetti-Cusa, Psy.D., Private Practice

This workshop applies Acceptance and Commitment Therapy (ACT) conceptualizations to masculine narratives emerging from today's increasingly polarized "culture wars." We will explore how traditional masculine norms—such as normative alexithymia, dominance, anti-femininity, and sexual prowess, impact psychological flexibility. Given the current sociopolitical climate, clinicians face an unprecedented responsibility to develop specialized awareness in this area. Using a "Masculinity Hexaflex," participants will learn to conceptualize cases and apply experiential exercises to shape greater flexibility. Functional analyses will be applied to emerging "post-toxic" masculine narratives, including "positive/aspirational," "queer," and "neo-masculine" theories. By contacting defused, non-zero-sum narratives, we aim to shape "post-patriarchal" masculinities that foster expanded repertoires for men in harmony with all gender identities. While focusing on male-identified experiences, this workshop seeks to challenge regressive agendas while remaining in active alliance with women, trans, and non-binary communities.

Educational Objectives:

1. Conceptualize via the 6 processes typical masculine case issues, such as, emotional suppression, dominance, sexual prowess, and more competently shape flexible masculinity, rather than a narrow hegemonic-masculinity.
2. Demonstrate the use of defusion strategies to transform zero-sum gender narratives into inclusive, cooperative perspectives.
3. Apply expanded repertoires regarding available cultural narratives for flexibly navigating rigid narrow culturally divisive gender based roles and narratives.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **36. Advancing Process-Based Intervention Science Through AI, Virtual Reality, and Digital Therapeutics**

**Symposium** • 15:15 - 16:30

Translation: Not available

Components: *Original data*

Categories: Mobile or digital technology, Processes of change, Mechanisms of Change, Process-Based Interventions

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Aubert**

Chair: Panajiota Rasanen, M.Sc., Department of Psychology, University of Jyväskylä

Discussant: Maria Karekla, Ph.D., University of Cyprus

Jacob Tempchin, M.S., University of Memphis

Monica Hernández-López, Ph.D., University of Jaén

Essi Sairanen, Ph.D., University of Jyväskylä

Eleana Lamprou, University of Cyprus

Digital technologies offer opportunities to examine and influence mechanisms of behavior change, yet their integration into process-based interventions requires empirical grounding. This symposium presents five data-driven studies investigating how artificial intelligence (AI), virtual reality (VR), and digital therapeutics can identify, shape, and evaluate intervention processes across supervision, delivery, and implementation contexts.

Presentations include: (1) analyses from an RCT of brief alcohol interventions (N=238) using large language models to identify clinician language patterns that evoke change and sustain talk; (2) development of a therapist-supervised AI chatbot for university students (N=20; 5 therapists); (3) integration of AI-guided conversational agents into an established internet-based ACT program for students, examining trust, help-seeking barriers, and user preferences (N=50); (4) mixed-methods of a VR-based perspective-taking intervention targeting self-relating processes in various populations; and (5) pilot data (N=61) and planned RCT evaluation (N=150) of a culturally adapted ACT-based digital therapeutic for youth vaping cessation.

Together, these contributions illustrate how digital technologies advance the study and application of core functional processes in process-based interventions while maintaining therapeutic integrity, supervision quality, and contextual sensitivity.

- *Using AI to Identify Features of Clinician Language That Evoke Change and Sustain Talk as Clinicians Gain Supervised Experience Delivering Brief Alcohol Interventions*

Jacob Tempchin, The University of Memphis

Xiaolei Huang, The University of Memphis

Guangzeng Han, The University of Memphis

Benjamin O. Ladd, Washington State University, Vancouver

Lindsey Barnes, Rhodes College

Brian Borsari, Mental Health Service, San Francisco VA Health Care System; University of California,

Ashley A. Denhardt, The University of Memphis

Molly Magill, Center for Alcohol and Addiction Studies, Brown University

James G. Murphy, The University of Memphis

In brief motivational interventions (BMIs) for alcohol use, clinician skills are related to client statements about maintaining (sustain talk; ST) and reducing alcohol use (change talk; CT), which in turn predict drinking outcomes (Borsari et al., 2019; Magill & Hallgren, 2018). Identifying these causal processes traditionally relies on labor-intensive observational coding, which limits their practical utility in shaping clinician behaviors. Data come from a randomized controlled trial of BMIs among non-treatment-seeking emerging adults reporting heavy drinking (N=238), in which client language was categorized by human coders. Incorporating a behavioral economic perspective, client statements about approaching alternatives to alcohol were additionally coded as CT and avoiding alternatives as ST. In a prior analysis, clinician experience (cumulative sessions delivered) was associated with decreased ST ( $b = -0.0015$ ,  $SE = 0.0007$ ,  $p = .043$ ,  $ICC = .755$ ) and increased percent change talk (CT/[CT+ST];  $b = 0.0026$ ,  $SE = 0.0013$ ,  $p = .046$ ,  $ICC = .869$ ), but not CT ( $p = .69$ ,  $ICC = .813$ ). Open-sourced large language models will be locally trained to identify clinician statements that precede CT and ST, and mixed-effects models will examine whether feature frequencies change as clinicians gain supervised experience.

- *AI-Guided Support in Internet-Based ACT: Trust, Help-Seeking Barriers, and User Preferences*  
Panajiota Rasanen, M.Sc., University of Jyväskylä  
Joonas Merikko, Ph.D., Annie Advisor Edtech Company & Department of Computer Science, University of Helsinki

Internet-based Acceptance and Commitment Therapy (iACT) has demonstrated effectiveness in supporting student well-being and reducing psychological distress (Räsänen et al., 2016; 2023). As large language models (LLMs) are increasingly integrated into digital mental health services, understanding how users experience AI-guided support is essential for designing effective and trustworthy interventions (Lee et al., 2020; Kumar et al., 2024). This exploratory study examined trust, satisfaction, and help-seeking barriers in AI-supported iACT. University of applied sciences students (N = 50) participated in a classroom-based intervention in which they interacted with two prototype conversational agents (CAs): one supporting post-exercise reflection and another guiding personal values clarification. Post-interaction surveys assessed human-computer trust (Gulati et al., 2019), user satisfaction, barriers to help-seeking (Mansfield et al., 2005), and preferred support formats. Students perceived lower risk when using the values-oriented CA compared to the exercise-reflection CA, although overall trust levels were similar. Logistic regression analyses identified user satisfaction and openness to emotional expression as significant predictors of preference for AI guidance over personal, group, or self-guided formats. This work is part of a broader developmental effort to integrate AI guidance into an established iACT intervention for university students. Implications for CA design and future research are discussed.

- *Development of an AI-based Chatbot to Support Psychological Therapy. Preliminary Results on Usability, Acceptability, Symptom Evolution, and Flexibility Processes.*  
Mónica Hernández-López, University of Jaén  
Arturo Montejo-Raez, University of Jaén  
M<sup>a</sup> Rosario Garcia-Viedma, University of Jaén  
M<sup>a</sup> Alba Marmol-Romero, University of Jaén  
Fabian Suarez-Maroto, University of Jaén  
María Pérez-Estrella, University of Jaén  
Lourdes Espinosa-Fernandez, University of Jaén  
Paula Soberino-Acero, University of Jaén  
Miguel Rodríguez-Valverde, University of Jaén

The rise of mental health problems under limited access to mental health resources is leading many youth to turn to AI platforms for help-seeking. This study reports on the development of a therapy chatbot based on a large language model. An application allowed for the real-time supervision of chatbot-user interaction by an actual therapist (the therapist selected the adequate response from chatbot-generated alternatives or proposed a new one). This reinforcement learning system served to shape chatbot responses to match the approach and style of each therapist. 20 students seeking care at the University Psychology Service (service users) and 5 therapists (3 ACT, 2 CBT) participated in the study. Service users completed questionnaires on anxiety, depression, and psychological flexibility as well as a momentary ecological assessment scheduled three days a week during the pre-phase, the chatbot interaction phase, and a brief follow-up phase. In addition, all participants (users and therapists) completed measures of app usability and acceptability. This study explores an ethical, safe, and socially responsible alternative to commercial chatbots.

- *What if You Could See Yourself With My Eyes? Investigating the Impact of Perspective Taking in a Virtual Reality-Environment on the Sense of Self*  
Essi Sairanen, University of Jyväskylä, Karlstad University  
Daniel Wallsten, Karlstad University  
Elin Ekholm, Karlstad University  
Maria Tillfors, Karlstad University

Dermot Barnes-Holmes, Ulster University  
Thomas Parling, Karolinska Institute

The sense of self is central to psychological well-being and is frequently targeted by perspective-taking interventions. We developed a virtual reality (VR)-based perspective-taking intervention grounded in Relational Frame Theory, in which participants observe themselves from an external perspective, and examined its effects on self-relating in multiple mixed-methods studies involving non-clinical participants (N = 9; N = 3) and individuals with depressive symptoms (N = 8) or eating disorders (N = 3). Quantitative methods included pre-post assessments of self-relating using the Implicit Relational Assessment Procedure (IRAP), single-case experimental designs with daily measures of mood, meaning, self-compassion, and relationship to food/body, as well as standardized outcome measures. Qualitative data were collected through semi-structured interviews and analyzed using Interpretative Phenomenological Analysis to examine participants' patterns of self-relating. Across studies, findings indicated shifts toward more positive and compassionate self-relating, increased self-reflection, and perceived meaningfulness of the intervention, although quantitative effects were heterogeneous. Common qualitative themes included perspective shifts, suppressed needs, and a longing for authenticity. Overall, the findings suggest therapeutic potential for VR-assisted perspective taking, and candidate change processes are proposed.

- *FlexiQuit Vaping: An ACT-Based Digital Therapeutic for Youth Vaping Cessation in Cyprus*  
Eleana Lamprou, University of Cyprus  
Maria Karekla, Ph.D., University of Cyprus

Youth vaping has increased substantially in Cyprus and across Europe, yet few evidence-based cessation interventions exist for adolescents and young adults. FlexiQuit Vaping is a culturally tailored, smartphone-delivered Acceptance and Commitment Therapy (ACT) program designed to engage youth across varying readiness to quit. The intervention will be co-developed with Cypriot youth and clinicians and delivered through a gamified, avatar-guided mobile app with micro-lessons, in-app practice, and supportive text messaging. A randomized controlled trial (n=150) will compare FlexiQuit to a waitlist control, with outcomes including readiness to quit, quit attempts, and cotinine-verified 30-day abstinence at six months. Preliminary evidence from the underlying U.S. ACT platform supports feasibility and acceptability. A pilot randomized trial (n=61) showed high satisfaction (3.8/5) and more 24-hour quit attempts relative to control, with trends toward improved abstinence. A six-day diary study further demonstrated strong adherence, positive usability ratings, and actionable design feedback. FlexiQuit will extend this evidence through cultural adaptation and rigorous evaluation in Cyprus, offering a scalable digital therapeutic for youth vaping cessation.

**Educational Objectives:**

1. Differentiate how AI-, VR-, and mobile-based technologies are used to identify and influence functional processes (e.g., change talk, psychological flexibility, self-relating) and engagement variables (e.g., trust, help-seeking) within process-based in
2. Analyze empirical findings across methodological designs (e.g., RCTs, mixed-effects models, single-case designs, and usability studies) and assess the impact of digital technologies on functional processes and behavioral outcomes.
3. Formulate ethically responsible, functionally grounded strategies for integrating digital technologies into process-based interventions while maintaining supervision quality, user acceptability, and treatment fidelity.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**37. Responding to Nihilism: A CBS Pathway**

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Theory and philosophical foundations, Methods/approaches for individual variation, Nihilism, Meaninglessness, Values Based Responses, Self Forgiveness

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Maldiney**

Grant M Dewar, Ph.D., Mental Health Pro

Many people today feel a quiet but persistent sense of meaninglessness. Old frameworks for making sense of life no longer seem to work, yet nothing clear has replaced them. This experience—

often described as nihilism—can show up as despair, numbness, or the feeling of being stuck and directionless. This seminar looks at how Contextual Behavioural Science can help people work with this struggle in a grounded, practical way. Rather than trying to stop or replace thoughts or force optimism, CBS starts by acknowledging that doubt, anxiety, and uncertainty are part of being human in modern society. Participants will explore how CBS techniques including self-forgiveness reduce the exhausting fight with unanswerable questions, while simple processes help loosen the grip nihilistic meaninglessness. A key focus is value creation in response to existential challenges, not inherited rules or immutable beliefs. Action that reveals personally chosen ways of living becomes that worth showing up for. Thus people can begin to build meaning from the inside out in an uncertain and challenging universes. The workshop will focus on experiential processes.

Educational Objectives:

1. Identify objective and non judgmental ways of describing and responding to the the philosophical roots of Nihilism and its practical outcomes in current societal frameworks.
2. Through experiential work, practice CBS based approaches to a nihilistic experience that helps to engage individuals and groups with a values creating approaches to individually valid responses to life challenges.
3. Demonstrate skills as CBS professionals to hold a compassionate and responsive space to promote openness acceptance and curiosity to the person experiencing nihilism.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **38. Mapping Behavioral Change. Applying ACT4life: A Visual, Embodied Approach to Process-Based Case Formulation**

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Methods/approaches for individual variation, Processes of change, Process-Based Case Formulation

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C125**

Monique Samsen, M.Sc., ACT4life - Independent Practice & Training Institute

Behavior emerges from dynamically interacting cognitive, neurophysiological, social, and sociohistorical processes unfolding in the moment and across time. Tracking these processes and their functional relation to values-driven goals can be challenging. Yet such functional clarity is essential for linking case formulation to intervention—and therefore doing what works. Developing insight into the contextual background of behavior is equally meaningful for clients, despite its complexity.

In this workshop, participants apply the ACT4life-model: a comprehensive framework for mapping and tracking complex behavioral processes, here applied to case formulation. Using their own clinical cases, participants learn to visualize behavior as concrete, embodied, and observable elements, making these processes easier to identify, understand, track, and communicate with clients and relevant others. Within this framework, they examine where patterns become constrained and identify leverage points for change. Explicit attention is given to four phases of change underlying the process of creative hopelessness.

Relevant empirical and theoretical foundations – for example from behavioral science, neuroscience, and processes of change – are briefly reviewed to support clinical application.

Educational Objectives:

1. Demonstrate how to use a visual instrument to translate behavioral processes into concrete, observable, and embodied elements.
2. Create a visual process-based case formulation by mapping interacting cognitive, neurophysiological, social, and sociohistorical processes.
3. Describe and assess four phases underlying creative hopelessness and determine a client's current position within this unfolding change process.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 39. From Laboratory to Clinic: Experimental and Translational Studies on Metaphor Processes in ACT

**Symposium** • 15:15 - 16:30

Translation: Not available

Components: *Original data*

Categories: RFT / RGB / language, Clinical intervention development or outcomes, Metaphor, Language and Cognition

Target Audience: *Intermediate*

**Location: C154**

Chair: Roberta Kovac, Psy.D., Instituto Par Educação

Discussant: Niklas D. Törneke, M.D., NT Psykiatri, private practice

Beatriz Galli, M.A., Universidade Presb. Mackenzie; Instituto Par

Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Metaphors are central tools in Acceptance and Commitment Therapy (ACT), and the relational processes through which they influence behavior still require further empirical investigation. Grounded in Relational Frame Theory (RFT), this symposium presents an integrated sequence of experimental and translational studies examining how specific relational components of metaphor affect the transformation of stimulus functions, avoidance behavior, and clinically relevant outcomes. The first presentation offers a basic experimental model of metaphor unidirectionality, analyzing how hierarchical relations and representativeness determine the direction of functional transformations across relational networks. Building on this foundation, the second presentation investigates how ACT-consistent metaphors influence avoidance behavior and stimulus valence in laboratory analogs, emphasizing the role of hierarchical and value-based relational framing. The final presentation extends this work to pain tolerance using cold-pressor paradigms, manipulating augmental functions, shared physical properties, and cultural adaptation to identify variables that enhance psychological flexibility. Together, these studies clarify the relational conditions under which metaphors influence behavior and strengthen translational bridges between basic research and clinical intervention in ACT.

- *Modeling Metaphor Unidirectionality Through Hierarchical Representativeness: A Relational Frame Theory Account*

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Eduar S. Ramírez, Universidad Villanueva

Andrés Peña-Vargas, Fundación Universitaria Konrad Lorenz

A classic distinction between analogy and metaphor is that analogy is bidirectional, whereas metaphor is unidirectional. From a relational frame theory (RFT) standpoint, this difference might be related to the transformation of functions through coordination versus hierarchical relations. This study aimed to model the role of hierarchical functions (i.e., representativeness) in determining metaphor unidirectionality. Participants were randomly assigned to an experimental or control condition. In both conditions, equivalence classes were established using nonsense syllables through respondent and productive training, and stimulus characteristics (i.e., professions, nationalities, and personality characteristics) were subsequently conditioned. In the experimental condition, all members within each class share a uniform characteristic (e.g., "bossy" or "playful"), whereas in the control condition, each member is associated with a unique characteristic. Productive and receptive tests assessed the directionality of the transformation of functions when novel "X are Y" relations were established between classes. Classes with uniform representative features yielded bidirectional transformations, whereas pairs involving mixed-feature classes yielded unidirectional transformations, thereby modeling the metaphorical pattern.

- *Metaphors in ACT: Isolating Functional Components of Metaphor-Based Interventions*

Roberta Kovac, Instituto Par Educação

William F. Perez, Instituto Par Educação/ INCT-ECCE

Mathias Miklos, Instituto Par Educação

Understanding how metaphors influence behavior is central to advancing process-based interventions in Acceptance and Commitment Therapy (ACT). From a Relational Frame Theory (RFT) perspective, metaphors may alter avoidance patterns through transformations of stimulus functions embedded within relational networks. This translational research examined how specific relational components of metaphors affect avoidance behavior and stimulus valence using laboratory analog paradigms. In Experiment 1, 78 adult participants completed conditional discrimination and equivalence training tasks, followed by the establishment of aversive stimulus functions and an avoidance task involving point gain or avoidance

responses. After baseline assessment, participants were assigned to a "Photo Album" metaphor intervention or control text. Results showed limited effects, with modest changes in stimulus valence and no significant reductions in avoidance responses. Experiment 2 included 20 adults exposed to a relationally enriched version of the metaphor incorporating hierarchical deictic framing and value-based augmentals. Using the same tasks and avoidance paradigm, results indicated systematic reductions in avoidance responses for several participants, despite minimal changes in self-report measures. Findings highlight the importance of hierarchical and value-oriented relational networks in producing meaningful behavioral effects.

- *Experimental Analyses of Metaphor Effects on Pain Tolerance: Augmental Functions, Physical Properties, and Cultural Adaptation*

Beatriz Galli, Instituto Par Educação/Universidade Presbiteriana Mackenzie

William Ferreira Perez, Instituto PAR Educação /INCT-ECCE

Cassia Roberta da Cunha Thomaz, Instituto Par Educação/Universidade Presbiteriana Mackenzie

Experiential avoidance is a functional transdiagnostic process implicated in multiple forms of psychological distress. Within Acceptance and Commitment Therapy (ACT), metaphors are frequently used to alter this behavioral pattern, and their effects can be experimentally modeled using pain-induction paradigms such as the cold-pressor task. The present research program examines how specific features of metaphors influence pain tolerance. In Experiment 1, eighty-one participants completed a cold-pressor task before and after exposure to one of four metaphor conditions manipulating (a) shared physical properties between the metaphor and the painful experience and (b) the specification of appetitive augmental functions. Results indicated that only appetitive augmentals reliably increased pain tolerance, diverging from prior findings in which both variables were effective. Experiment 2 extends this work by testing the roles of shared physical properties and cultural adaptation of metaphors in a 2x2 factorial design, while also assessing psychological flexibility and physiological responses. Preliminary data from this experiment will be presented and discussed in relation to the earlier findings.

Educational Objectives:

1. Describe core relational processes underlying metaphor effects from a Relational Frame Theory perspective and explain how hierarchical framing and augmental functions influence behavior change in Acceptance and Commitment Therapy.
2. Analyze experimental and translational findings on metaphor-based interventions to identify relational components that influence avoidance, stimulus valence, and pain tolerance.
3. Apply empirically supported principles derived from experimental metaphor research to select and design metaphor-based clinical interventions that strengthen psychological flexibility and reduce experiential avoidance in applied ACT contexts.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**40. Flex for the Planet!**

**Symposium** • 15:15 - 16:30

Translation: Not available

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

Categories: Environmental problems, Behavior analysis, Eco-Anxiety, Psychological Flexibility, Polycrisis, Youth, Climate Distress/Anxiety, Climate Resilience, Mindfulness, Interconnectedness, Empowerment, Action, Experiential ACT-Informed Course, Pro-Environmental Behaviour Change, Pro-Environmental Behaviour, Cultural Systems Analysis, Asthma

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C225**

Ahmet Nalbant, M.D., Private Practice

Emma Delemere, Ph.D., BCBA, Dublin City University

Viveka Ramel, Ph.D., Sevitar and University of California Eco-Resilience Group

Alex Neuroth, B.Sc., Dublin City University

Leyre Alonso Valdivia, Ph.D., Dublin City University

Environmental challenges demand adaptive, values-driven action. This symposium highlights how psychological flexibility and contextual behavioral science can transform eco-anxiety, avoidance, and rigid behaviors into proactive engagement. Presentations showcase strategies at multiple levels:

individuals cultivating resilience and value-aligned action, communities and organizations applying cultural systems analysis to reduce waste and pollution, and tools to support sustainable decision-making in everyday life. Attendees will explore how flexibility processes interact with broader ecological and social systems, enabling behaviors that benefit both people and planet. Practical implications for interventions, policy, and education will be discussed, emphasizing actionable pathways for supporting sustainable behavior change.

- *Psychological Flexibility in Eco-Anxiety: A Qualitative Typology Study*

Meryem Demir Gdl, Ph.D., Istanbul Kultur University  
 Didem Varol, Ph.D., Istanbul Kultur University  
 Beril Eser Odabaşı, M.A., Changes GGZ  
 Deniz Ceren Uzun, M.A., İstanbul Bilgi University  
 Meryem Kart, Bournemouth University  
 Ahmet Nalbant, Ph.D., Private Practice

This study examines psychological responses to the climate crisis within the context of eco-anxiety and explores how these experiences are patterned through psychological flexibility and inflexibility processes using a qualitative approach. Semi-structured online interviews were conducted with 20 participants from diverse demographic backgrounds. Data were analyzed using an abductive analytic strategy that iteratively integrated data-driven exploration with theoretical interpretation, combining reflexive thematic analysis with process-based typology development. ACT processes were not used as predefined categories but as sensitizing concepts guiding interpretation of emergent patterns. Findings indicate that eco-anxiety is a multidimensional experience involving cognitive, emotional, and embodied components, and that participants' relationships with climate-related distress fluctuate along a context-sensitive continuum between flexibility and rigidity. Comparative analysis identified three relatively stable process profiles: (1) Value-oriented committed actors, who frame anxiety as a source of value-based action; (2) Cognitively fused avoiders, characterized by perceived ineffectiveness and experiential avoidance; and (3) Oscillating regulators, who shift between flexible and rigid processes depending on contextual demands. Results suggest eco-anxiety functions as a contextual regulatory process shaped by values-based engagement.

- *Beyond Self and Separateness: Psychological Flexibility, Connection and Collective Action for People and Planet: Climate Justice and Action SIG and San Francisco Bay Area Chapter Sponsored*

Viveka Ramel, Ph.D., Sevitara and University of California Eco-Resilience Group

Living in a time of intensifying human made polycrisis weighs heavily on many hearts and minds today. With a majority of youth across the globe describing humanity as doomed and reporting anxiety, anger and hopelessness about climate change, it is imperative to sculpt a path of active hope and resilient adaptation for our shared future. An ACT-informed experiential climate resilience course designed and implemented across 10 University of California campuses has done exactly that, fostering (1) presence via mindfulness, communication, and psychological flexibility practices, (2) interconnectedness via community-based participation and nature immersion, and (3) empowerment via prosocial and proenvironmental action projects. Results from two cohorts (150 and 220 students, respectively, and 60 controls) assessed pre/post-course and at 5-month follow-up showed significantly reduced climate distress (as measured by Climate AAQ), depression, anxiety, stress, hopelessness and climate loneliness, and increased climate self-efficacy, community belonging and actions to combat climate change (results from the first cohort published in Epel et al., 2025). This course holds promise in enhancing youth mental health, connection and climate action.

- *Safeguarding Future Food Systems with CBS: Applying Cultural Systems Analysis to Reduce Fungicide Use on Irish Farms: Climate Justice and Action SIG Sponsored*

Alex Neuroth, Dublin City University  
 Emma Delemere, Ph.D., Dublin City University

Safeguarding crops from diseases like late blight is vital for a resilient food system, with 125 million tonnes of crops lost annually to disease. Current safeguarding approaches rely heavily on fungicides, posing significant environmental risk. The AgSense project aims to reduce fungicide use on Irish farms through real-time forecasting and in field-testing, allowing for risk-responsive targeted spraying programmes. To achieve this, fulsome understanding of the contingencies surrounding disease management on Irish farms is required. A metacontingency analysis of crop disease-management behaviour was undertaken through literature review, qualitative interviews with key stakeholders (n=9; i.e. farmers, agronomists), and a policy desk review, with socio-interlocking behaviours, aggregate products, community practices and group-rules mapped. Farmers' decisions appear shaped by fear of crop loss and trust in advisors, producing avoidance-based, authority-mediated rule control (e.g., routine spraying) and limiting behavioural variability. However, value-consistent augmentals (autonomy,

accuracy, competence) and direct contact with environmental cues (crop observation) may support more flexible repertoires. These key contextual factors will be leveraged within tailored interventions, supporting uptake of the AgSense solution and reductions in fungicide application.

- *Can CBS Solve Fast Fashion? Reducing Textile Waste Using Cultural Systems Analysis: Climate Justice and Action SIG Sponsored*  
Cody Byrne, Dublin City University  
Emma Delemere, Ph.D., Dublin City University

Responsible for more global CO2 emissions than aviation and shipping combined, climate impacts from textile production and disposal are a global challenge. While there is increasing pressure to reduce post-consumer waste, interventions lack fulsome consideration of the functional relations underlying textile end-of-life behaviours. Cultural systems analysis offers a promising means to examine the contingencies impacting textile waste, allowing researchers to pinpoint key variables to bring about meaningful behavioural change. A series of interviews (clothing/textile stakeholders=12; consumers=11), surveys (n=119), and focus groups (designers=72; consumers=61) were conducted to examine the metacontingencies surrounding textile waste at end-of-life. Data was analysed in line with a cultural systems approach, with findings used to design two interventions targeting (a) consumer purchasing/disposal behaviours, and (b) designers' material choices. Positive reductions in waste disposal behaviours were found at 2 month follow-up, with a 32% increase in consumer textile recycling post-workshop, alongside a 3% reduction in landfill. For designers, 57% of participants demonstrated increased end-of-life planning behaviours in design at follow-up. Overall, results obtained demonstrate the potential of cultural systems analysis to reduce textile waste through targeted behavioural interventions.

- *Air Quality and Health: Mapping the Behavioural Contingencies Surrounding Engagement with Bioaerosol Forecasts*  
Leyre Alonso Valdivia, Ph.D., Dublin City University  
Emma Delemere, Ph.D., Dublin City University

Air quality is a global problem linked to millions of deaths every year. Poor awareness of air quality and how it impacts health poses a barrier to preventive action. Bioaerosol forecasts are a common means through which information on air pollution is shared, however these are often not presented in a manner that best supports pro-active health behavioural change. To address this a map of the behavioural contingencies surrounding engagement with bioaerosol forecasts and associated health mitigating behaviours was developed using the COM-B model, leveraging findings from behavioural surveys (n=1453) alongside individual and group qualitative interviews (n=19). Results indicated a reliance on negative reinforcement to maintain health behaviours around air quality, with behaviour is driven by avoidance of further symptoms. This is compounded by an absence of positive reinforcement for engaging with currently available forecasts, due to a lack of timely, localised information which can inform health behaviours, resulting in experiential and behavioural avoidance. Overall, results highlight the potential avenues to enhance air quality forecasts to encourage behavioural change among people with respiratory conditions.

#### Educational Objectives:

1. Differentiate key psychological flexibility and inflexibility processes (Open, Centred, Engaged) as they emerge in eco-anxiety experiences based on qualitative typology findings.
2. Analyse the role and significance of leveraging value-consistent augmentals for intervention adoption.
3. Apply cultural systems analysis to address complex social challenges.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **41. Helping Neurodivergent Clients Explore the Value of Connection Within Romantic and Sexual Relationships**

**Workshop** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review*

Categories: Clinical intervention development or outcomes, Professional development, Neurodivergence

*Target Audience: Beginner*

**Location: C254**

River Farrell, Psy.D., Michigan School of Psychology

Neurodivergent individuals often endorse relational values such as intimacy, and emotional closeness within romantic and sexual relationships. However, these values are often expressed through communication styles, and relational expectations that differ from neurotypical norms. Clinicians who lack familiarity with neurodivergent communication patterns may encounter challenges when supporting clients as they navigate interpersonal complexities while striving to build meaningful, values-consistent relationships. Misunderstandings related to communication differences can create additional barriers to establishing and maintaining clear, informed, and ongoing sexual consent, increasing vulnerability to relational distress or harm. This workshop introduces a clinical framework grounded in Acceptance and Commitment Therapy (ACT) to support neurodivergent clients in exploring and expressing connection within romantic and sexual relationships. Participants will examine how relational framing, rule-governed behavior, and experiential avoidance influence communication, intimacy, and consent negotiation. The workshop will provide practical, affirming strategies designed to enhance psychological flexibility, strengthen values clarification, and improve perspective-taking across neurotypes. Particular emphasis will be placed on supporting clients in developing explicit, collaborative, and autonomy-affirming consent communication practices that promote safety, mutual understanding, and relational satisfaction

#### Educational Objectives:

1. Describe how neurodivergent communication styles, sensory experiences, and relational learning histories may influence expressions of intimacy, connection, and sexual consent within romantic and sexual relationships.
2. Explain key processes within Acceptance and Commitment Therapy (ACT), including psychological flexibility, relational framing, and experiential avoidance, as they relate to communication and consent negotiation for neurodivergent clients.
3. Apply ACT-consistent clinical strategies to support neurodivergent clients in clarifying relational values, enhancing perspective-taking across neurotypes, and developing explicit, collaborative, and autonomy-affirming consent communication practices.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### **42. Menopause as Transition: A Practical ACT and Compassion-Focused Approach**

**Workshop** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Didactic presentation, Experiential exercises, Original data*

Categories: Supervision and training, Women's Health

Target Audience: *Beginner, Intermediate*

**Location: C302**

Lindakristin Kempe, Ph.D. (C), Université Côte d'Azur  
Isabelle C.M. Leboeuf, Ph.D., University of Lille

Menopause is typically conceptualized as a set of medical or psychological symptoms. Yet, within contextual behavioral science, menopause can be more accurately understood as a developmental life transition involving biological change, identity reorganization, sociocultural stigma, and interoceptive uncertainty.

Preliminary mediation findings from our clinical trial indicate that psychological flexibility accounts for the association between menopausal symptoms and psychological distress, suggesting that distress is shaped by how women relate to these experiences, supporting flexibility as a central therapeutic process. Converging evidence shows that self-compassion is associated with emotional well-being and weakens the link between vasomotor symptoms and functional impairment.

This experiential workshop, co-facilitated by an ACT expert and a CFT specialist, introduces an integrated approach for supporting perimenopausal women. Participants will explore how distress is maintained by experiential avoidance, shame processes, self-critical coping, and disrupted value-based identity structures, and will learn how flexibility and compassion-based interventions work synergistically to support adaptive identity transitions. Experiential exercises, case conceptualization, and clinical demonstrations will provide practical tools applicable to menopause and midlife developmental challenges

Educational Objectives:

1. Describe how psychological flexibility and self-compassion mediate the relationship between perimenopausal experiences and psychological distress, and reframe menopause as a developmental transition rather than a medical syndrome.
2. Analyze how experiential avoidance, shame processes, and self-critical coping maintain distress during perimenopause and disrupt value-based identity structures.
3. Demonstrate integrated ACT and CFT interventions that target psychological flexibility and self-compassion to support adaptive identity transitions during perimenopause.

**CEs Available (1.25):** [CEs for Psychologists](#)

Thursday Afternoon Plenary 16:45

**43. Epistemic Trust and Trauma: Pernicious Impact and Therapeutic Solutions – A Mentalization-Based Treatment Approach**

**Plenary** • 16:45 - 17:45

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Conceptual analysis*

Categories: Clinical intervention development or outcomes, Processes of change

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Merieux (Overflow Rooms: Weil, Aristote, Perroux)**

Peter Fonagy, Ph.D., University College London

Introduced by: *Steven C. Hayes, Professor, PsychFlex*



Trauma is often understood in terms of overwhelming affect, disrupted attachment, or traumatic memory. Increasingly, however, it can also be understood as an epistemic injury: a disruption in the capacity to learn from other people. Experiences of abuse, neglect, humiliation, coercion, or chronic misattunement may undermine not only trust in specific individuals but confidence in communication itself, leaving people uncertain about whether information from others is relevant, reliable, or safe to use.

From this perspective, many of the difficulties associated with trauma can be understood as consequences of disturbances in epistemic trust. Individuals may become hypervigilant and dismiss potentially helpful information, or become excessively credulous and vulnerable to exploitation. In either case, opportunities for adaptive social learning are compromised.

This presentation will explore the relationship between trauma, mentalizing, attachment, self-other differentiation, and epistemic trust within a contemporary Mentalization-Based Treatment (MBT) framework. Drawing on developmental research, social cognition, psychotherapy process research, and clinical experience, it will consider how trauma disrupts the capacity to benefit from interpersonal communication and how psychotherapy may help restore this capacity.

The presentation will focus on practical therapeutic implications, describing how therapists can foster epistemic trust through curiosity, collaboration, validation, transparency, and the repair of misunderstandings. Rather than viewing psychotherapy primarily as the transmission of insight, the talk will suggest that one of its most important functions is to restore a person's capacity to learn from others and to use new social experiences in the service of recovery and growth

Educational Objectives:

1. Describe how traumatic experiences can disrupt epistemic trust and interfere with adaptive social learning.
2. Explain the relationships among mentalizing, attachment, self-other differentiation, and epistemic trust within a contemporary MBT framework.
3. Identify practical therapeutic strategies for fostering epistemic trust and promoting psychological change in individuals affected by trauma and related difficulties.

**CEs Available (1.25):** [CEs for Psychologists](#)

## Program Detail • Friday • 17 July

Friday Morning 9:00

**44. Progressing Research on PBT: Discussing Challenges and Lessons Learned****Panel** • 9:00 - 10:15

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Didactic presentation, Strategic planning*Categories: Clinical intervention development or outcomes, Processes of change, PBT*Target Audience: Beginner, Intermediate***Location: Merieux**

Michael Levin, Ph.D., Utah State University

Steven C. Hayes, Professor, PsychFlex

Andrew Gloster, Ph.D., University of Luzern

Lance M. McCracken, Ph.D., Uppsala University; Centre for Biomedical Research in Epidemiology and Public Health (CIBERESP)

Joanna J Arch, Ph.D., University of Colorado Boulder

Process-based therapy (PBT) is a pivotal development in the application of CBS to psychological interventions. PBT provides a common framework to bring together researchers and practitioners across therapeutic approaches, shifting from treatment packages to processes, and guiding radical shifts to how treatments are developed and studied. This work is in an early phase with key challenges to address as PBT research progresses. For example, assessment methods are needed to guide personalization of treatment for each individual based on relevant processes that are precise, clinically useful, and practical. PBT highlights inherent limitations of purely normative approaches based on aggregates, requiring methodological advances to guide prediction and influence of behavior idiographically in ways that can be organized into broader insights. Scientific strategy is needed to progressively build knowledge enabling treatment personalization and to implement PBT in ways that navigate systems-level challenges and unmet needs for mental health care. This panel will explore challenges to be addressed for progressing PBT research, discussing lessons learned from PBT research and innovative ideas for next steps to move PBT research forward.

Educational Objectives:

1. Describe key challenges to conducting process-based therapy research.
2. Identify novel methods and approaches to engage in process-based therapy research.
3. Design research studies to test process-based therapy objectives and questions.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs**45. At the Heart of Pain: Therapist Psychological Flexibility in Psycho-Oncology Practice: Türkiye Chapter Sponsored****Workshop** • 9:00 - 10:15

Translation: AI online with your phone - audio or text

Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*Categories: Processes of change, Methods/approaches for individual variation, Psycho-Oncology*Target Audience: Intermediate***Location: Gounot**

Sevinç Ulusoy, M.D., Private Practice

Ela Ari, Ph.D., Istanbul Medipol University

Clinical encounters in psycho-oncology frequently involve anticipatory grief, death, treatment-related disruptions, and repeated exposure to physical vulnerability. From a Contextual Behavioral Science perspective, the core difficulty in psycho-oncology work is not the presence of painful internal experiences, but how therapists relate to these experiences while continuing to engage in values-guided therapeutic action. Processes such as experiential avoidance, cognitive fusion with helplessness

or inadequacy narratives, rigid professional self-concepts, and unexamined self-sacrifice may emerge in response to these demands and inadvertently narrow therapeutic presence and sustainability.

This workshop offers an ACT-informed and compassion-integrated framework to support therapist psychological flexibility in psycho-oncology. The workshop conceptualizes therapist distress as a function of contextual demands and teaches concrete strategies for responding more flexibly and compassionately to one's own internal experiences. Through experiential exercises, guided reflection, and brief skills practice, participants will learn how to support themselves in staying present with difficult emotional material, acknowledging personal limits and vulnerability, and maintaining values-consistent engagement when working with serious illness, dying, and loss.

Educational Objectives:

1. Identify and functionally conceptualize key contextual stressors in psycho-oncology practice and their impact on therapist psychological flexibility using an ACT and Contextual Behavioral Science framework.
2. Identify and differentiate therapist-level psychological inflexibility processes that commonly arise when working with cancer-related suffering, illness, and death.
3. Apply ACT- and self-compassion-informed strategies to enhance their own psychological flexibility, including skills for staying present, responding compassionately and sustaining values-consistent therapeutic engagement in psycho-oncology care.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

#### 46. CBS as a Design Framework for Artificial Intelligence

Panel • 9:00 - 10:15

Translation: Not available

Components: *Conceptual analysis, Original data*

Categories: Mobile or digital technology, RFT / RGB / language, Artificial Intelligence

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Robert Johansson, Ph.D., Massachusetts Institute of Technology  
Mike K Kemani, Ph.D., Karolinska University Hospital; Karolinska Institutet

As artificial intelligence becomes increasingly integrated into contextual behavioral interventions, much attention has focused on applications and ethical oversight. This panel shifts the discussion to a foundational question: can contextual behavioral science (CBS) serve not only as guidance for AI use, but as a framework for AI system design?

Panelists will examine how core CBS commitments—including functional contextualism, process-based modeling, psychological flexibility, and contextual sensitivity—can function as conceptual constraints shaping AI architecture, representation, and evaluation. Particular emphasis will be placed on representing context and relational dynamics computationally, supporting interpretability and mechanistic transparency, and enabling value-sensitive decision-making under uncertainty. Drawing from relational frame theory and contemporary computational approaches, the discussion will explore how psychological processes can be modeled without reification or reductionism.

From a functional contextualist perspective, AI alignment is framed not as encoding fixed moral directives, but as establishing functional relations that support value-consistent behavior across changing environments. The session clarifies what a CBS-grounded approach to AI design and alignment would require at the architectural level.

Educational Objectives:

1. Describe how core CBS principles (e.g., functional contextualism and process-based modeling) can function as design-level constraints in the development of AI systems.
2. Analyze key architectural considerations involved in representing contextual and relational processes computationally.
3. Explain how a functional contextualist perspective reframes AI alignment as the establishment of value-consistent functional relations rather than the imposition of fixed rules or objective functions.

**CEs Available (1.25):** [CEs for Psychologists](#)

**47. Agency & Mental Health: Enactive Perspectives, Sensory Devices, and Mindfulness****Symposium** • 9:00 - 10:15

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Case presentation, Conceptual analysis, Literature review*Categories: Health / behavioral medicine, Processes of change, Mindfulness, AgencyTarget Audience: *Intermediate***Location: Mouterde**

Discussant: Marion Trousselard, M.D., Ph.D., HDR, Ecole des psychologues praticiens

Lionel Strub, Doctorat, École de Psychologues Praticiens

Ludivine Nohales, M.D., Hospices Civils de Lyon - Université Lyon 1

Vladimir Adrien, M.D., Ph.D., AP-HP, Avicenne Hospital, Department of Child, Adolescent and General Psychiatry

Margot Moissonnier, ClinPsy, Hôpital Paul Guiraud

This symposium aims to explore agency as a central functional process in mental health by articulating enactive perspectives with contextual behavioral sciences. In continuity with process-based models and psychological flexibility (Hayes et al., 2012), we examine the hypothesis that the sense of acting constitutes a transdiagnostic mechanism of regulation, adaptation, and identity reconstruction across professional, academic, and clinical contexts.

Drawing on embodied interventions, mindfulness, sensory devices, and experiential practices, the contributions investigate how agency can be restored, trained, and contextually shaped. The contributions will be discussed in light of their implications for process-based models within ACBS, proposing that agency be considered a trainable, contextually situated process that may play a central role in mechanisms of change in mental health.

- *Experiential Mindfulness for Students*

Lionel Strub, Ecole des Psychologues Praticiens

Lionel Strub will develop a theoretical and practical reflection based on experiential training programs in mindfulness with psychology students. He will discuss how certain parameters of these programs can support agency by fostering emotional regulation, reflective appropriation of internal experiences, and the gradual construction of a more embodied professional identity throughout the academic curriculum.

- *Mindfulness for Hospital*

Ludivine Nohales, HCL

Ludivine Nohales will present the PROMIND program, implemented in a hospital setting (HCL). A mixed-method evaluation (burnout, work engagement, emotional regulation, sense of agency), complemented by a realist approach, allows for the analysis of mechanisms of change at both individual and organizational levels over time.

- *Agency for PTSD and Sensory Devices*

Vladimir Adrien, APHP

Vladimir Adrien will propose an enactive reading of post-traumatic stress disorder, conceptualized as a disruption of perception–action coupling and the sense of acting. Drawing on clinical data and pilot studies integrating sensory devices (including sonification), he will discuss their effects on dissociation, physiological regulation, and the restoration of agency.

- *Patient Experience and Embodied Devices*

Margot Moissonnier, Université de Lorraine, INSPIIRE

Margot Moissonnier will present her doctoral research on patient experience in military contexts, showing how embodied therapeutic devices support identity reconstruction and re-engagement in action following trauma.

Educational Objectives:

1. Explain how agency can be conceptualized as a transdiagnostic process underlying regulation, adaptation, and identity reconstruction across clinical, academic, and professional contexts.

2. Explain how embodied, mindfulness-based, and sensory interventions can restore or strengthen the sense of acting in individuals experiencing psychological distress or trauma.
3. Explain how enactive perspectives and contextual behavioral sciences be integrated to advance process-based models of change in mental health, particularly within the ACBS framework.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### **48. Self-as-Context: From a Head-Scratching Concept to Confident Clinical Practice**

**Workshop** • 9:00 - 10:15

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, Processes of change, ACT Processes

*Target Audience: Intermediate*

**Location: Weil**

Beate M. E. Ebert, Clinical Psychologist, Private Practice

How we relate to ourselves and others—in kind, nurturing, or painful, invalidating ways—is central to our wellbeing. Self-as-context is key here, yet often experienced as abstract, confusing, or hard to apply in everyday practice. Drawing on the new book "Self-as-Context in Therapy: Help Your Clients Build a Flexible Self with ACT" (Ebert, 2025), this workshop offers a clear, clinically grounded pathway from concept to competent application.

We will explore the development of the self from a CBS perspective, how to recognize disruptions in this process, and which aspects of the self to target to improve treatment outcomes.

The workshop introduces two foundational capacities for a flexible sense of self:

1. the ability to notice and name internal and external experiences, and
2. perspective-taking—the awareness of experiencing from "I-here-now" while recognizing that others have their own perspective.

Through experiential exercises linked to self-as-process, self-as-content, and self-as-context, participants will experience SAC firsthand and leave with practical, ready-to-use tools. The approach also highlights how SAC mirrors the therapeutic process, fostering greater presence, efficiency, and relaxation in clinical practice.

Educational Objectives:

1. Demonstrate the development of a flexible sense of self from a CBS perspective, analyze common developmental breakdowns, and apply strategies to address these patterns in clinical practice.
2. Demonstrate the ability to train others (clients, workshop attendees) successfully to adopt more flexible perspectives on themselves by loosening rigid self-content and strengthening self-as-process and self-as-context capacities through targeted exper
3. Apply self-as-context as a guiding process for the therapeutic relationship itself, using it to cultivate greater presence, relaxation, and effectiveness in their clinical work.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### **49. The Matrix with Teens**

**Workshop** • 9:00 - 10:15

Translation: AI online with your phone - audio or text

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

Categories: Methods/approaches for individual variation, Clinical intervention development or outcomes, Adolescents

*Target Audience: Intermediate, Advanced*

**Location: Aristotle**

Erin Pressman, LCSW-C, Kennedy Krieger Institute, True North Therapy and Training  
Miranda Morris, Ph.D., True North Therapy and Training  
Aria E Jaye, B.S., The University of Chicago Crown Family School

Working with adolescents can be both frustrating and deeply fulfilling within ACT-based practice. The ACT Matrix is a powerful tool for making core ACT processes more concrete, visual, and accessible for clients—particularly teens. When thoughtfully adapted, the Matrix can support collaboration, engagement, and psychological flexibility during this important developmental stage.

In this workshop, participants will learn how to adapt the ACT Matrix for adolescent clients and practice using it as an in-session, collaborative tool. Through experiential exercises, demonstration, and practice, clinicians will gain practical strategies for using the Matrix to effectively engage teens and support values-based change.

Educational Objectives:

1. Create a modified version of the Matrix that is developmentally appropriate for adolescent clients
2. Explain how to use the ACT Matrix in session with adolescents.
3. Design strategies to integrate the ACT Matrix into ongoing therapeutic work with adolescents.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### 50. ACT in Nature: Canada - Québec Chapter Sponsored

**Workshop** • 9:00 - 10:15

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Experiential exercises, Role play*

Categories: Clinical intervention development or outcomes, Professional development, Mindfulness

*Target Audience: Beginner, Intermediate*

**Location: Perroux**

Moire Stevenson, Ph.D., Mindfulness Outdoors

We are increasingly disconnected from nature at the cost of our wellbeing. This workshop introduces clinicians to ACT in Nature, a training program that integrates Acceptance and Commitment Therapy (ACT) with nature, and adventure-based, and somatic/polyvagal informed approaches. Participants will learn how ACT processes can guide outdoor approaches, including walk and talk therapy, nature-based mindfulness, and experiential activities embedded in the environment. Research shows that natural environments enhance attention and cognitive flexibility (Berman et al., 2008), reduce rumination and stress (Bratman et al., 2015), and foster emotional openness in therapy (Revell & McLeod, 2016). Emerging work integrating ACT with outdoor and adventure-based interventions demonstrates promising gains in psychological flexibility and wellbeing (Tracey et al., 2018). In this workshop, we will show the participants how we translate this evidence into practice through nature-adapted exercises, outdoor-inspired role plays, and tools that help clinicians cultivate a collaborative relationship with nature throughout their work. Attendees will leave inspired to take their ACT practice outdoors, equipped with a practical, nature informed toolbox ready for immediate use.

Educational Objectives:

1. List various ways to integrate ACT with nature-based and outdoor therapeutic activities.
2. Design simple experiential exercises that incorporate mindfulness, somatic awareness, and polyvagal-informed approaches involving nature or outdoor sports.
3. Apply practical strategies to help clients engage with and use ACT processes, including psychological flexibility, in outdoor therapy sessions.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 51. The Dog Ate My Homework!: Taking a FAP-Informed Approach to DBT Accountability Strategies: USA - Mid-Atlantic Region Chapter Sponsored

**Workshop** • 9:00 - 10:15

Translation: Not available

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

Categories: Professional development, Clinical intervention development or outcomes, Therapy HW, DBT, FAP

*Target Audience: Intermediate, Advanced*

**Location: Aubert**

Christina Fox, MSW, The Watershed Practice  
Call Trevenen, M.S, The Watershed Practice

Homework is a cornerstone of behavioral therapy, yet client difficulties with completing it can shape clinicians out of asking for it, or even assigning it (Ryum, Bennion & Kazantzis, 2023). Functional Analytic Psychotherapy (FAP) provides a framework to consider such challenges in their relational context, and Dialectical Behavior Therapy (DBT) offers protocols to address such therapy-interfering behaviors. When utilized in tandem, accountability regarding missed homework becomes an opportunity to evoke and reinforce clinically relevant behaviors. Reinforcement is most effective when it occurs in close proximity to the desired behavior, meaning that homework incompleteness holds powerful potential to expand a client's capacities for accountability to relational commitments, recontextualize previously-punished behaviors, and increase intimacy (Cordova & Scott, 2001). This workshop will utilize didactics, experiential exercises, and role-play to explore this intersection of FAP and DBT by teaching participants to conceptualize homework as vulnerable behavior, assess homework incompleteness using functional analysis strategies drawn from both DBT and FAP, and problem-solve not just collaboratively, but relationally with clients, honoring cultural context, issues of diversity, and learning history.

Educational Objectives:

1. Assess homework completion through a FAP lens and list DBT strategies to sensitively and skillfully assess barriers to homework.
2. Demonstrate behavioral chain analysis, problem-solving and relational approaches to common homework challenges.
3. Describe their own private experiences that set the stage for avoiding holding clients accountable to incomplete homework.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**52. It's EPPC! Introducing an ACT-informed Model of Therapeutic Change in Psychedelic-Assisted Therapy: Psychedelic and Non-Ordinary States of Consciousness SIG Sponsored Workshop** • 9:00 - 10:15

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation*

Categories: Clinical intervention development or outcomes, Processes of change, Psychedelic-Assisted Therapy, Psychedelics

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Maldiney**

Brian Pilecki, Ph.D., Portland Psychotherapy, Portland Institute for Psychedelic Science  
Temple Morris, LCSW-C, True North Therapy & Training  
Jason Luoma, Ph.D., Portland Institute for Psychedelic Science

This workshop presents a novel clinical model specifically adapted for psychedelic-assisted therapy. The EPPC model (Embodiment, Perspective, Purpose, Connection; pronounced "Epic") draws from Acceptance and Commitment Therapy principles and is informed by emerging neuroscience and research that supports psychological flexibility as a key mechanism of change in psychedelic work.

The EPPC model provides clinicians with a structured framework for conceptualizing how psychedelic experiences catalyze therapeutic growth. Each core process—Embodiment, Perspective, Purpose, and Connection—maps onto ACT's psychological flexibility model while accounting for the unique phenomenology and transformative potential of psychedelic states.

This integration-focused workshop equips participants with practical interventions to enhance and consolidate therapeutic processes activated during psychedelic experiences. We will present the EPPC model and demonstrate assessment methods for identifying which processes were impacted during clients' journeys. Participants will learn specific ACT-informed integration techniques targeting each process, illustrated through clinical examples showing how to select interventions—such as deepening somatic awareness after embodiment-focused experiences—to consolidate therapeutic gains.

Educational Objectives:

1. Describe the four core processes of the EPPC model (Embodiment, Perspective, Purpose, Connection) and explain how each maps onto the ACT hexaflex.
2. Describe how to assess for EPPC processes that were activated during a client's psychedelic experience.
3. Identify three ACT-informed integration interventions based on EPPC process to enhance and consolidate therapeutic changes.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 53. Cultivating Psychological Flexibility in Behavioral Addictions: An ACT-Informed Approach

**Workshop** • 9:00 - 10:15

Translation: Not available

Components: *Case presentation, Didactic presentation, Experiential exercises, Literature review*

Categories: Clinical intervention development or outcomes, Addictions

Target Audience: *Intermediate*

**Location: C125**

Jennifer L Patterson, Psy.D., JPI Psychological Services, Inc.

Behavioral addictions such as problematic gambling, pornography viewing, compulsive shopping, and digital overuse often trap individuals in cycles of experiential avoidance, cognitive fusion, and disconnection from deeply held values. ACT offers a compassionate, evidence-based pathway out of these loops by cultivating psychological flexibility. Rather than framing recovery as abstinence or elimination, this workshop highlights ACT's distinctive approach: teaching clients to open up to difficult internal experiences, notice cravings and urges without judgment, and disentangle from rigid, self-defeating thoughts. Through mindfulness practices, metaphors, and experiential exercises, participants will explore how acceptance softens resistance, how defusion creates space from addictive thinking, and how values clarification anchors meaningful choices. The emphasis is on guiding clients toward committed, value-driven action even when discomfort or temptation is present so that recovery is not about suppression, but about living more fully and authentically.

Educational Objectives:

1. Identify and describe how experiential avoidance, cognitive fusion, and values disconnection contribute to cycles of behavioral addictions such as gambling, gaming, compulsive shopping, and digital overuse.
2. Apply ACT processes such as mindfulness, acceptance, and cognitive defusion to help clients observe addictive urges without judgement and reduce the impact of rigid, self-defeating thoughts.
3. Apply values clarification techniques to guide clients toward committed, value-driven actions, supporting meaningful behavior change even in the presence of cravings or discomfort.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### 54. When Life Is Rough: How Psychological Processes Shape Stress Responses, Valued Behavior, and Mental Health

**Symposium** • 9:00 - 10:15

Translation: Not available

Components: *Original data*

Categories: Processes of change, Social justice / equity / diversity, Stress, Psychological Processes, Psychological Flexibility, Valued Behavior, Stress Responses, Mental Health, Well-being, Social Media, Income Inequality, Minority Stress

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C154**

Chair: Julia Jeannine Schmid, Ph.D., University Of Lucerne

Discussant: Giovambattista Presti, Ph.D., University of Enna Kore

Larissa J Gonçalves, M.S., University Of Lucerne

Stella Brogna, M.S., VPF Universität Luzern  
Salvatore Corbisiero, Ph.D., Lucerne Psychiatry

In everyday life, people are exposed to diverse stressors that can impact behavior and mental health. This symposium explores how stressors – ranging from laboratory-induced stressors and social media triggers to perceived income inequality and minority stress – affect stress responses, valued behavior, and mental health, focusing on the interacting role of psychological processes. The first study examines whether psychological flexibility moderates the effects of physical, emotional, and social stressors on physiological, emotional, and behavioral responses. The second study develops an online paradigm using appearance-focused social media content as a stressor, assessing how it influences valued behavior. The third study explores how perceived income inequality affects well-being and how psychological flexibility shapes this association. The fourth study examines how minority stress affects mental health in transgender individuals through psychological processes. Together, these presentations capture diverse types of stress, reflecting the real-life experiences of different populations across varied situations. By highlighting the role of psychological processes, the symposium identifies key targets for supporting valued behavior and mental health under stress in prevention and intervention across contexts.

- *Stress Is Inevitable, but Responses Vary: Psychological Flexibility as a Moderator of Stress Effects on Physiological, Emotional, and Behavioral Responses*

Julia J. Schmid, Ph.D., University of Lucerne  
Sonja Borner, M.Sc., University of Lucerne  
Andrew T. Gloster, PhD., University of Lucerne

In everyday life, people face different types of stress, which can impair social functioning. Psychological flexibility, the ability to stay present and act in accordance with personal values, has been shown to buffer negative effects of stressors. However, it remains unclear whether it also moderates physiological stress responses and how it operates across different types of stress. Therefore, this study examines whether psychological flexibility moderates the impact of experimentally induced stressors on emotional and physiological stress responses (e.g. heart rate variability) and prosocial behavior. A total of 152 participants are assigned in triads to one of four stress-induction conditions (social, emotional, or physical stressor, or control), complete psychological questionnaires before and after stress induction, and participate in the Dictator Game to assess prosocial behavior, while physiological data are continuously recorded via a wearable. Data collection will be completed by the end of February. Hypotheses are evaluated using multiple regression. This study advances understanding of whether psychological flexibility mitigates physiological, emotional, and behavioral consequences of different types of stressors, informing the development of targeted interventions.

- *From Appearance Cues to Behavioral Choice: Empirical Validation of Social Media Stimuli and Approach and Avoidance Choice in an Online Paradigm*

Larissa Gonçalves Queiroz, M.Sc., University of Lucerne  
Andrew T. Gloster, PhD., University of Lucerne

Appearance-focused social media content frequently evokes upward comparison, self-criticism, and short-term avoidance tendencies. From a contextual behavioral science perspective, such content may function as antecedent cues that narrow behavior toward immediate relief at the expense of valued action. This study examines the empirical preparation of an online experimental paradigm by focusing on two core components: the validation of appearance-salient versus neutral social media stimuli, and the operationalization of approach-avoidance behavioral choice in an online context. Using a two-phase online design, participants are exposed to appearance-focused or neutral social media feeds and complete immediate post-trigger behavioral choice tasks and brief reaction measures. Analyses examine whether appearance-focused stimuli reliably evoke stronger appearance-related reactions than neutral stimuli, and how these lead to subsequent behavioral choices either towards a valued goal or away from an aversive content. Together, these findings establish the functional properties of the antecedent cues and the validity of the behavioral choice task, providing a solid methodological foundation for subsequent experimental work within a functional and contextual framework.

- *Paychecks and Beyond: How Psychological Flexibility Shapes the Association Between Perceived Income Inequality, Social Connectedness, and Mental Well-Being*

Stella Brogna, M.Sc., University of Lucerne  
David Weisstanner, Ph.D., University of Lucerne  
Andrew T. Gloster, Ph.D., University of Lucerne

Income inequality and social connectedness are critical determinants of mental health, influencing psychological well-being through distinct yet interconnected pathways. While objective indicators of inequality have been widely studied, the impact of perceived income inequality is less understood and may particularly affect social connections and mental wellbeing. This presentation will investigate the individual and combined effects of perceived income inequality and social connectedness on mental wellbeing, and the role of psychological flexibility as a moderator between these relationships. Data from a cross-sectional online survey will be examined. Participants will be recruited by a market research company, with data collection lasting five to six days and will be completed by the end of March. Preliminarily, the sample will consist of N = 2000 adults from the Swiss population, stratified by age, sex, education and language region. To investigate these associations, a moderated multiple regression model will be employed. The findings can clarify the relative importance of psychological flexibility and social connectedness in the association between perceived inequality and mental well-being, informing potential targets for mental health interventions.

- *From Stigmatization to Depression: Minority Stress Processes in Transitioned Transgender Individuals*

Salvatore Corbisiero, Lucerne Psychiatry  
 Tiziana Jäggi, University of Zurich  
 Lena Jellestad, University of Zurich, University Hospital Zurich  
 Dirk J. Schaefer, University of Basel, Basel University Hospital  
 Josef Jenewein, University of Zurich, University Hospital Zurich  
 Andres Schneeberger, Psychiatric Services Graubünden  
 Annette Kuhn, University Hospital Bern  
 David Garcia Nuñez, University of Zurich, University Hospital Zurich

Compared to the general population, transgender individuals are disproportionately exposed to discrimination and violence, contributing to elevated rates of depressive symptoms. These disparities can be understood as the result of interacting minority stress processes. The Gender Minority Stress Model (GMSM) provides a process-based framework distinguishing distal stressors (e.g., stigmatization), proximal stressors (e.g., internalized transphobia), and resilience-related processes.

Guided by the GMSM, this study examined mechanisms linking stigmatization experiences to depressive symptoms in transitioned transgender individuals. A total of 143 participants completed self-report measures of minority stress, resilience factors, and depressive symptoms. Correlational analyses and multiple regression models tested direct and indirect associations among these variables.

Results showed that unemployment, nonaffirmation of gender identity, and internalized transnegativity significantly predicted depressive symptoms. Proximal stressors mediated the association between distal stressors and depressive symptoms, indicating that external stigma affects mental health through internal psychological processes. No significant moderating effects of resilience factors were found.

These findings highlight the central role of minority stress processes in transgender mental health and emphasize the need to examine resilience as a process.

#### Educational Objectives:

1. Describe the role of psychological flexibility in moderating emotional, physiological, and behavioral responses to different types of stressors.
2. Analyze how perceived income inequality and social connectedness interact to influence mental wellbeing and explain the role of psychological flexibility as a moderator in these relationships.
3. Explain how minority stressors interact with resilience processes to influence depressive symptoms in transitioned transgender individuals.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 55. Equity and Inclusion in Context: CBS Applications Across Diverse Communities

**Symposium** • 9:00 - 10:15

Translation: Not available

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

Categories: Social justice / equity / diversity, ACT, RFT, Psychological Flexibility, Education, Neurodivergent

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

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

Discussant: Louise A McHugh, Ph.D., University College Dublin

Amrina Bhullar, M.Phil Clinical Psychology, Postgraduate Institute of Medical Education and Research, Chandigarh

Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin

Lauren Lawson, Ph.D., La Trobe University

This symposium explores how Contextual Behavioural Science (CBS) provides a theoretical and applied framework for understanding and promoting equity, diversity, and inclusion (EDI) across diverse populations. The four papers demonstrate how Relational Frame Theory (RFT) and Acceptance and Commitment Therapy/Training (ACT/ACTr) can help us understand the experiences of marginalized groups, promote EDI engagement, and inform inclusive interventions.

Dr Lynn Farrell will present findings from a project that developed and evaluated ACT skills workshops in Ireland to increase higher education staff's willingness to engage with gender EDI conversations and actions. Amrina Bhullar will demonstrate the cultural adaptability of an ACT model (DNA-V) for Indian adolescents, honouring cultural diversity while promoting psychological flexibility. Dr Alison Stapleton will explore how RFT can conceptualize neurodivergent self-narratives within contexts of minoritization. Finally, Dr Lauren Lawson will consider how self-as-context may strengthen identity-related wellbeing and psychological resilience for autistic people facing marginalisation.

Together, these presentations illustrate CBS's capacity to address contextual factors shaping marginalised experiences, while offering theoretically-grounded pathways toward EDI engagement and culturally responsive promotion of psychological flexibility.

- *Talk EDI to Me: Promoting Engagement in Gender Equity, Diversity, and Inclusion Conversations & Actions among Higher Education Staff*

Lynn Farrell, Ph.D., National College of Ireland  
 Amanda Kracen, Ph.D., National College of Ireland  
 Robert Fox, Ph.D., National College of Ireland  
 Orla Moran, Ph.D., Dundalk Institute of Technology  
 Avril Brandon, Ph.D., Maynooth University  
 Louise McHugh, Ph.D., University College Dublin

Gender equity, diversity and inclusion (EDI) remains a key focus of the academic landscape, particularly in Europe, however, engaging with EDI issues can be challenging. Even with standard EDI trainings, staff often feel uncomfortable and reluctant to talk about gender EDI issues (e.g., Blanchard et al., 2018). Trainings need to better address negative reactions (e.g., discomfort, shame) and potential avoidance of important EDI conversations and actions. Acceptance and Commitment Training (ACTr; Hayes et al., 2004) may help increase values-driven willingness to engage with gender EDI issues regardless of evoked uncomfortable internal experiences. The current research developed and delivered an ACTr skills workshop for academic staff in Irish higher education institutes to increase willingness to engage in gender EDI conversations and actions. One hundred participants took part (59 workshop, 41 waitlist control group). Psychological flexibility and related processes, feasibility and willingness to engage in and support gender EDI actions were assessed at 3 timepoints. The delivery of the workshop and evaluation results will be discussed, as well as implications for further development of the workshop.

- *Growing with Values: Culturally Adapted DNA-V Intervention for Adolescents in Indian Schools*

Amrina Bhullar, M.Phil., Postgraduate Institute of Medical Education and Research (PGIMER)  
 Krishan Kumar, Ph.D., Postgraduate Institute of Medical Education and Research (PGIMER)  
 Akhilesh Sharma, M.D., Postgraduate Institute of Medical Education and Research (PGIMER)  
 Nidhi Chauhan, M.D., DM, Postgraduate Institute of Medical Education and Research (PGIMER)  
 Louise McHugh, Ph.D., University College Dublin

Adolescent mental health challenges are a growing concern in India, particularly in government-funded school settings where access to psychosocial support is limited. Culturally responsive, developmentally appropriate interventions are needed to promote wellbeing and resilience. DNA-V, an Acceptance and Commitment Therapy-informed model for adolescents, targets values-guided behaviour, awareness, and adaptive responding to internal experiences. This study describes the cultural adaptation and evaluation of a DNA-V-based group intervention for adolescents in Indian government-funded schools. The intervention was adapted to reflect local language, examples, and sociocultural contexts relevant to Indian adolescents. Using a randomized controlled design, 64 adolescents were allocated to the intervention or a comparison condition. Outcomes included resilience, flourishing, emotional and behavioural symptoms assessed using the Child Behavior Checklist (CBCL), and feasibility indicators. Findings regarding feasibility and preliminary effects on adolescent wellbeing will be discussed, with implications for culturally adapting school-based mental health interventions in low-resource settings.

- *Something to Hold, Nothing to Cling To: Conceptualizing Neurodivergent Identities*  
Alison Stapleton, Ph.D., University College Dublin

From a Relational Frame Theory (RFT) perspective, the “self” is something we do, comprising three functionally distinct selfing repertoires that play central roles in identity formation. Given that “defending a conceptualized self is inherently dangerous” (Hayes, 1995, p. 95), and that attempts to evoke defusion can be experienced as invalidating, targeting identity processes presents unique challenges. Drawing on RFT, relational density theory, and a dynamical systems perspective, this conceptual paper outlines ways to conceptualize neurodivergent identity formation, proposing overarching goals of (i) shaping complex, personally meaningful stories and (ii) avoiding the imposition of any singular narrative of someone’s experience. This paper has implications for how professionals engage with minoritized identities in culturally responsive and sustaining ways.

- *Making Room for Autistic Identity Through Self-as-Context*

Lauren P. Lawson, Ph.D., La Trobe University  
Olivia Corda, La Trobe University  
Miranda Mirabile, La Trobe University  
Laura Broadbent, La Trobe University  
Simon Bury, Ph.D., La Trobe University

Autism is both a personal and social identity and the degree to which it is accepted and valued influences autistic individuals’ mental health. Autistic people face higher rates of bullying, victimisation and stigma, contributing to increased psychological distress. Despite these challenges, autistic people face barriers to accessing quality psychological care. This research sought to examine the applicability of the psychological flexibility component self-as-context (i.e., the observer self) with autistic adults and autistic identity. This study investigated whether teaching Self-As-Context (SAC) improves self-compassion and decreases shame in autistic adults compared to natural (spontaneous) coping strategies during the recount of a personally emotional event related to their autism identity. Ninety-three autistic UK adults recruited via Prolific were randomised to an 8-minute SAC skills video or a neutral documentary control. State self-compassion and shame were assessed across five phases (baseline, recall, intervention, re-exposure, return-to-baseline). Significant group-by-phase interactions were observed for self-compassion ( $p < .001$ ) and shame ( $p = .023$ ), with SAC group reporting higher self-compassion and lower shame across post-intervention phases. Findings provide initial experimental evidence for SAC as a potentially neuroaffirming, equity-oriented ACT process for promoting autistic wellbeing.

#### Educational Objectives:

1. Describe how Contextual Behavioural Science frameworks (RFT and ACT/ACTr) can conceptualise and address the experiences of marginalised and minoritized populations.
2. Evaluate the feasibility and outcomes of CBS-informed interventions in promoting psychological flexibility and equity engagement.
3. Apply insights from CBS research to inform the development of culturally responsive, theoretically-grounded EDI interventions for diverse populations.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 56. Co-Creating the Future of ACBS

**Workshop** • 9:00 - 10:15

Translation: Not available

Components:

Categories: [ACBS](#)

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C254**

Manuela O'Connell, Lic., Private Practice

Patricia J Robinson, Ph.D., Mountainview Consulting Group, LLC

Rhonda Merwin, Ph.D., Duke University

Leadership within a contextual behavioral science framework is not a unidirectional act of decision-making but a relational, participatory process shaped by values, context, and ongoing interaction. As the Association for Contextual Behavioral Science continues to grow and diversify globally, the Board of Directors seeks to continue to collaborate with members and to explore new contexts that support

membership contributions to the evolution of ACBS. A workshop panel discussion at the annual conference provides a venue for board members to share progress on the strategic plan for ACBS and provide updates on other initiatives and issues. This session will include discussion and small group activities designed to support reflection and capture the voices of member ideas concerning future directions. Member guidance will directly inform board decision making. Our goal is to embody the principles of contextual behavioral science by modeling shared leadership, responsiveness to context, and respect for the functional role of diverse perspectives.

**This session is not eligible for any type of CEs.**

## 57. Rethinking Personalization: From Group Averages to Idiographic Processes in Psychological Intervention

**Symposium** • 9:00 - 10:15

Translation: Not available

Components: *Original data*

Categories: Methods/approaches for individual variation, Processes of change, Idiographic and Time-Series Modeling

Target Audience: *Intermediate*

**Location: C302**

Chair: Farah Gulamoydeen, Ph.D. (C), Australian Catholic University

Discussant: Andreas Larsson, Ph.D., Mid Sweden University

Sonja L. Borner, M.Sc., University of Lucerne

Personalized psychological interventions aim to tailor support to the individual, yet personalization is often operationalized using static, group-derived indicators. Across domains, growing evidence suggests that group-level effects may obscure meaningful individual processes. This symposium brings together four data-driven papers examining personalization through idiographic and time-series approaches. A systematic review and practitioner survey examine how measurement supports personalization across the Collect, Share, and Act phases, highlighting divergences between research protocols and routine clinical practice. An ecological momentary assessment study compares baseline-informed and time-series-informed treatment targeting, demonstrating substantial misalignment between group-level indicators and individual maintenance processes. A dyadic time-series study illustrates multiple, distinct relational pathways linking affection, values, and affect within couples. Finally, daily diary data from university students show that average strength-well-being effects do not apply equally to everyone, with idiographic analyses identifying who benefits and who does not. Together, these findings converge on a shared conclusion: meaningful personalization requires moving beyond group averages toward dynamic, idiographic assessment of processes within individuals and relationships.

- *Personalized, But How? Mapping the Use of Measures in Personalized Psychological Interventions and Clinical Practice*

Farah Gulamoydeen, MClInPsy, Australian Catholic University

Joseph Ciarrochi, Ph.D., Australian Catholic University

Baljinder Sahdra, Ph.D., Australian Catholic University

Personalized psychological interventions aim to tailor treatment to an individual's unique needs, preferences, and functioning. Although meta-analyses indicate that personalization significant benefits, there remains limited clarity around how personalization is operationalised in practice. This paper reports findings from two complementary studies examining the role of measurement in personalized interventions, guided by the Collect, Share, Act model of measurement-based care. Study 1 was a systematic review of 29 randomized controlled trials of personalized interventions. Personalization primarily relied on static, pre-treatment, nomothetic measures, with limited use of longitudinal or idiographic data. Measurement content focused mainly on affect and cognitive domains, and explicit sharing of measurement data with patients was rare. Study 2 was a mixed-methods survey of 115 therapists who reported regular use of feedback measures in clinical practice. In contrast, 92% reported sharing measurement results with clients. Idiographic measurement was uncommon (12%), typically limited to sessional feedback tools and used alongside standardized measures. Measures were used to support collaboration, reflection, and case formulation. Together, these studies highlight a gap between research and practice in how measurement supports personalization.

- *Your Baseline Score Is Not Your Process: Comparing Baseline- and Time-Series-Informed Treatment Targets for Internet Addiction from a Process-Based Approach.*

Cristóbal Hernández, Ph.D., Universidad de los Andes  
 Joseph Ciarrochi, Ph.D., Australian Catholic University  
 Steven C. Hayes, Ph.D., University of Nevada  
 Clarissa W. Ong, Ph.D., University of Louisville  
 Baljinder K. Sahdra, Ph.D., Australian Catholic University

While the internet provides benefits, modern applications often foster uncontrolled use, commonly referred to under the umbrella term of internet addiction. This heterogeneous phenomenon has been shown to be maintained by transdiagnostic, contextually bound factors—such as experiential avoidance, deficits in mindful awareness, low self-efficacy, and automatic negative thoughts—suggesting a need for personalized interventions. However, personalization strategies typically rely on baseline assessments to guide treatment-kernel selection, even though recent idiomonic science suggests that group-level averages often fail to reflect intraindividual processes, limiting their utility. To address this, we conducted an ecological momentary assessment study with 98 participants (aged 14-25) reporting high levels of internet addiction. Participants completed four prompts per day measuring transdiagnostic processes for 15 days. We compared kernel prioritization based on baseline severity with prioritization derived from individualized time-series models. Agreement was 25.5%, and baseline scores showed poor predictive performance for time-series predictors ( $F1 = 0.286-0.479$ ). These findings suggest baseline-driven personalization may miss key processes or target less relevant ones, highlighting the potential of idiographic modeling to improve treatment precision.

- *Maybe You Missed How Much I Love You. Affection, Perceptual Agreement and Valued Behavior in Romantic Relationships*

Sonja Borner, M.Sc., University of Lucerne, Switzerland  
 Joseph Ciarrochi, Ph.D., Australian Catholic University  
 Andrew T. Gloster, Ph.D., University of Lucerne, Switzerland

Affectionate communication and shared values are known to support relationship satisfaction, yet little is known about their interplay in everyday interactions. Using time-series data from 73 couples, idiographic ARIMAX models were applied to examine how giving affection relates to acting according to shared values and how these dynamics relate to other relational outcomes, including relationship satisfaction. We tested whether perceptual agreement - i.e. whether affection expressed by one partner is actually perceived by the other - is a necessary condition for such links to emerge. On average, one partner's affectionate behavior was positively associated with both their own and their partner's enactment of shared values. However, effects varied substantially across couples. Couples with stronger vs. weaker links did not differ in terms of relationship satisfaction or perceptual agreement, but did differ in how giving affection related to positive and negative affect. Our findings point to multiple, distinct pathways to relationship functioning, which underscores their informational value for process-based interventions.

- *Tailoring Strengths-Based Supports in Higher Education: Evidence from Daily Diaries and Idiographic Models*

Salima Barkat Ali, Ph.D., Iqra University  
 Joseph Ciarrochi, Ph.D., Australian Catholic University  
 Cristobal Hernandez, Ph.D., Universidad de los Andes  
 Aqsa Mansoor, Iqra University  
 Steven C. Hayes, Ph.D., University of Nevada  
 Clarissa Ong, Ph.D., University of Louisville  
 Baljinder Sahdra, Ph.D., Australian Catholic University

Strength use predicts well-being across groups; however, its within-person effect is still unproven. This study examined whether the links between daily strength and well-being are ergodic. Two hundred and thirty-five Pakistani undergraduates completed 21 days of daily diaries and pre-post assessments. Integrated moving average with exogenous predictors models (i-ARIMAX) were estimated for each participant and then meta-analyzed. At the group level, participants increased their daily enactment of strengths and, on average, reported reductions in negative affect from the pre-test to the post-test. Group-level analyses also suggested that greater daily strength use predicted more positive outcomes, with smaller, often nonsignificant effects on negative affect. However, individual-level analyses revealed a different picture: the size and even the direction of daily strength-distress links varied substantially across participants. Clustering analysis showed that only a subset of students (responders) translated increased strength use into reduced distress. Crucially, i-ARIMAX slopes distinguished these groups, showing that daily dynamics can forecast who benefits most. These findings demonstrate how group averages can mask unique individual experiences, underscoring the need for person-centered strengths-based interventions.

## Educational Objectives:

1. Distinguish between group-level and idiographic approaches to personalization in psychological intervention.
2. Assess the limitations of baseline or average-based indicators for guiding individualized intervention decisions.
3. Analyze heterogeneity in within-person or within-couple time-series data and assess its implications for personalized, process-based intervention planning.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

Friday Morning 10:45

### 58. Punishment as Process in Clinical Work: A Functional Contextual Approach in ACT

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, Shaping Behavior in Therapy

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Merieux**

Manuela O'Connell, Lic., Private Practice

Robyn D. Walsler, Ph.D., Trauma and Life Consultation and Psychological Services

Within Acceptance and Commitment Therapy (ACT), punishment is a foundational behavioral process often misunderstood, under-discussed, or framed in moral rather than functional terms. From a functional contextual perspective, punishment refers to contingencies that reduce the future probability of behavior, identified through their effects over time, not inferred from momentary aversiveness or therapist intent alone. Punishment, when used deliberately and transparently, can function as a skillful clinical intervention. This workshop examines punishment as an intentional, ethically grounded process within ACT practice. Emphasis is placed on developing conceptual clarity and functional sensitivity to punitive contingencies introduced to reduce behaviors that constrain psychological flexibility while supporting values-consistent responding and relational safety. Through brief didactic segments and role-play demonstration, participants will observe how subtle therapist behaviors (e.g., shifts in attention, pacing, tone) can be applied with care and monitored across time. Attention is given to differentiating intentional punishment from coercive control and to tracking behavioral effects without over-attributing function in the moment. The workshop is designed for clinicians seeking greater behavioral precision in engaging punishment responsibly within clinical work.

## Educational Objectives:

1. Explain punishment as a functional behavioral process within ACT, distinguishing it from moral judgments, therapist intent, and momentary aversiveness.
2. Analyze clinical interactions to identify potentially punitive contingencies and evaluate their effects on client behavior and psychological flexibility across time.
3. Demonstrate ways to use punishment intentionally and transparently within the therapeutic relationship while differentiating it from coercive control and maintaining relational safety.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 59. Let's See Where It Takes Us: Artist and Therapist Journeys as Unfolding Interactions of the Interbehavioral Field

**Panel** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis*

Categories: Processes of change, Theory and philosophical foundations, Interbehaviorism, Therapy, Art.

*Target Audience: Beginner*

**Location: Gounot**

Chair: Jacob T H Waite, DClInPsy, Louisiana Contextual Science Research Group & Oxleas NHS Foundation Trust

Linda Parrott Hayes, Ph.D., University of Nevada

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

Mitch Fryling, Ph.D., California State University, Los Angeles

This panel focuses on philosophical and practical aspects of psychotherapy. Increasingly there exists a demand that therapy be 'goal-directed' and 'efficient', a pressure to get stuff done. However, therapists' descriptions of process often suggest a more fluid phenomenon wherein goals emerge and evolve, a kind of unfolding dance with the client. Similarly, artists describe being guided by a process in which they participate without being in control. Interbehaviorism describes how unique psychological events occur as the whole human organism participates in a field of simultaneously interacting factors. Are therapists and artists describing an intuition of their actions as events in the interbehavioral field? What might these parallels tell us about constructs like 'goals' and 'efficiency' and their promise of control. Can we move forward with purpose without knowing the destination? Panelists will draw on their experience to explore, and invite discussion, around these issues, with the intention of seeking more empowered ways of anchoring the work of psychotherapists.

Educational Objectives:

1. Critically assess constructs like 'goals' and 'learning objectives'.
2. Analyze the processes involved in creative and therapeutic work and identify conceptual connections between them.
3. Apply the interbehavioral field construct as a framework to conceptualize this process in an empowering way.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 60. From Struggle to Vitality: How ACT Can Help People with Cancer

**Panel** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis*

Categories: Health / behavioral medicine, Clinical intervention development or outcomes, Cancer

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Maria Karekla, Ph.D., University of Cyprus

Staci Martin, Ph.D., True North Therapy and Training

Joanna J Arch, Ph.D., University of Colorado Boulder

Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

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

Marianna Zacharia, M.Sc., Ph.D., Cyprus Association of Cancer Patients and Friends (PASYKAF)

Living with cancer can be incredibly challenging. Given that about 1 in 5 people will be diagnosed with cancer in their lifetime (World Health Organization, 2024), many therapists will work with a person with cancer (PWC) at some point. Struggles among PWC include waiting for test results, appearance changes, hospitalizations, treatment side effects, adherence to medical recommendations, and the impact that being labeled a "cancer patient" has on one's identity. Guilt and shame about their diagnosis and engaging in "meaning-making" during the cancer journey can present similar challenges. This panel includes researchers and clinicians with specialized expertise in the field of psycho-oncology. Empirically-based CBS approaches involve helping clients detach from fear-based thinking and cope with the shame of behaviors that PWC believe caused their cancer (Bricker et al., 2020; 2023). At the same time, PWC benefit from remaining connected with values (Arch et al., 2022). ACT therapists are in a good position to remain present, accepting, and encouraging as clients take steps toward showing up and living with vitality.

Educational Objectives:

1. Describe at least one CBS-related research finding relevant to people with cancer.
2. Discuss CBS interventions for coping with shame-based behaviors related to cancer

3. Describe at least two ways in which ACT therapists can help connect a client with cancer to their values through meaning-making and memory-making.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **61. Advances in RFT Research: Relational Training, Hierarchical Framing, and Rule-Governed Behavior**

**Symposium** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Original data*

Categories: RFT / RGB / language, Behavior analysis, Training Relational Framing, Hierarchical Framing, Rule-Governed Behavior, Large Language Models

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Mouterde**

Chair: Monica Hernández-López, Ph.D., University of Jaén

Discussant: Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin

Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Jorge Villarroel, Ph.D., Universidad de Almería

Miguel Rodríguez-Valverde, Ph.D., Universidad de Jaén

Relational frame theory (RFT) provides a comprehensive behavioral account of human language and cognition, offering analytical tools to investigate relational responding, hierarchical framing, and rule-governed behavior. This symposium presents four studies that advance RFT basic research across populations and domains. The first paper evaluates the feasibility and preliminary effectiveness of a computer-based multiple-exemplar relational training program in children and adolescents diagnosed with Level I autism spectrum disorder, showing clinically significant increases in verbal and non-verbal intelligence. The second paper investigates the non-arbitrary training conditions that allow the establishment of hierarchical relational cues, demonstrating that most participants responded according to coordination and hierarchy in arbitrary networks. The third paper examines whether inducing tracking functions before an experimental task prevents rule-based insensitivity to contingencies in humans, finding that tracking inductions effectively reduced insensitivity. The fourth paper extends this line of research to large language models, demonstrating that tracking inductions similarly reduce rigid rule-following in frontier LLMs. Together, these studies illustrate the breadth and translational potential of RFT basic research.

- *Multiple-exemplar Relational Skills Training, General Cognitive Ability and Executive Function in Children and Adolescents Diagnosed with Level I Autism Spectrum Disorder (ASD)*  
Miguel Rodríguez-Valverde, Universidad de Jaén  
Andrés Sardinero-Peña, Private Practice  
Isabel Medina-Viedma, Universidad de Jaén  
José Antonio Sánchez-Pomares, Universidad de Jaén  
Mónica Hernández-López, Universidad de Jaén

The present study assessed the feasibility, acceptability, and preliminary effectiveness of a computer-based multiple-exemplar relational training program with a convenience sample of 9 children and adolescents (ages 9 to 15) diagnosed with Level I autism spectrum disorder (ASD) receiving support at an ASD-specialized service. Training aimed to establish generalized fluency in relational responding according to frames of coordination, distinction, opposition, comparison (more/less than, faster/slower than), spatial (left/right, over/under, in-front-of/behind) and temporal (before/after) relations, as well as analogy (relations between relations), across 35 stages of increasing complexity (from a two-element single premise to four premises comprising five elements). Assessment included standardized tests for verbal and non-verbal intelligence, and executive function. Three participants (ages 9 to 12) trained with an initial version of the task for 10 weeks and showed clinically significant increases in non-verbal and verbal intelligence (RCI: 1.96 to 3.01). Six participants (ages 10 to 15) are currently undergoing 7-week training with an improved version of the task (data under collection).

- *Training a Complex Arbitrary Hierarchical Networks*  
Jorge Villarroel, Universidad de Almería  
Carmen Luciano, Universidad de Almería

Hierarchical responding is defined as a response in which a class of stimuli, such as "living organism," includes subclasses of stimuli such as "plants" or "animals", and each of these subclasses includes sublevels. Relational Frame Theory (RFT) conceptualizes a hierarchical network as an arbitrarily applicable relational response (AARR), where specific words (is part of, more than...) denoted as "relational cues" are learned through exposure to multiple examples with non-arbitrary relations between stimuli, which are later applied to stimuli with arbitrary relations. The present study aims to investigate the non-arbitrary training that allows the establishment of hierarchical relational cues. A total of 12 adults participated in the study. First, a coordination ("is the same") and a hierarchical relational cue ("includes") were trained. Second, these cues were used to train arbitrary networks, and functions were assigned to some stimuli of the network. Finally, a test was conducted to explore derived responses in these networks. The results showed that most participants responded according to coordination and hierarchy in the respective networks.

- *Reducing Insensitivity to Contingencies Through Inducing Tracking Functions*

Esmeralda Martínez-Carrillo, Fundación Universitaria Konrad Lorenz

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Rule-based insensitivity to contingencies is a well-established behavioral phenomenon. Two functional classes of rule-following, pliance and tracking, are thought to influence this phenomenon, although no studies have analyzed whether inducing tracking functions might reduce insensitivity. This study evaluated whether inducing tracking functions before an experimental task prevents rule-based insensitivity. Two experiments were conducted with 63 and 62 university students, respectively. Participants were assigned to three conditions: General Instructions (GI), General Instructions + Response Criteria (GI+RC), and GI+RC with Tracking Induction (GI+RC+Tracking). The experimental task consisted of a matching-to-sample procedure with two criteria for correct responding based on stimulus similarity and response latency. In Experiment 1, detailed instructions and discrimination training for both criteria substantially reduced insensitivity across conditions, preventing the detection of tracking induction effects. In Experiment 2, minimal instructions and training were provided only for the temporal criterion. Rule-based insensitivity increased markedly in all conditions except GI+RC+Tracking. These findings demonstrate that directly inducing tracking effectively prevents rule-based insensitivity, suggesting that interventions promoting generalized tracking repertoires could enhance behavioral flexibility in clinical and educational contexts.

- *Tracking Inductions Reduce Rule-Based Contingency Insensitivity in Large Language Models*

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Esmeralda Martínez-Carrillo, Fundación Universitaria Konrad Lorenz

Large language models (LLMs) exhibit rule-governed behavior patterns analogous to those observed in humans, including insensitivity to changes in contingencies. This study examined whether tracking-type inductions could reduce this insensitivity using a rock-paper-scissors task with contingency reversals. Eight frontier LLMs were evaluated in a factorial design crossing Rule condition (No Rule, Correct Rule) with Induction type (No Induction, Direct Tracking, Metaphorical Tracking). Results showed substantial variability in baseline sensitivity across models. Both tracking inductions significantly improved sensitivity in most models. Direct Tracking showed consistent effects across 7/8 models, with the largest improvements in initially rigid models. Metaphorical Tracking was particularly effective for Gemini 3 Flash. Notably, Llama 4 Maverick showed minimal response to either induction. These findings demonstrate that tracking inductions can effectively reduce rigid rule-following in LLMs, with implications for understanding the mechanisms of verbal regulation in artificial systems and for developing strategies that enhance behavioral flexibility in human-AI interaction contexts.

#### Educational Objectives:

1. Describe how multiple-exemplar relational training and hierarchical framing procedures establish and strengthen derived relational responding across different populations.
2. Identify the role of tracking functions in modulating rule-based insensitivity to contingencies and to describe the experimental conditions under which tracking inductions effectively enhance sensitivity.
3. Discuss the translational scope of RFT basic research, from clinical applications in autism spectrum disorder to the analysis of rule-governed behavior in large language models.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

**62. Interoception: One Process to Rule Them All?: Australia & New Zealand Chapter Sponsored**

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Processes of change, Clinical intervention development or outcomes, Process-Based Interventions, Interoception, Sensory Processing, Depression, Trauma, OCD, PTSD, Eating Disorders, Neurodivergence

Target Audience: *Beginner, Intermediate*

**Location: Weil**

Jennifer Robertson Kemp, MPsych(Clinical), Adelaide Behaviour Therapy

Interoception, often called our eighth sense, is a dynamic process through which we understand our bodily experiences, maintain homeostasis, and ensure our survival.

The ability to describe our experiences, known as tacting, relies on interoceptive awareness and accuracy. Only by noticing and accurately interpreting subtle changes in our bodies, such as our breathing, heart rate and emotional signals, can we respond flexibly to changing contexts, navigate complex relationships and take valued action.

Interoceptive difficulties lead to ambiguity, confusion, and context insensitivity, and are known to contribute to mental health problems, including depression, anxiety, OCD, complex PTSD, dissociation, and eating disorders.

Teaching people to listen to their bodies with greater discrimination and sensitivity is an essential part of effective process-based interventions. Yet, despite its central role in human suffering, interoceptive skills remain a largely untapped therapeutic resource.

This interactive workshop will explore the role of interoception in contextual-behavioral interventions. Blending practical activities with didactic learning, participants will explore how to target interoception in ways that maximize the benefits for the individual while enhancing therapeutic outcomes.

Educational Objectives:

1. Explain the role of interoception in psychological well-being and clinical presentations, including alexithymia, emotional regulation challenges, and common mental health experiences such as anxiety, depression, and trauma responses.
2. Apply practical interoceptive awareness and accuracy exercises with clients to support emotional regulation, flexible responding, and values-based action within contextual-behavioral frameworks.
3. Integrate interoceptive skill-building into existing therapeutic approaches to enhance contextual-behavioral therapeutic outcomes for clients experiencing difficulties with body awareness, emotional identification, and self-regulation.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **63. Implementing Exposure for OCD and Anxiety Disorders from a Psychological Flexibility Model**

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Role play, Strategic planning*

Categories: Clinical intervention development or outcomes, Exposure Therapy, OCD, anxiety

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Aristotle**

Michael P Twohig, Ph.D., Utah State University

Eric Lee, Ph.D., Southern Illinois University

Exposure therapy is a core procedure in the treatment of obsessive compulsive disorder (OCD) and other anxiety disorders. Since its inception, the field has seen ongoing advances in how outcomes, change processes, and treatment procedures are conceptualized. ACT has been a particularly influential model shaping how exposure is conducted. In this workshop, we will review recent research

on ACT as a framework for exposure therapy, including basic laboratory findings and outcome studies—many conducted by the speakers themselves. We will illustrate practical strategies for implementing ACT based exposure across anxiety and obsessive compulsive disorders. In particular, we will teach how to link exposure work to values and how this alters the way exercises are planned and implemented. We will also teach how exposure exercises look different because of focusing on psychological flexibility over emotional control. This training will include didactic instruction, video demonstrations, and clinical role plays. Upon conclusion, attendees should be able to conceptualize an anxiety or OCD case using the psychological flexibility model, develop effective treatment plans, and implement core ACT based exposure strategies.

Educational Objectives:

1. Apply ACT's psychological flexibility framework to understand the functional processes underlying anxiety and obsessive-compulsive symptoms.
2. Integrate ACT processes—such as values, acceptance, and defusion—into exposure-focused treatment plans for anxiety and OCD.
3. Demonstrate foundational competence in delivering ACT-based exposure procedures across a range of anxiety and obsessive-compulsive disorders.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

#### 64. ACT Based Psychological Interventions for Global Use: Key Lessons from the Work of the World Health Organization

**Invited** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Didactic presentation*

Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, Global Mental Health

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Perroux**

Ken Carswell, DCLinPsy, World Health Organization



Globally, more than a billion people live with a mental health condition, with the majority unable to access evidence-based care. Over the past decade, The World Health Organization (WHO) has developed and tested a number of open-access, evidence-based psychological interventions, which have now been implemented in different countries. Two related interventions are based on Acceptance and Commitment Therapy (ACT) - Self-Help Plus (SH+) and Doing What Matters in Times of Stress (DWM).

This talk will introduce WHO's work in this area, the two interventions - SH+ and DWM - and then reflect on key challenges, successes and lessons. It will consider critical design, development and implementation factors and will aim to offer practical and actionable considerations when deploying SH+ or DWM, especially in low-resource and conflict-affected settings.

Educational Objectives:

1. Describe the key parts of the WHO interventions Self-Help Plus and Doing What Matters in Times of Stress.
2. Describe different settings where the WHO interventions Self-Help Plus and Doing What Matters in Times of Stress have been delivered.
3. Describe how to deliver the WHO interventions Self-Help Plus and Doing What Matters in Times of Stress.

**CEs Available (1.25):** [CEs for Psychologists](#)

#### 65. Breaking the Fourth Wall: Increasing Precision in ACT with Bidirectional Functional Analysis

**Workshop** • 10:45 - 12:00

Translation: Not available

Components: *Conceptual analysis, Experiential exercises, Role play, Strategic planning*

Categories: Clinical intervention development or outcomes, Processes of change, Functional Analysis

Target Audience: *Intermediate, Advanced*

**Location: Aubert**

Lou Lasprugato, MFT, Lou Lasprugato Psychotherapy & Training PLLC  
Jim Lucas, PG Dip CBT, Openforwards

This intermediate-to-advanced level workshop offers a brief, yet immersive, training experience designed to elevate the precision and efficacy of a given clinician's acceptance and commitment therapy (ACT) skills. Within a context of deliberate practice, participants will make use of bidirectional functional analysis by "breaking the fourth wall" of therapy to progressively examine not only the client's behavior but also the reciprocal impact of the therapist's interventions on the client's psychological flexibility.

Following a quick orientation to the training method and format, participants will witness a demonstration of bidirectional functional analysis within a real-play that includes intermittent meta-discussions on the core processes involved in the client's behavior; the therapist's intention and effect of interventions on the client; and an exploration of what's needed next to evoke greater psychological flexibility. Participants will then put these skills into practice by engaging in real/role-plays, broken into segments, to analyze live therapeutic moments. This practical, experiential format ensures participants leave with actionable skills for making more precise and impactful clinical choices.

Educational Objectives:

1. Identify core psychological processes in the client's behavior within therapeutic segments.
2. Evaluate the functional intent and effect (impact) of therapeutic interventions.
3. Assess client responses and design follow-up interventions to promote greater psychological flexibility.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## **66. Enhancing Team Working: Using ProSocial to Increase Team Effectiveness in Learning Disability and Support Services**

**Workshop** • 10:45 - 12:00

Translation: Not available

Components: *Conceptual analysis, Experiential exercises*

Categories: Organizational / Industrial psychology, Team Working, ProSocial

Target Audience: *Beginner*

**Location: Maldiney**

Freddy Jackson Brown, DCLinPsy, Contextual Behavioural Solutions  
Mark A Oliver, DCLinPsy, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust  
Jenny Blaauwbroek, Bamboe-ACT

Repeated reports in the UK highlight systemic failures in services for people with high support needs and learning disabilities, including abuse, neglect, loss of autonomy and poor quality of care. While chronic underfunding is frequently blamed, hierarchical management, fragmented systems, weak team functioning and limited frontline autonomy also undermine effectiveness. Drawing on evolutionary science and Elinor Ostrom's theory of self-governance, this workshop presents a practical alternative to traditional top-down service models.

The ProSocial framework integrates Ostrom's eight Core Design Principles with psychological flexibility to help teams align around shared values, collaborate effectively and self-manage resources. By empowering frontline practitioners to participate in collective decision-making, services can become more person-centred, promoting dignity, inclusion, choice and improved quality of life.

Through interactive exercises, participants will explore how to implement ProSocial principles within their own teams and develop an actionable change plan. This session offers practical tools to accelerate meaningful system change in disability support services.

Educational Objectives:

1. Analyze how evolutionary science, Ostrom's Core Design Principles and ACT can be integrated to improve team functioning and self-governance within learning disability and support services.
2. Apply the ProSocial framework to strengthen shared values, frontline autonomy and collaborative decision-making in their own teams.
3. Develop a practical, actionable plan to enhance person-centred care, dignity and service effectiveness within their organisational context.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**67. Brief ACT for Deep Work: Building Provider Resilience Through Focused Acceptance and Commitment Strategies: Brief Interventions SIG Sponsored**

**Workshop** • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Focused Acceptance Commitment Therapy, Brief Interventions

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C125**

Ericka Rutledge, Ph.D., Wellness In Actions, LLC

Jill Holtz, Ph.D., Presbyterian Hospital

Mental health providers routinely support individuals and systems under high emotional strain, placing them at increased risk for burnout, moral distress, and secondary traumatic stress. Despite extensive training in caring for others, clinicians often have limited access to brief, skills-based approaches that support psychological flexibility within complex, real-world practice settings.

This highly experiential workshop introduces participants to Focused Acceptance and Commitment Therapy (FACT) using a problem-based learning approach grounded in real provider challenges. FACT is a brief, acceptance-based approach to behavior change that emphasizes understanding distress, noticing present-moment experience, and taking values-consistent action, adapted from Acceptance and Commitment Therapy to support flexible assessment and intervention in time limited environments (e.g., Robinson & Reiter, 2025). Using FACT as a clinical framework, participants will collaboratively examine common provider challenges, identify patterns of avoidance and values conflict, and practice brief ACT-informed strategies that are personally and professionally relevant.

The workshop emphasizes experiential skill practice, collaborative problem exploration, and practical application, with a brief overview of the evidence base supporting brief interventions such as FACT in time-limited contexts.

Educational Objectives:

1. Describe core FACT processes relevant to provider burnout, moral distress, and secondary traumatic stress.
2. Analyze common provider challenges using a problem-based learning approach to identify patterns of avoidance, values conflict, and psychological inflexibility
3. Create at least two brief, ACT-informed strategies to support psychological flexibility and values-aligned action in personal or professional contexts.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**68. ACT Together with Persons with Disabilities: Italy Chapter Sponsored**

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis*

Categories: Clinical intervention development or outcomes, Social justice / equity / diversity, Autism, Intellectual Disabilities, OCD, Minority Stress, PBT, Yearning

*Target Audience: Intermediate, Advanced*

**Location: C154**

Discussant: Shinji Tani, Ph.D., Ritsumeikan University  
 Giovanni Miselli, Ph.D., Psy.D. BCBA Peer Rev ACT Trainer, Fondazione Sospiro, AMICO-DI  
 Simone Napolitano, Psy.D., Qui e ora- centro per il benessere psicologico; Act-Italia  
 Nicola Lo Savio, Psy.D., Istituto Tolman, ACT-Italia, CBT-Italia  
 Sara Zonza, Psy.D., Studio Zonza Founder, CBT-Italia

Self-determination represents a crucial dimension for quality of life for everyone, independently from personal functioning, disabilities, or diagnosis. ACT and CBS provide process-based tools for working together with people with disabilities, including intellectual disability, autism and psychopathology, in fostering life projects oriented toward quality of life. This symposium illustrates how process-based frameworks translate into context-sensitive clinical practice across diverse disability contexts. Five clinical presentations—including intellectual disability, Level 2 autism with OCD, neurodivergence without diagnostic awareness, and childhood autism with aggression and school refusal—demonstrate how targeting psychological flexibility processes expands behavioral variability when suffering restricts functioning.

Across cases, intervention targets were selected through idiographic functional analysis rather than diagnostic categories, prioritizing modifiable processes of change over symptom topography. Grounded in RFT and EEMM, interventions reflect principled personalization through context-sensitive practice that honors individual variation and cultivates the fundamental psychological yearning for participation, purpose, self-realization, and meaningful engagement with valued life directions.

- *Orienting your life: The Atlas as a Compass for Self-Determination in Persons with Intellectual Disabilities*

Giovanni Miselli, Ph.D., Fondazione Sospiro Onlus, AMICO-DI  
 Francesco Fioriti, M.Ed., Fondazione Sospiro Onlus, AMICO-DI  
 Davide Carnevali, Ph.D., Fondazione Sospiro Onlus, AMICO-DI, SFU University Milan  
 Roberto Cavagnola, Psy.D., Fondazione Sospiro Onlus, AMICO-DI  
 Giovanni Michelini, Pd.D., Fondazione Sospiro Onlus, AMICO-DI, SFU University Milan  
 Mauro Leoni, Ph.D., Fondazione Sospiro Onlus, AMICO-DI, SFU University Milan  
 Serafino Corti, Ph.D., Fondazione Sospiro Onlus, AMICO-DI, SFU University Milan  
 Maria Laura Galli, M.D., Fondazione Sospiro Onlus  
 Giuseppe Chiodelli, Fondazione Sospiro Onlus

Self-determination represents a crucial dimension for quality of life of every person, including person with intellectual disabilities. It implies active participation in decision-making processes regarding one's own existence. However, communicative deficits or lack of essential repertoires for adapting to life contexts often limit opportunities for learning and personal growth without adequate support. In this scenario, adequate supports must be provided that contribute to the developmental potential of persons with intellectual disabilities, responding to their fundamental psychological yearning for self directed meaning and competence. One of the ultimate goals of interventions should be to expand choice opportunities when psychological suffering paralyzes the individual. It is precisely in the capacity to choose that the difference lies between living "psychologically" and existing "biologically." This presentation introduces an adaptable tool for psychotherapeutic contexts called the Atlas for supporting self-determination and committed action. The presentation will demonstrate opportunities for using the Atlas to support persons with intellectual disabilities in orienting their life in alignment with their desires and values while cultivating their self-determination

- *Flexible Self-ing in Neurodivergence: An ACT and Minority Stress Integration*

Nicola Lo Savio, Psy.D., ACT-Italia, Istituto Tolman, Palermo, CBT-Italia

From a process-based framework is understood as a network of self-maintaining bio-psycho-social processes limiting healthy variation across experience. The minority stress model applied to neurodivergence explains suffering in individuals without diagnostic awareness or who haven't disclosed their neurotype, preventing effective communication of their needs. RFT and PBBT's ROE unit illuminate how arbitrary relational responding emerging from contextual interactions influences self-ing flexibility, orients attention toward appetitive or aversive aspects, and shapes awareness versus automatic responding. This work shows how the minority stress model, combined with ACT and elements of PBBT can guide intervention with neurodivergent individuals, promoting authentic expression of intersectional identity and more flexible self-ing, emotion regulation and social interaction repertoires. Through a clinical case of a neurodivergent person, we present intervention implications from these integrated perspectives, emphasizing flexible self-ing and the capacity to discriminate, relate to, and communicate emotions and needs authentically within one's social contexts.

- *ACT as PBT in children: tracking attention to foster flexibility in Autism*  
Sara Zonza, Psy.D., Studio Zonza, Cagliari, CBT-Italia

Quality of life is a key issue in caring for a person. When working with children, especially those with disabilities, creating a context based on preferences and self-determination becomes even more important. Motivation is central to both ABA and ACT, which view values as a compass for building a life worth living. Both are based on the functional analysis of human behavior, and PBT combines and enriches them with Evolutionary Science. This paper will present such an integrated intervention conducted with a 7-year-old boy with ASD and behaviors of aggression, opposition, and school refusal. It will illustrate the creation of a context that places the person at the center, actively involved in both its construction and implementation. We will focus on conceptualizing processes as shifts of attention between and within behavioral dimensions and at different levels of perspective. Measures: Wechsler scales, ABC forms, adapted VLQ-2, a tool specifically created for self-monitoring of availability and committed actions. Results: decrease in problem behaviors and increase in psychological flexibility and quality of life.

- *Clinical Creativity in Autism within Process-Based Therapy: An Idiographic Perspective*  
Simone Napolitano, Psy.D., Qui e ora- centro per il benessere psicologico; Act-Italia

Process-Based Therapy (PBT) conceptualizes psychological flexibility as a core mechanism of therapeutic change. In Autism Spectrum Disorder (ASD), pervasive rigidity across cognitive, emotional, and behavioral domains calls for interventions that are precisely tailored to the individual's functional profile. Shifting the focus from nosographic classification to processes of change, this contribution advances an idiographic framework integrating Acceptance and Commitment Therapy (ACT), the Extended Evolutionary Meta-Model (EEMM), and Relational Frame Theory (RFT). Within this perspective, clinical creativity is not improvisation but a principled process of generating and selecting functional variation. Guided by functional analysis, therapists flexibly modulate core processes—such as exposure, cognitive defusion, values-based action, and behavioral activation—to expand adaptive repertoires. Creativity thus operates as the generative engine of personalization, translating theoretical precision into context-sensitive intervention and enhancing both therapeutic coherence and clinical effectiveness.

#### Educational Objectives:

1. Describe idiographic functional analyses to identify modifiable psychological flexibility processes as intervention targets planned together with people with intellectual disabilities, autism, and complex psychopathology.
2. Apply RFT and the EEMM principles to read context-sensitive interventions that expand behavioral variability and self-determination across diverse disability presentations, moving beyond diagnostic categories to target processes of change.
3. Describe tools and integrated approaches (including the Atlas, ACT-ABA combinations, minority stress frameworks) that support persons with disabilities in developing personalized life projects oriented toward valued living and meaningful participation.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 69. What's Happening in the Room? From Microanalytic to Multiscale Analyses of In-Session Change

**Symposium** • 10:45 - 12:00

Translation: Not available

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

Categories: Processes of change, Clinical intervention development or outcomes, FAP, Multiscale Approach, Microanalysis, Clinical Behavior Analysis

Target Audience: *Intermediate, Advanced*

**Location: C225**

Chair: Elena Gevorkian, Master, Independent researcher

Discussant: Glenn M Callaghan, Ph.D., San Jose State University

Gladis-Lee Pereira, Ph.D., Universidad Europea de Madrid

Natalia Andres-Lopez, Ph.D., Universidad Europea de Madrid

Ioana Ivan, M.Sc., ClinPsy, Babeş-Bolyai University

Of every three people who receive an evidence-based psychotherapy, at least one shows meaningful improvement (Cujipers et al., 2014). While this finding supports the importance of evidence-based practice, it also raises an important question: what exactly do we mean when we refer

to “evidence-based therapies”? Are we describing distinct techniques within a particular model, or processes that may also be central across different models such as Acceptance and Commitment Therapy, Functional Analytic Psychotherapy or even Cognitive Behavioral Therapy?

From this process-based perspective, we present three studies that use moment-to-moment analyses to examine how in-session change unfolds beyond topographical labels. First, we analyze the effects of formulating functional hypotheses prior to 20-minute FAP intervention sessions using a concurrent multiple-baseline design. Second, we adopt a multiscale approach to compare two contrasting behavioral interventions to explore how interaction patterns organize over time. Finally, we examine FAP effectiveness across 60 coded sessions, integrating microanalytic strategies to track contingency patterns and shifts in the distribution of clinically relevant behaviors over time.

- *The Effect of Formulating Clinical Hypotheses Prior to Intervention on Therapeutic Responses in Brief Functional Analytic Psychotherapy Sessions*

Iona Ivan, Ph.D. (C), Babes-Bolyai University  
Tudor Petru Roman, M.Sc., Babes-Bolyai University

The literature on Functional Analytic Psychotherapy (FAP) emphasizes the central importance of monitoring clients’ clinically relevant behaviors, CRBs, (“Rule 1”); however, there is limited empirical evidence regarding the effects of applying this rule anticipatorily on therapists’ behavior during the intervention. This study investigated how formulating clinical hypotheses about CRBs prior to the session influences the probability of functionally effective therapeutic responses in brief, online FAP sessions. The primary hypothesis was that engaging therapists in a pre-session task of generating hypotheses about clients’ CRBs would reduce the probability of functionally effective therapeutic responses. The primary hypothesis was that pre-session hypothesis generation would reduce the probability of functionally effective therapeutic responses. Using a concurrent multiple baseline design, three therapists conducted 20-minute sessions coded with the Functional Analytic Psychotherapy Rating Scale (Callaghan and Follette, 2008). Sequential analysis indicates mixed effects: in some cases, data showed a reduced probability of functionally effective responses, whereas in others, the observed effect contradicted the study hypothesis. Results suggest that pre-session clinical hypotheses, functioning as verbal rules, may influence therapeutic processes, particularly in short-duration interventions.

- *Multiscale Approaches to Analyzing Psychotherapy Change: A Successful Case and an Unsuccessful Case*

Natalia Andrés-López, Ph.D., Universidad Europea de Madrid  
Gladis-Lee, Pereira, Ph.D., Universidad Europea de Madrid  
María Fernández-Shaw, Ph.D. Candidate, Universidad Autónoma de Madrid  
M.X. Froxán-Parga, Ph.D., Universidad Autónoma de Madrid

In recent years, several approaches have been proposed that challenge the traditional conception of reinforcement (Baum, 2012; Cowie, 2018; Cowie & Davison, 2016; López-Tolsa, 2019; López-Tolsa & Pellón, 2025; Shahan, 2017; Simon & Baum, 2017). One of the most influential is multiscale behaviorism, which argues that a Skinnerian view of reinforcement is insufficient to understand behavior in natural contexts beyond the laboratory (Baum, 2002, 2017, 2021). This perspective has been applied to the analysis of verbal exchanges (Simon, 2020, 2024a, 2024; Simon & Baum, 2017), and in the clinical domain it has also inspired conceptual proposals encouraging a multiscale view of psychotherapy (Córdoba-Salgado, 2017; Waltz & Follette 2009).

The aim of the present study was to evaluate the usefulness of multiscale methods for analyzing change in psychotherapy through the examination of two cases: one with a successful therapeutic outcome and one with an unsuccessful outcome. First, we analyzed and graphically represented the relationship between the relative rates of clinically relevant behaviors and their relative rates of reinforcement, assessing the degree of fit to the generalized matching law. Second, we examined the prospective nature of reinforcers using sequential analyses with different time lags. Finally, we computed and graphically displayed a contingency measure between total target behavior and the reinforcers delivered.

The graphical displays and indices used were useful for describing, session by session, the distribution of hypothetically functional categories in both cases. We suggest that this type of analysis can provide valuable information about the behavioral dynamics of verbal exchanges in psychotherapy and can serve as a basis for planning future studies with greater methodological control in natural settings such as clinical practice.

- *From Moment-to-Moment Interaction to Behavioral Allocation: Process–Outcome Relations in Functional Analytic Psychotherapy*

Gladis-Lee Pereira, Ph.D., Universidad Europea de Madrid  
Tien Kuei, M.Sc., Power to Live Foundation

Paola Perrotta, B.S., Universidad Europea de Madrid  
 Natalia Andrés-López, Ph.D., Universidad Europea de Madrid

Functional Analytic Psychotherapy (FAP) emphasizes in-session interpersonal interactions as mechanisms of change, yet methodological challenges make it difficult to empirically describe these processes within an idiographic, functional framework. This study addresses this challenge by examining process–outcome relationships through the integration of sequential microanalysis and a distribution-based index (behavior ratio:  $BR = a/(a+b)$ ) to assess shifts in response allocation across baseline and intervention phases. A non-concurrent multiple baseline (NCMBL, A/B) design was implemented across three therapists and more than 65 hours of recorded and coded therapy sessions. Results revealed identifiable behavioral patterns associated with effectiveness, although their impact varied depending on how behavioral distributions were organized over time. Effectiveness was not linked to isolated events but to broader shifts in the distribution of clinically relevant behaviors. These findings suggest that analyzing response distributions helps align the level of analysis with the complexity of psychotherapeutic phenomena. Overall, FAP appears effective at shifting behavioral allocation, and a multiscale perspective may be useful to analyze how in-session processes relate to clinical outcomes.

#### Educational Objectives:

1. Describe key in-session interaction patterns associated with therapeutic change from an idiographic and process-based perspective.
2. Apply a functional framework to interpret moment-to-moment clinical processes
3. Describe how multiscale perspective can be used to detect patterns associated with therapeutic change

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 70. Growing Minds, Flexible Futures: Process-Based Approaches to Youth Development

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data*

Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Developmental Psychopathology, Family Science, Body Image Disturbances, Qualitative Analysis, Adolescent Girls, Young Adults, Romantic Relationship Satisfaction, Family Therapy, Sibling Relationships, Children, Adolescents, Oppositional Defiant Disorder, ODD, ACT

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C254**

Chair: Dana M Gadaire, Ph.D., University of Michigan  
 Debielle Jacques, Ph.D., University of Washington  
 Gökçen Aydın, Ph.D., TED University  
 Jakob Langenskiöld, M.A., University of Turku  
 Francisca Alves, University of Coimbra, CINEICC

Children and adolescents navigate a rapidly changing and complex world, where family dynamics, peer relationships, and internal experiences interact to shape developmental trajectories. This session highlights cutting-edge research on process-based interventions aimed at fostering psychological flexibility and adaptive functioning across diverse youth contexts. Presentations examine how distinct parental adversities uniquely influence adolescent outcomes, how sibling relationships moderate social and emotional development, and how psychological inflexibility contributes to challenges such as body image disturbances, oppositional behavior, and externalizing problems. We also explore the role of values and flexibility in promoting healthy romantic relationships and family functioning, and provide an overview of measurement practices in third-wave interventions for youth. Across these studies, the unifying theme is understanding and cultivating the processes that empower children and adolescents to engage meaningfully with their thoughts, emotions, and relationships. Attendees will gain insights into practical applications, from brief contextual interventions and parent coaching to school- and clinic-based programs, demonstrating how fostering flexibility can support thriving youth across developmental, social, and emotional domains.

- *Contextual Specificity in Associations between Distinct Parental Adversities and Domains of Adolescent Development*

Debielle T. Jacques, University of Washington

Parent substance use (SU), psychopathology, and incarceration predict adolescent psychopathology. Many examine predictive effects separately or collectively via composite variables, and conceptualize parent adversities and their effects as functionally equivalent. This masks nuance, specificity, and heterogeneity of associations, pathways, and contextual processes linking distinct parent adversities and distinct behavioral outcomes. Using integrative contextual theoretical frameworks and a US national dataset, logistic and ordinal regressions parsed differential effects of parent SU, psychopathology, and incarceration on four outcome domains: family context; youth mental health, SU, and interpersonal functioning. Pairwise parameter comparisons probed differential effects of parental adversity. Findings revealed within- and cross-domain heterogeneity. Parent SU was the most robust predictor of outcomes across domains. Comparatively, psychopathology was more domain-limited (most pronounced predictor of youth suicidality and peer victimization) with weaker cross-domain effects. Incarceration had the most domain-limited and targeted influence but significantly predicted severe psychopathology, SU, and dating violence. Parent adversities differentially alter the functional context in which youth psychopathology develops. Findings underscore the utility of contextual specificity and functionalism in advancing understandings of intergenerational psychopathology.

- *ACTsocially for Adolescent ODD: Therapist-Reported Observations of Psychological Flexibility Processes*

Francisca Alves, University of Coimbra, CINEICC

Oppositional Defiant Disorder (ODD) in adolescence is characterized by frequent irritability, defiance, and conflictual interpersonal patterns, often accompanied by low engagement in conventional psychological interventions. Acceptance and Commitment Therapy (ACT) offers a transdiagnostic process-based approach to this disorder, but qualitative accounts of its applicability within this population remain scarce. This study reports therapist-derived qualitative observations from the delivery of ACTsocially, an individual, manualized 11 week ACT intervention for adolescents with ODD. Across 17 cases (65% male), therapist identified salient ACT processes, including cognitive fusion with anger related narratives, experiential avoidance expressed through oppositional behavior, and restricted behavioral repertoires in socially demanding contexts. Engagement was supported through experiential and metaphor based methods, reframing of defiance as functionally protective, and use of the therapeutic relationship as a context for modeling psychological flexibility. Adolescents demonstrated progressive shifts in their relationship with anger, increased willingness to contact vulnerability, and greater commitment with values consistent behavior. These findings extend emerging literature on ACT for externalizing problems by illustrating how core ACT processes can be activated and shaped in clinical work.

- *Psychological Flexibility and Values in Predicting Romantic Relationship Satisfaction Among Young Adults*

Esra Er, Private Practice  
Gökçen Aydın, TED University

This study examined the predictive role of psychological flexibility and values along with some demographics (gender and type of romantic relationship) in explaining romantic relationship satisfaction among emerging adults. The sample consisted of 431 individuals (231 women, 200 men) aged 18-35 who were currently involved in a romantic relationship. Participants completed the Relationship Satisfaction Scale, Valuing Questionnaire, and Psy-Flex Scale and Demographic Information Form. Results from the hierarchical regression analysis demonstrated that the type of romantic relationship initially accounted for nearly 5% of the variance in relationship satisfaction. Adding psychological flexibility to the model resulted in a notable increase in explained variance to 11%, while the inclusion of values—specifically the progress and obstruction dimensions—further enhanced the model, with all predictors collectively explaining 17% of the total variance. Overall findings revealed that higher psychological flexibility and greater progress in values were associated with increased romantic relationship satisfaction, with engaged individuals reporting greater satisfaction than those in dating relationships.

- *Sibling Relationships as a Contextual Moderator of Child Development and Behavioral Health*

Dana Gadaire, University of Michigan  
Andrew Gadaire, University of North Carolina  
Richard Birnbaum, University of Michigan

Sibling relationships are among the most influential and poorly understood factors affecting children's behavioral health. Research across developmental psychology, family systems, and contextual behavioral science (CBS) demonstrates that sibling interactions are foundational to children's social development and

long-term behavioral health outcomes. In integrated behavioral health (IBH) settings, sibling related concerns are highly prevalent: in our primary care IBH program, 31% of presenting concerns involved sibling conflict, aggression, or relational distress. This paper reviews the current state of knowledge on sibling relationships and highlights mechanisms (e.g., relational framing, coercive cycles, and values-based family functioning) through which clinicians may intervene to enhance functioning. We discuss implications for assessment and intervention in primary care, including brief contextual interventions, parent coaching, and family level behavior change strategies. Recommendations for future CBS-informed research on sibling processes are provided.

- *Process Measures and Their Applications in Third-Wave Interventions for Children and Adolescents: A Scoping Review*

Jakob Langenskiöld, Turku Research Institute for Learning Analytics, University of Turku  
 Patrik Söderberg, Åbo Akademi University  
 Mikko-Jussi Laakso, Turku Research Institute for Learning Analytics, University of Turku  
 Katarina Alanko, Turku Research Institute for Learning Analytics, University of Turku

A central aim of the focus on processes of change in third-wave cognitive behavioral therapies has been the inclusion of process measures in intervention research. Despite this emphasis, no prior review has mapped how process measurement has been implemented in the youth third-wave literature. This scoping review maps process measurement practices across intervention studies representing seven third-wave modalities for children and adolescents, without restrictions on intervention format, study design or clinical status. Across 236 studies, we examined the extent to which process measures are included, which processes are assessed across modalities, which instruments are used, how process measures are used analytically, including the frequency with which temporal precedence is established in mediation studies, and the extent to which developmentally targeted measures are employed. Findings indicate a somewhat scattered field, with process measures commonly included, but far less often used to test active mechanisms of change. Results regarding each of the study objectives are presented and discussed in relation to recent theoretical and empirical developments, including the growing emphasis on unified taxonomies of processes of change.

#### Educational Objectives:

1. Describe how distinct parental adversities differentially shape human developmental contexts.
2. Analyze the predictive contributions of psychological flexibility, values, and demographic variables to romantic relationship satisfaction among emerging adults.
3. Identify tools for assessing various dimensions of sibling interactions and intervening to promote healthy family relationships.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **71. Exposure with Purpose: Implementing ACT-informed Exposure for Trauma-related Distress: Trauma SIG Sponsored**

**Workshop** • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Processes of change, Trauma Treatment

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Brian Mundy, LCSW, ACBSNY

Laurie Gallo, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine

Although exposure-based interventions for trauma related distress have substantial research support (McLean et al., 2022) there are notable barriers in dissemination and implementation (Hembree & Cahill, 2007). Barriers include clinicians having limited access to training and the challenges of implementing exposure work which can be complex and messy (Becker et al., 2004). ACT offers a flexible and holistic framework to guide exposure-based interventions for trauma (Thompson et al., 2013). Historically there are few opportunities for clinicians to ground themselves in how exposure work feels from the inside before engaging with clients. The purpose of this workshop is to provide clinicians with 10 concise, ACT-consistent guidelines to increase therapist competence and willingness to lean into trauma exposure work. The guidelines tap into the 6 psychological flexibility processes, and the role of learning in exposure-based interventions. For each of the guidelines the

facilitators will 1) demonstrate the guideline through a metaphor, vignette, or experience; 2) teach the guideline to participants, and 3) provide an experiential exercise for participants to practice it themselves.

Educational Objectives:

1. Explain exposure-based interventions for trauma from a CBS consistent perspective, focusing on expanding relational networks related to traumatic experiences.
2. Describe 7 concise ACT-consistent guidelines to increase clinicians' willingness to use exposure in the treatment of trauma related suffering, and provide an opportunity to engage with them experientially.
3. Demonstrate how to use clinical interventions from ACT to increase psychological flexibility with clients whose behavioral repertoires are narrowed by their relationships to traumatic experiences.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

Friday Afternoon 13:15

## 72. From Processes to Precision: Live Case Conceptualization Using PBT and Mindgrapher Diagnostics

**Workshop** • 13:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Case presentation, Conceptual analysis, Role play*

Categories: Behavior analysis, Evolutionary behavioral science, Functional Analysis 2.0

*Target Audience: Intermediate*

**Location: Merieux**

Gijs Jansen, Dr., PsychFlex

Steven C. Hayes, Professor, PsychFlex

Process-Based Therapy (PBT) is evolving the ACT tradition toward highly individualized, dynamic, and contextualized intervention planning. Yet many clinicians still struggle to integrate process knowledge with real-time case conceptualization and personalized intervention design. This workshop—co-led by Steven C. Hayes and Gijs Jansen—offers a unique live demonstration of how to combine PBT principles with innovative assessment technology (Mindgrapher), structured e-learning, and tailor-made ACT interventions to create a precision therapeutic plan for a specific client in a specific situation.

First, participants will learn how to use PBT's multidimensional framework to understand human suffering through evolving biopsychosocial processes. We then demonstrate how Mindgrapher, a diagnostic mapping tool, can quickly reveal patterns of avoidance, cognitive fusion, relational behavior, emotional regulation, and values engagement. This visual "process map" enhances both therapist understanding and client insight.

Together, we will conduct a live case conceptualization, walking through each step: (1) data collection & process mapping, (2) identifying high-impact leverage points, (3) matching ACT/PBT interventions to the client's unique process profile, and (4) integrating digital learning pathways to support change outside sessions.

Educational Objectives:

1. Explain the core principles of PBT.
2. Demonstrate how to conduct process-based case conceptualization.
3. Demonstrate how to build personalized intervention roadmaps.

**CEs Available (2.75):** [CEs for Psychologists](#) [BCBA CEUs](#)

## 73. The Client and Therapist`s Behaviors as a Context of Change: The How, the Direction, and the Processes Involved

**Panel** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis*

Categories: Processes of change, RFT / RGB / language, Clinical Behavior Analysis, RFT

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Gounot**

Chair: Miguel Rodríguez-Valverde, Ph.D., Universidad de Jaén

Carmen Luciano, Ph.D., University Almeria

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

Lisa W Coyne, Ph.D., Harvard Medical School; New England Center for OCD and Anxiety

Giovambattista Presti, Ph.D., University of Enna Kore

Niklas D. Törneke, M.D., NT Psykiatri, private practice

The interactions between the client and therapist's behaviors are highly specialized human interactions that provide the context for change. The question is how this occurs and in what direction. In the context of psychological therapies, the variety of ideas frequently leads to chaos when it comes to understanding and shaping clinical interactions. Contextual therapies are no exception, sometimes appealing to middle terms while at other times pointing to different processes and behavioural principles. This panel focuses on the panelists' presentation and discussion of their perspectives on the behaviours of clients and therapists as the context for generating behavioural variability, selection, and retention

Educational Objectives:

1. Describe different ways for the same goal.
2. Identify the contextual factors that that therapist might be changing.
3. Describe the effect in the client`s behavior of a contextual change in the therapy room.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

#### **74. Bridging to Innovate: Advancing Science and Practice with the ACBS Scientific Strategic Council**

**Panel** • 13:15 - 14:45

Translation: Not available

Components: *Strategic planning*

Categories: Professional development, Research Community Building, Interdisciplinary Partnerships, and Science-Practice Collaboration

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Joanna J Arch, Ph.D., University of Colorado Boulder

Discussant: Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

Kenneth Fung, M.D., FRCPC, M.Sc., University of Toronto

Brandon Gaudiano, Ph.D., Brown University and Butler Hospital

Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong

Jacqueline Pistorello, Ph.D., University of Nevada, Reno

Staci Martin, Ph.D., True North Therapy and Training

Jennifer Shepard Payne, Ph.D., LCSW-C, Kennedy Krieger Institute/ Johns Hopkins University

Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

This panel shares the work of the ACBS Scientific Strategic Council (SSC), which advances Contextual Behavioral Science (CBS) by bridging research and practice. The SSC aims to expand multidisciplinary CBS/ACT research, promote innovation and open-science practices aligned with the ACBS taskforce white paper, strengthen public-facing science through dissemination and partnerships with clinicians and adjacent disciplines, and support early-career and underrepresented researchers. We will highlight initiatives, including inviting outside researchers into the conference ecosystem, launching a research-focused virtual training event, advancing a JCBS Global Mental Health special issue, re-energizing a clinician-scientist-practitioner network, and sustaining Early Career Researcher mentorship. All researchers and clinicians are invited to collectively bridge gaps and build unity across roles, settings, and career stages. After an overview, facilitated breakout groups will generate ideas for future directions and identify opportunities to move forward collaboratively. We will conclude with a synthesis and an open invitation to join SSC initiatives to shape an innovative, pragmatic, and

inclusive future of ACBS research together. Whether you come to listen, provide input, or get involved, we welcome you!

Educational Objectives:

1. Describe ACBS's priorities and initiatives for advancing the breadth, depth, and innovation of CBS/ACT research.
2. Identify opportunities to engage with, contribute to, and provide feedback on SSC research initiatives across diverse roles, perspectives, and practice/research settings.
3. Develop strategies to strengthen interdisciplinary research collaborations, integrate scientific findings into practice, and amplify ACBS's research influence.

**CEs Available (1.50):** [CEs for Psychologists](#)

## 75. Relational Responding in Silico: AI and CBS

**Symposium** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Original data*

Categories: RFT / RGB / language, CBS in Silico

Target Audience: *Intermediate*

**Location: Mouterde**

Chair: Freddy Jackson Brown, DCLinPsy, Contextual Behavioural Solutions  
 Matthias Raemaekers, University of Ghent  
 Thomas G Szabo, Ph.D., McNeese State University  
 James O'Sullivan, University of Bristol  
 Nathan Duran, Ph.D., University of the West of England

This symposium, Relational Responding in silico: AI and CBS, explores the intersection of Artificial Intelligence (AI) and Contextual Behavioural Science (CBS), highlighting the relevance of Relational Frame Theory (RFT) to emerging AI systems. Arbitrarily applicable relational responding (AARR), central to human language and cognition, has significant implications for AI development. By modelling relational processes computationally, researchers can both advance AI capabilities and refine theoretical understanding of human cognition. Four papers address complementary themes. The first presents a reinforcement learning model of AARR, distinguishing adult performance from developmental processes. The second introduces an AI-based instructional environment to enhance training in Acceptance and Commitment Therapy (ACT). The third describes REP-Bench, a multimodal benchmark assessing relational framing in large language models. The fourth demonstrates emergent mutual and combinatorial entailment in Graph Neural Networks trained on relational data. Together, these contributions position CBS as essential in shaping ethical, conceptual and practical developments in AI, while leveraging AI to extend therapeutic reach and model core behavioural processes.

- *A Reinforcement Learning Model of Arbitrarily Applicable Relational Responding*  
 Matthias Raemaekers, Ghent University

Despite the crucial role of arbitrarily applicable relational responding (AARR) as a cornerstone of human cognition, and increasing availability of computational modelling tools, few attempts have been made to computationally model AARR. This talk presents a two-step approach to developing computational models of AARR, in which we distinguish AARR as observed in human adults from the long-term development of AARR. We argue that AARR in adults can be modelled as computational reinforcement learning with relational knowledge, and that such a model already has potential utility in itself. This approach allows us to simulate seminal demonstrations of the arbitrary, flexible and generative nature of AARR (e.g., Steele & Hayes, 1991) and inspires new research questions. We then discuss future directions for this work, including modelling the establishment of novel contextual cues (also using hardcoded knowledge), and modelling the long-term development of AARR. At the end of this presentation, participants will: 1. Participants will be able to appreciate the differences between studying AARR in adults and studying the development of the ability to AARR, and describe a reinforcement learning approach to modelling AARR in adults.

- *Building a Better ACT trap: Designing an AI Environment to Teach Foundational Skills in ACT*  
 Tom Szabo, McNeese University

Learning ACT is hard. Most people studying ACT find their learning to be a long process with few opportunities for their performance to be shaped (Herschell et al., 2010). There are multiple points where aspiring therapists could use such repeated opportunities (Luoma & Vildardaga, 2013). AI tools can help to give ACT trainees immediate feedback and extended practice opportunities. Consider that a practitioner must first step outside linear problem-solving frameworks. The ACT processes must be conceptually distinguished and identified as they appear during an assessment. A therapist must ask the right questions, refine and test their hypotheses in an analytic procedure, catch client metaphors in flight, select a mode of intervention, and shape treatment into function-matched ACT targets. The therapist must then engage in dynamic, ongoing functional assessment. In this presentation, we demonstrate the use of an AI instructional environment designed to offer interactive assignments for each of these skills, offer feedback, and assess mastery. Data from our first rounds of preliminary investigation into the efficacy of this AI tool will be shared.

At the end of this presentation, participants will:

1. Describe components of and methods for designing an AI-based ACT instructional environment

- *A Multimodal Benchmark for Relational Framing in Large Language Models*

James O'Sullivan, University of Bristol

A key aspect of linguistic and cognitive development, as per Relational Frame Theory (RFT), is the ability to attain patterns of relational responding. This has been linked to the formation of psychological behaviours such as perspective-taking and analogy and has been studied in significant detail in both human and non-human subjects. However, there has been less research on whether this ability is found in AI models, in particular those which have performed well in reasoning-based tasks under multi-modal conditions, akin to the environment in which humans acquire these patterns. This paper presents REP-Bench, a visual question answering (VQA) benchmark to assess relational framing abilities in multi-modal large language models (MLLMs). Using the Relational Evaluation Procedure (REP) (Kirsten and Stewart, 2021), REP-Bench assesses both arbitrary and non-arbitrary analogical and non-analogical relational reasoning over four stages, with relational patterns of coordination, comparison, opposition and hierarchy tested. The full battery of questions is generated using a combination of Processing and Python, which provides flexibility in the design of stimuli and question structure. We utilise this benchmark in the assessment of three MLLMs, testing how difference parameters and model configuration affect performance. Our results indicate the need for further research on the mechanics for the formation of this ability in AI, including the underlying functions required for arbitrarily applicable relational responding. At the end of this presentation, participants will: 1. Identify the relational framing abilities of Visual Question Answering AI models and examine how adjustments to their configurations affect behaviour.

- *Modelling Human Relational Reasoning in Graph Neural Networks*

Nathan Duran, University of the West of England

Relational reasoning is increasingly recognised within cognitive and behavioural science as a core component of human intelligence. Relational Frame Theory (RFT) proposes that intelligence emerges from learned patterns of relating between stimuli - such as equivalence, opposition and hierarchy - shaped by behaviour-context interactions. Because many higher-order reasoning tasks are fundamentally relational, modelling these processes in artificial systems may advance their capacity to approximate human-like cognition. This paper operationalises two foundational RFT processes - mutual entailment (symmetry) and combinatorial entailment (transitivity)- using Graph Neural Networks (GNNs). Using a directed multigraph dataset composed of pseudo-random numerical stimuli, with edges representing defined relational connections. The GNN was trained to predict relational links, including those not explicitly encountered during training. Results indicate that models trained on bidirectional stimulus pairs ( $A \rightarrow B$ ,  $B \rightarrow A$ ) successfully acquired mutual entailment, inferring reversed relations for novel one-directional pairs ( $X \rightarrow Y$ ,  $Y \rightarrow X$ ). Furthermore, after exposure to two-step relations ( $A \rightarrow B$ ,  $B \rightarrow C$ ), the GNN inferred untrained transitive relations ( $A \rightarrow C$ ). These findings demonstrate emergent, generalised relational reasoning in graph-based neural architectures.

At the end of this presentation, participants will:

1. Understanding the capabilities and limitations of Neural Networks for AARR tasks.

#### Educational Objectives:

1. Explain how RFT and Arbitrarily Applicable Relational Responding (AARR) are modelled within contemporary AI systems, including reinforcement learning and neural network approaches.
2. Describe how AI can support CBS, including applications in ACT training and scalable therapeutic intervention delivery.
3. Evaluate the strengths, limitations and ethical implications of AI systems attempting to model human relational reasoning.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

## **76. Conversing, Connecting, & Living Values with Others: An Interpersonal Behavior Therapy Framework for Relating**

**Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

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

Categories: Supervision and training, Interpersonal Relationships

Target Audience: *Beginner, Intermediate*

**Location: Weil**

Glenn M Callaghan, Ph.D., San Jose State University

Although interpersonal dynamics are complex, we can use a contextual understanding of social engagement in to define relational treatment goals. Examining client behavior as it occurs in a context allows us to identify opportunities to ease suffering. Grounded in clinical behavior analysis, an Interpersonal Behavior Therapy (IBT) framework extends principles defined in early writings on FAP and uses the FIAT system to conceptualize a range of social behavior from engaging conversations to creating connected relationships to living one's values in their social community. We will work together to recognize the importance of a basic functional case conceptualization of interpersonal processes and emphasize how human suffering can occur in a social context. Using video roleplays and case discussions, participants will learn to recognize how suffering occurs in the context of relationships in the client's community and in-session. Participants will identify the function and intention of client responding in the service of helping develop interpersonal skills to meet clinical goals to relate more flexibly and effectively with others across a variety of behavioral therapies.

Educational Objectives:

1. Describe the value of understanding interpersonal relating skills in the context of client suffering.
2. Identify the function of client behavior to help them meet their intentions of more effective interactions, create close social connection, and live their values with others.
3. Create a basic functional conceptualization to recognize client strengths, target problems, and guide clinical interventions to alleviate suffering in the context of relating.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

## **77. Compassion Focused ACT in the Context of Terminal Illness: Impact on Self and Associated Challenges for Therapists**

**Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

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

Categories: Professional development, Health / behavioral medicine, Compassion Focused Intervention

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Aristotle**

Jennifer Gregg, Ph.D., San Jose State University  
Martin Brock, M.Sc., M.A., University of Derby

A CBS approach to the self involves a distinction between the content of our experiences and the observer who notices them. It extends this idea to propose that the content is generally short-term or temporary, and the observer is enduring and consistent. However, even this enduring observer self will ultimately die, and throughout life we will face painful and scary reminders of this fact. Thus our common humanity, and perhaps the tragedy of our human existence, that life is finite and we face a courageous struggle to form and maintain deep and meaningful relationships whilst holding the knowledge that life is finite. This workshop will explore the psychological experience of death and loss for therapists who are both supporting clients facing death and ultimately going to die themselves. Through self practice, self reflection, and self compassion we will explore the profound connection that ties us in this common humanity. We will explore ways to support those who face terminally illness or bereavement , and how to increase humanity in all relationships, inside and outside therapy.

## Educational Objectives:

1. Differentiate between types of self from a CBS perspective, and describe their functions.
2. Utilize compassion-based practices for therapists to enhance psychological flexibility in the context of mortality and loss.
3. Describe interventions designed to access common humanity to support working with clients who are dying and grieving.

**CEs Available (1.50):** [CEs for Psychologists](#)

### 78. Enaction, Multisensory Stimulation, and Military Health: Toward an Integrated Understanding of Human Adaptation

**Invited** • 13:15 - 14:45

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components:

Categories: Behavioral or contextual neuroscience, Health / behavioral medicine, Adaptation

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Perroux**

Marion Trousselard, M.D., Ph.D., HDR, Ecole des psychologues praticiens



Maintaining ecological sensory stimulation is a fundamental condition for human adaptation. Rooted in the enactive framework, this perspective considers individuals and environments as mutually co-determined, shaping one another. Cognition is understood as an active process of sense-making, grounded in embodied experience, perceptual-motor simulations, and dynamic coupling between perception, action, and internal bodily states. Adaptation relies on self-organization supported by rich and dynamic environments that sustain brain plasticity, cognitive flexibility, and vitality.

The 4E cognition framework (embodied, embedded, extended, and enacted) provides a coherent model for understanding these processes and for designing multisensory interventions. This approach is relevant in military contexts, where repeated intense stressors impair emotional regulation, decision-making, and adaptation, and contribute to psychotrauma, including post-traumatic stress disorder and moral injury.

In this context, mindfulness emerges as a lever for restoring perception-action coupling, enhancing regulation, discernment, and resilience. Evidence-based programs combining mindfulness, positive psychology, and sensory immersion illustrate how such interventions can restore agency, support psychological recovery, and promote reintegration. From this perspective, mindfulness may be understood as a pharmakon serving health, decision-making, and wellbeing.

## Educational Objectives:

1. Explain the principles of enaction and mindfulness within the 4E cognition framework.
2. Analyze the impact of repeated stress exposure on cognitive, emotional, and behavioral adaptation in high-intensity contexts, and identify mechanisms that disrupt or support self-organization.
3. Develop a structured plan for implementing mindfulness- and positive psychology-based countermeasures that promote adaptive regulation, resilience, and psychological recovery in high-stress contexts.

**CEs Available (1.50):** [CEs for Psychologists](#)

### 79. Process-Based Pathways From Rejection Sensitivity to Authentic Connections

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Processes of change, Relationships, Rejection, Trauma, Neurodivergence, Alexithymia, Executive Functioning

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Aubert**

Jennifer Robertson Kemp, MPsych(Clinical), Adelaide Behaviour Therapy

Rejection sensitive dysphoria (RSD) is an intensely painful experience triggered by actual or perceived rejection. A key process in human suffering, particularly in complex trauma and neurodivergence, rejection sensitivity can play a pivotal role in relationship breakdowns, unemployment, loneliness, manipulation and ongoing abuse.

This dynamic skills workshop applies a contextual behavioural framework to promote recovery from rejection and foster healthy connections with others and ourselves.

Drawing on research evidence, case studies and lived experiences, the facilitator will open with a contextual behavioural model of rejection sensitivity and RSD that acknowledges its evolutionary and neurobiological origins, and the potential contribution of alexithymia, sensory processing and executive functioning.

Participants will consider how socio-normative contexts and communication differences shape responding, explore the function anger, aggression, people-pleasing, and withdrawal, and identify the contingencies that select and maintain behaviours that ultimately perpetuate distress and elicit further rejection.

At every stage, participants will gain practical strategies to alleviate distress and promote a broader, more flexible behavioural repertoire by enhancing emotional clarity, soothing painful emotions, cultivating self-compassion, and fostering authenticity in relationships.

Educational Objectives:

1. Apply a contextual behavioural framework to rejection sensitivity and RSD by considering the evolutionary, neurobiological, and socio-normative origins that shape rejection responses in their clients and themselves.
2. Develop emotional awareness and clarity in clients, empowering them to notice and disengage from rigid rejection patterns (anger, aggression, people-pleasing, withdrawal) and to choose self-compassionate, values-led responses.
3. Explain how to help clients build flexible behavioural repertoires that allow for authentic, reciprocal connections, honour natural ways of relating, and foster safety in the presence of rejection vulnerability.

**CEs Available (1.50):** [CEs for Psychologists](#)

## **80. Yes, and: Enhancing your ACT with Improv**

**Workshop** • 13:15 - 14:45

Translation: Not available

Components: *Experiential exercises, Role play*

Categories: Processes of change, Professional development, Improv

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Maldiney**

Miranda Morris, Ph.D., True North Therapy and Training

Brett D Howard, Ph.D., APRN, Reboot Behavioral Science

Aria E Jaye, B.S., The University of Chicago Crown Family School

Oliver Hulser-Morris, MSW, Weaver & Associates

Improv (improvisational theater) invites us to say "Yes" again and again - show up, move, make mistakes, keep going. Sound familiar? That's ACT in action.

Improv mirrors each of the psychological flexibility processes. It expands your therapeutic toolkit while sharpening your courage, creativity and agility. Better yet, it integrates seamlessly into ACT.

Psychotherapy thrives on present-moment focus and authentic connection. But training authenticity is difficult. Improv gives therapists a powerful practice arena.

In this workshop, we'll co-create improvised therapeutic encounters targeting each ACT process. Through classic Improv games and scenes, you'll discover what master performers know: the best work happens when you're open, willing, and engaged. Great scenes require psychological flexibility.

Here's the magic: Improv creates a safe, low-stakes space where fumbled scenes reveal fusion, avoidance, and inflexibility in real time. You'll experience the connection viscerally.

We'll practice group exercises you can steal for your own clinical work, peer supervision, and ACT training.

Ready to play?

Educational Objectives:

1. Demonstrate flexible perspective-taking exercises and apply them in clinical and training contexts.
2. Explain how Improv techniques enhance experiential learning of ACT flexibility concepts
3. Practice responding contingently to another's behavior in moment to moment interactions

**CEs Available (1.50):** [CEs for Psychologists](#)

### **81. We Literally Told Them: What's Going Wrong in Gen Z Communication in Higher Education (and How to Fix It)**

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Academics or education, Clinical intervention development or outcomes, Students

Target Audience: *Beginner*

**Location: C125**

Colleen M Ehrnstrom, Ph.D., University of Colorado at Boulder  
Janira Gonzalez-Cunningham, Psy.D., CU Boulder

Generational gaps in higher education have always existed—but they have never been as wide, visible, or consequential as they are today. Students, faculty, advisors, and staff often use the same words while meaning very different things. What one group intends as clarity, care, or efficiency is experienced by another as intimidation, vagueness, dismissal, or overwhelm. These breakdowns are not simply about tone or intention; they reflect differences in context, expectations, and the function communication is serving.

Effective generational communication requires both finding the right words and cultivating psychological flexibility. This workshop introduces psychological flexibility as a unifying framework and presents four communication paradigms that shape how meaning is constructed across roles and generations. Participants will analyze common campus scenarios to identify where interactions are merely enabling students and colleagues to get by, versus adapting communication to help everyone succeed. Through applied examples and experiential practice, the focus shifts from managing confusion and conflict to building clarity, connection, and trust—moving campus interactions from surviving day-to-day friction toward truly thriving learning environments.

Educational Objectives:

1. Identify how generational differences in communication norms, assumptions, and context create misunderstandings in college and campus settings.
2. Apply four key communication paradigms to analyze real-world campus scenarios and recognize where rigidity, assumptions, or misalignment interfere with clarity and connection.
3. Apply flexible, context-aware strategies-including language choices and adaptive responses-to improve clarity, collaboration, and student success without asking participants to change their generational identities.

**CEs Available (1.50):** [CEs for Psychologists](#)

### **82. Performing Under Pressure: Supporting Wellbeing in Demanding Roles**

**Symposium** • 13:15 - 14:45

Translation: Not available

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

Categories: Sports or performance-enhancing, Organizational / Industrial psychology, Mindfulness, Diversity, Recruitment, Selection, Human Resources, Leadership, Suicide Hotline Volunteers, Moral Injury, Elite Sport, Trauma, Music Performance

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C154**

Chair: Lauren Borges, Ph.D., Rocky Mountain MIRECC; University of Colorado School of Medicine  
Anschutz Medical Campus

Khamisi Musanje, Ph.D., Makerere University

Sharon Rosenrauch, Doctoral, Australian National University

Stefana Radu, Babeş-Bolyai University

Eugen Secară, MCogSc, MCLinPsych, Babeş-Bolyai University

High-pressure environments demand sustained performance while exposing individuals to uncertainty, emotional strain, and competing demands. From healthcare to crisis intervention, elite sports, leadership positions, and the performing arts, individuals are expected to act effectively under conditions that can easily undermine wellbeing. This symposium brings together research examining how performance can be supported in these demanding contexts.

The studies highlight how performance is shaped not only by individual skills but also by psychological processes and environmental contingencies that influence attention, decision-making, resilience, and values-guided action. Using methodologies including feasibility trials, ecological momentary assessment, intervention development, scoping review, and qualitative and mixed-methods research, the symposium identifies emerging strategies for supporting sustained performance in complex systems. Together, the findings suggest that improving performance in demanding roles requires attention to both individual capacities and the broader contexts in which people work and perform.

- *Workplace Training Based on the ACT Matrix for Ugandan Hospital Staff: A Feasibility and Acceptability Trial.*

Khamisi Musanje, Ph.D., Makerere University

Although initially developed for clinical settings, acceptance and commitment therapy (ACT) has gradually expanded into workplaces. In high-income countries, ACT in the workplace (ACT-W) has been extensively studied and shown to significantly improve employee well-being outcomes. However, in low-resource settings-which tend to adopt innovations later-its use remains limited. We assessed the feasibility and acceptability of a workplace-based ACT matrix programme for use in Uganda. We conducted pre- and post-assessments of stress, psychological flexibility, and mental well-being among 17 healthcare workers recruited from a hospital in Kampala, Uganda, who participated in a 4-week ACT-W program. We also assessed satisfaction and acceptability at endline. ACT-W was associated with positive aspects of well-being and psychological flexibility. Specifically, it enhanced cognitive defusion ( $d = -.59$ ), connection to values ( $d = -.55$ ), and committed action ( $d = -.62$ ). Statistically moderate to large increases in both hedonic ( $d = -.71$ ) and psychological well-being ( $d = -.59$ ) were observed, and overall, acceptability was very high. ACT-W is suitable and feasible for use in low-resource settings but needs flexible implementation.

- *Enabling Leaders by Disabling Limits: Using Choice Architecture to Debias Leadership Selection – A Scoping Review*

Sharon Rosenrauch, Australian National University

Brett Scholz, Australian National University

Lilia Arcos-Holzinger, Independent Researcher

Leadership diversity remains constrained despite decades of diversity initiatives. While underrepresented groups comprise substantial proportions of the workforce, their senior leadership participation remains disproportionately low. Traditional bias training interventions demonstrate minimal sustained behavioural change, suggesting that attempting to change decision-makers' attitudes is insufficient given cognitive limitations and organisational constraints that shape selection behaviour. Choice architecture interventions offer a complementary approach by redesigning decision-making environments rather than modifying individual cognition. These "nudges" leverage bounded rationality principles to influence behaviour while preserving autonomy, potentially reducing backlash. This scoping review systematically mapped choice architecture interventions tested for increasing diversity during leadership selection. Using Joanna Briggs Institute methodology, we employed the COM-B Model to diagnose behavioural mechanisms and Münscher's taxonomy to categorise interventions. Precommitment and accountability mechanisms demonstrate greatest effectiveness for reducing stereotype reliance and

constraining discretionary bias. Effectiveness varies by population and context, suggesting a need for tailored approaches. This review establishes the evidence base for understanding which choice architecture techniques work, for whom, and under what circumstances, providing a structured framework for redesigning inclusive leadership selection processes.

- *"Bend, Don't Break": Psychological Flexibility as a Protective Factor for Suicide Hotline Volunteers*

Stefana Radu, M.A., Babes-Bolyai University  
 Adrian Opre, Ph.D., Babes-Bolyai University  
 Eugen Secară, Ph.D. (C), Babeş-Bolyai University

Every day, crisis helpline volunteers contact the suffering of callers, on the front lines of suicide prevention. This exposure leaves them vulnerable to emotional exhaustion and uncertainty distress. Addressing a gap in research, we ask: How can we support these individuals? This study uses Ecologically Momentary Assessment to capture "in-the-moment" psychological processes immediately following individual calls. We investigate how psychological flexibility (PF) buffers the impact of high-intensity interactions on volunteer well-being. We anticipate that individuals who remain present, accept their internal experiences without unnecessary struggle, and align their actions with their values will be less depleted by intense calls. Preliminary data confirms our hypotheses: volunteers with higher PF maintain a value-congruent presence that attenuates emotional depletion, and uncertainty distress. Expanded data from Romanian crisis lines will be presented. Attendees will gain an understanding of the momentary experience of volunteers and how PF functions as a protective mechanism. Based on our results, we will discuss how future ACT-based interventions can be developed to improve resilience for individuals in these highly challenged roles.

- *Developing an Acceptance and Commitment Training Program for Healthcare Providers (ACT-HCP) Facing Moral Distress*

Lauren M. Borges, Ph.D., Rocky Mountain MIRECC for Suicide Prevention; University of Colorado School of Medicine  
 Sean M. Barnes, Ph.D., Rocky Mountain MIRECC for Suicide Prevention; University of Colorado School of Medicine  
 Michael P. Levin, Ph.D., University of Utah  
 Robyn D. Walser, Ph.D., Trauma & Life Consultation, Psychological Services

Healthcare providers currently face a landscape of heightened moral distress. Healthcare systems are fraught with instability and staff turnover, and providers are seeing an increasing number of patients exposed to significant traumas. In some countries, providers are under legal scrutiny for delivering necessary medical care (Davis-Bosch et al., 2024; Desai et al., 2023). These experiences can evoke moral distress and put providers at risk of poorer psychosocial functioning compared to providers without such exposure (Borges et al., 2021). To empower medical and mental health providers to live their values even in the presence of moral distress, we developed ACT-HCP, a single-session, 45-minute online, self-guided intervention. Providers learn skills to identify moral distress, explore how their relationship with that distress can contribute to functional impairment, and practice experiential exercises to relate differently to moral distress (e.g., moral distress and values as two sides of the same coin) while living values. The program and acceptability data will be presented (e.g., "wounds run deep...I intend to follow through on my goal and reminder to hold my coin").

#### Educational Objectives:

1. Explain the impact of an overly rigid internal focus of attention on performance and describe how it can lead to breakdowns in task execution.
2. Apply effective choice architecture techniques, including precommitment, accountability mechanisms, and diverse panel composition, to redesign leadership selection processes within their organisations.
3. Compare the efficacy of ACT-W when used in low-resource and high-income settings.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

### 83. Ignite 1

**Ignite** • 13:15 - 14:45

Translation: Not available

**Location: C225**

- *A Preliminary Study of Diagnostic Concordance and Reliability of the MIGDAS in Verbally Fluent Adults*

Amanda McGovern, Psy.D., LMHC, Smithsfield Clinic  
 Sarah Cassidy, Ph.D., Smithsfield Clinic  
 Helen San, LPC, Smithsfield Clinic

The Monteiro Interview Guidelines for Diagnosing the Autism Spectrum (MIGDAS) is a semi-structured, clinician-guided interview designed to support the clinical identification of autistic individuals, particularly verbally fluent adolescents and adults. Despite its perceived utility in differentiating autism from anxiety, ADHD, OCD, and trauma-related presentations, the MIGDAS currently lacks formal empirical validation.

Standardized measures like the ADOS-2 and ADI-R offer established reliability but often fail to capture the nuances of verbally fluent adults. The ADOS-2, in particular, may lack the sensitivity required to detect autism in individuals with significant masking (camouflaging) or those whose internalizing distress does not manifest in overt behavioral markers during a brief observation. Consequently, clinicians suggest that qualitative, interview-based methods like the MIGDAS better capture the social-communication differences and functional impacts missed by scoring algorithms.

Given the demand for accurate adult assessment and diagnostic overlap with other neuropsychiatric conditions, systematic evaluation of the MIGDAS is warranted. Establishing evidence of diagnostic concordance, interrater reliability, and clinical utility is a critical first step toward validating this flexible, person-centered approach.

- *Accountability as a Practice, Not as a Punishment (A Conceptual Framework for Values-Based Accountability): Applying ACT to Addictions SIG Sponsored*  
 Elijah Meason, LSAA, ACB Counseling and Consulting

Across systems such as courts, schools, treatment programs, and workplaces, accountability is often equated with punishment. Rules are enforced through threats and sanctions. Compliance is rewarded, and failure is individualized. These approaches frequently increase shame, resistance, and disengagement, while failing to produce durable behavior change.

This talk introduces "Values-Based Accountability", a conceptual framework grounded in contextual behavioral science. Drawing from ACT, functional contextualism, and applied program evaluation, VBA reframes accountability not as an event, but as a relational process of learning, repair, and reintegration rather than control or retribution. The framework shifts the guiding question from "What rule was broken?" to "What function did this behavior serve, what harm occurred, and what skills and supports are needed to move toward one's values?"

In five minutes, this talk will contrast punishment-based accountability with values-based alternatives and pose a central "what if": What if accountability systems were designed to increase psychological flexibility rather than relying on coercion and threat based behavior management?

- *Becoming Someone New: Transformative Experience and CBS*  
 Eric Morris, Ph.D., La Trobe University

How do you choose to become a parent, or change careers - when the experience will transform you unpredictably? Philosopher L.A. Paul (2014) calls these transformative experiences: decisions epistemically opaque and personally disruptive. They defy cost-benefit logic because you cannot know what the outcome will feel like, or what kind of person you'll become. You can't grasp the nature of the experience until you live it, and once you do, you may no longer be the same person who chose it.

ACT and contextual behavioural science offer a response to Paul's problem. ACT's processes don't eliminate uncertainty but help us respond with openness, perspective, and committed action.

Transformative experience parallels Hayes' view of spirituality (1984) as engaging with radical uncertainty, existential depth, and identity change. Values become evolving directions rather than fixed outcomes; the self becomes an ongoing point of view rather than a stable chooser.

Integrating L.A. Paul's account with CBS yields not a formula for rational choice, but a flexible, experiential practice for approaching life's biggest decisions with courage, clarity, and care.

- *Beyond Biomedical: Embedding Psychological Flexibility in Women's Health Services*  
 Liz Patton, DPsych, Barwon Health

Women seeking care for persistent pelvic pain and menopause-related transitions are frequently met within public hospital women's health services that prioritise biomedical explanations over psychological and contextual contributors to their experiences. Traditionally, hospital-based women's health services have been grounded in biomedical care models. As our gynaecology service has expanded toward multidisciplinary, holistic care to better support women experiencing persistent pelvic pain, these developments have been both welcomed and constrained by systemic implementation barriers.

We have integrated contextual behavioural science (CBS) approaches—Acceptance and Commitment Therapy and DNA-V—to support women and people assigned female at birth living with persistent pelvic pain, menopause-related transitions, and the impacts of prior dismissive or harmful healthcare encounters that can reduce engagement in necessary care.

Patient outcome stories highlight how CBS approaches—particularly careful language use and contextual understanding—can validate patient experiences and support movement toward a meaningful life alongside ongoing symptoms. This IGNITE session will share service evaluation findings and clinical reflections on implementation, including barriers, facilitators, and practical lessons for embedding CBS approaches within biomedical hospital settings.

- *Gandalf was Middle Earth's ACT Therapist*

Jared M Broussard, M.A., Thumos.Life Mindfulness & Psychotherapy

Gandalf (Grey or White, take your pick!) is one of the most powerful beings in Middle Earth, yet he rarely uses his magic to fix Frodo's problems. He doesn't carry the Ring; he doesn't fly the eagles to Mordor. Why? Because Gandalf fully understands the Therapeutic Stance. This presentation analyzes the wizard's role through the lens of ACT. Gandalf embodies the Observer Self. He is present, aware, but distinct from the struggle. He facilitates Psychological Flexibility by pointing toward the difficult path (Values) without forcing compliance (Autonomy). He validates the pain of the journey ("I wish it need not have happened in my time") while gently pivoting back to Committed Action ("All we have to decide is what to do with the time that is given us").

- *Heartbreak: A Behaviour Analytic Love Story*

Naomi L. Abbey, M.A., Western University

Heartbreak—loss of romantic love—is a universal, visceral, and deeply personal experience, and from a behaviour analytic perspective, it is also patterned, contextual, and functional. From rejection after a first kiss to the loss of a long-term partner, heartbreak is not romantic fluff, yet this meaningful behaviour remains largely unexplored in behaviour analysis.

This Ignite presentation brings heartbreak into the spotlight, showing how contextual behaviour science (CBS) can address human suffering, values, and quality of life within the landscape of relational loss. Despite the somber depth of the topic, this will be fun, high-energy presentation. Heartbreak will be illustrated using storytelling, humour, and familiar experiences to illustrate why it deserves behaviour analytic attention.

Drawing on behaviour analytic principles and the CBS framework, the talk conceptualizes heartbreak as a constellation of observable and measurable behaviour, including shifts in verbal behaviour, and explores influences such as rule-governance, values-based actions, avoidance of suffering, and stimulus control. Embedded and emerging behavioural assessment methods will be introduced by which heartbreak can be systematically studied and supported using behavioural science.

- *If CBS Is Contextual, Its Dissemination Must Be Too*

Marcio Englert Barbosa, Ph.D., Sensum Psicologia  
 Sílvia M.P. Giordani, B.Sc., Private Practice  
 João Araújo Júnior, M.Sc., Private Practice  
 Tatiana C Khafif, M.Sc., Universidade de Sao Paulo  
 Giuliana A Nasser, Clinical Psychologist, Diálogos Somam Psicologia

In 2020, the Brazilian Chapter of ACBS held its first official meeting. In a country where 5% of the population speaks English, access to Acceptance and Commitment Therapy (ACT) and Contextual Behavioral Science (CBS) resources is significantly constrained by language barriers. In 2023, four members of the Brazilian Chapter created PodACT as an officially approved institutional project: a Brazilian Portuguese-language podcast dedicated to disseminating and strengthening ACT and CBS in Brazil.

The first season focused on psychological flexibility and the six core ACT processes. Later seasons expanded to clinical applications and contextual analyses of social phenomena. Each episode features two hosts and a specialist guest, averaging 2,000 plays and exceeding 55,000 total plays—reaching a per-episode audience nearly five times the size of current chapter membership.

If CBS is fundamentally contextual, its dissemination cannot be culturally neutral. This Ignite argues that dissemination is a contextual behavioral process shaping participation, belonging, and cultural evolution. The presentation explores how locally grounded initiatives can foster learning and community growth, encouraging similar efforts in non-English-speaking regions.

- *No es magia, es siembra! El florecimiento orgánico de una comunidad como refugio: Abierto, presente y comprometido: Argentina Chapter Sponsored*

Veronica Piorno, Master's, Universidad Nacional de MDP

¿Cómo se transforma la cultura clínica de una ciudad? Esta es la anatomía de una siembra que comenzó en 2006 en una universidad pública argentina. No fue un evento fortuito, sino un proceso de 20 años narrado a través del Triflex. Nuestra historia inició manteniéndonos Abiertos al asombro, formándonos, explorando e introduciendo seminarios de grado/post grado desafiantes. Continuamos estando Presentes en el proceso, habitando cada aula, taller de habilidades y espacio de supervisión con la paciencia de quien sabe que los cambios profundos son orgánicos. Finalmente, nos mantuvimos Comprometidos con la visión de una psicología basada en procesos; un trabajo minucioso, sostenido, delicado y con mucho amor. Culminando en la masiva y cálida Jornada de noviembre 2025 en Mar del Plata. Lo que empezó como una semilla solitaria, hoy es un refugio donde estudiantes, profesionales y referentes nacionales se encuentran. Este Ignite demuestra que cuando encarnamos la flexibilidad en nuestra labor docente, la comunidad no solo crece: se multiplica. Porque, al final del camino, lo que vivimos no es magia, es siembra.

- *Recommitting to What Matters: Values-Based Infrastructure for Scaling Social Impact*  
Elnur Gajiev, Psy.D., Together Wellness Collective

Mission-driven founders and social entrepreneurs begin with extraordinary values clarity, but then systematically lose contact with it. Research confirms founders experience burnout at 2–3x population rates. But the effects don't stop with them. Founder psychology ripples into team culture, organizational decisions, venture survival, and ultimately whether solutions reach the communities they're designed to serve.

This presentation extends CBS into entrepreneurial ecosystems and introduces a functional model of values drift: scaling pressures shift founder behavior from tracking (contact with chosen directions) to pliance (control by external expectations and contingencies). Founders don't just burn out; they drift from why they started. And when they drift, impact stalls.

Drawing from consultative and clinical practice, research on cross-cultural leadership, and curriculum development with accelerators, investors, and social entrepreneurs working on climate, health equity, and justice, I outline three key intervention targets: Values Clarification As Recommitment, Defusion From Outcome-Attachment, and Restoring Values-Anchored Action.

This talk positions founder wellbeing as upstream CBS intervention: psychological flexibility as infrastructure for sustained, prosocial impact, with rippling effects from the individual to the community scale.

- *Refining and Reframing Pathological Demand Avoidance*  
Kim D Sheppard, M.Psych, CoolKid Psychology

Pathological demand avoidance (PDA) is a contested and poorly defined construct, with no consensus regarding its definition, underlying mechanisms and treatment. Existing research is conceptually fragmented and methodologically limited. PDA is frequently, and arguably inaccurately, linked to autism, while investigation into PDA across other neurodevelopmental and mental health conditions is scarce. Much of the existing evidence relies heavily on parent report. The current research aims to operationalise PDA behaviours using a multi-tiered approach grounded in contextual behaviour science. This PhD research will 1. Directly observe and quantify PDA behaviours across diagnostic groups; 2. Incorporate lived experience perspectives of young people and 3. Evaluate the functional impact of PDA on parenting experiences and quality of life, and the young person's capacity for independent living. By reframing PDA from a categorical pathological perspective to a contextually framed constellation of behaviours, this work contributes to an improved definition of PDA that empowers parents, clinicians and educators and reduces the dialectical misattunement and minority stress commonly experienced by those that live with PDA.

- *Self-as-Context from the Moon's Perspective*  
Alexander D Simmons, LMSW-C, Questions & Exploration Therapy, LLC

Let's talk about "Self-as-context" (SAC) and the moon. The moon is a planetary body that rotates the Earth and has been in existence for billions of years. SAC is a process of ACT that can be difficult for clients to understand and for clinicians to effectively facilitate. In relation to SAC, the moon has witnessed many events and struggles and has remained unchanged by them. This presentation will introduce "The Moon" metaphor I created in clinical practice to help explain and apply SAC with clients. The presentation will also talk about SAC, the subcomponents of SAC, and how the subcomponents display themselves within the metaphor. The audience of this presentation are to walk away from it learning more about SAC, and to have gained another metaphor to help practice implementing SAC with clients.

- *Targeting Psychological Flexibility in Time-Limited Clinical Settings: Teaching ACT to Psychiatry Residents*  
Lauren Donovan, DO, MBA, M.S., Medical College of Wisconsin  
Courtney Barry, Psy.D., M.S., Medical College of Wisconsin

ACT has a growing relevance to psychiatric practice; however, formal ACT training is rarely integrated into psychiatry residency curricula. We developed and implemented a brief ACT-informed educational intervention consisting of a six-part lecture series delivered by an ACT-trained psychologist to psychiatry residents within a single residency program. The curriculum emphasized core ACT processes, practical clinical applications, and integration of ACT principles into routine psychiatric encounters.

To evaluate the impact of this intervention, we conducted a retrospective pre-post survey assessing residents' self-reported familiarity with ACT concepts, comfort applying ACT skills, and frequency of ACT-consistent behaviors in clinical practice prior to and following the lecture series. Results demonstrate improvement in knowledge and confidence and high potential of incorporating ACT concepts into future practice; supporting the importance of integrating ACT training within residency curricula and highlighting the feasibility of teaching core ACT processes. Residency is a formative period in which therapeutic identity and practice patterns are established. We plan to use these data to inform curricula development to advocate for longitudinal integration of ACT training.

- *When the Therapist Becomes the Client*  
Gita Sankaran, Psy.D., BCBA, WeCAN Indian

Behavior analysts are trained to identify contingencies yet I failed to see the ones shaping my own life. As a behavior analyst and clinical psychologist, I did not "miss the red flags"; instead I was functionally responding to a narcissistically abusive environment that systematically reinforced compliance, self-doubt, and silence. This Ignite talk begins where our professional comfort ends: when the clinician becomes the subject of analysis.

I describe the moment I recognized my own behavior as operant, my values as compromised, and my private events as fused with coercive contingencies. With no external therapist and no illusion of objectivity, I had to conduct a functional analysis on myself and apply ACT on myself.

This talk challenges the myth that knowledge protects us from control, exposes how abuse exploits normal learning processes, and argues that ACT is most powerful when we are willing to treat ourselves as behavior in context. It is a story of committed action when the therapist had to become the client to reclaim a life worth living.

**This session is not eligible for any type of CEs.**

## **84. The Health Mosaic: Behavioral Processes for Wellbeing**

**Symposium** • 13:15 - 14:45

Translation: Not available

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

Categories: Health / behavioral medicine, Help-Seeking, Healthcare Engagement, ACT On Emotional Well-Being, Quality Of Life, Coping Strategies In Patients Undergoing Hemodialysis, Primary Care Behavioral Health, Sexual Trauma, PTSD, Stigma, Trauma, Integrated Behavioral Health In Primary Care

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C254**

Chair: Emily J. Mellen, Ph.D., Tufts Medical Center  
Robert Palmer, Ph.D., The University of Sydney  
Lidia Budziszewska, Ph.D., Universidad Europea de Madrid  
Victor Feldin, Region Jönköping County  
Ela Ari, Ph.D., Istanbul Medipol University  
Erica Skagius Ruiz, M.Sc., Linköping University

Wellbeing is shaped by the dynamic interplay of thoughts, behaviors, relationships, and systems. This session illuminates the behavioral processes that allow individuals to thrive across diverse health contexts, drawing from cutting-edge research on young men's help-seeking, chronic illness, trauma, stigma, and integrated care delivery. Innovative, process-based interventions—including Acceptance and Commitment Therapy, Psychological First Aid, and Primary Care Behavioral Health approaches—enhance psychological flexibility, self-compassion, and value-driven action. Across qualitative and quantitative studies, findings highlight how context-sensitive strategies can reduce avoidance, strengthen engagement, and foster adaptive coping in both patients and healthcare providers. Attendees will leave with actionable insights for weaving together the many threads of health, appreciating how targeted behavioral processes create holistic, resilient, and flourishing wellbeing.

- *"Does that Make Me Less of a Man?": Qualitative Insights for Supporting Help-Seeking Among Young Australian Men: Australia & New Zealand Chapter Sponsored*

Robert Palmer, The University of Sydney  
 Philayrath Phongsavan, The University of Sydney  
 Ben J. Smith, The University of Sydney  
 James Kite, The University of Sydney

Young men face unique barriers to help-seeking that contribute to disengagement with healthcare and poorer health outcomes across the lifespan. Existing research has focused on specific populations, overlooking young men not already engaged with healthcare or embedded within school and university communities. Our qualitative study adopted a behavioural contextualist lens to examine how help-seeking is shaped by interacting personal, social, and systemic factors. Semi-structured interviews were conducted with 29 Australian men aged 18-30 years, purposively sampled for diversity in education, occupation, geography, and healthcare engagement. Data were analysed using reflexive thematic analysis, informed by a socio-ecological framework. Seven interrelated themes show how health literacy, service accessibility, social context, and masculine attitudes interact to shape patterns of avoidance and engagement with care. A novel and cross-cutting finding was the importance of compassion, both self-directed and from others, in informing understandings of strength and vulnerability and thereby enabling engagement in help-seeking without self-condemnation and or fear of judgement. Together, these findings identify timely and strength-based pathways for improving young men's engagement with mental and physical health services.

- *Preliminary Outcomes of Acceptance and Commitment Therapy in Hemodialysis Patients with Depressive Symptoms*

Francisco Montesinos, Faculty of Biomedical and Health Sciences, Universidad Europea de Madrid  
 Lidia Budziszewska, Universidad Europea de Madrid  
 Sonia Diéguez, Centro de Enseñanza Superior Cardenal Cisneros  
 David Lobato, Universidad Europea de Madrid  
 M. Teresa Marín, Fundación Renal Española  
 Helena García-Llana, Centro de Enseñanza Superior Cardenal Cisneros

Acceptance and Commitment Therapy (ACT) has been widely applied across chronic medical conditions, yet controlled research in patients with chronic kidney disease remains scarce. This study examined the effectiveness of ACT in enhancing emotional well-being and quality of life among individuals undergoing hemodialysis (HD). A randomized clinical trial was conducted with 21 patients receiving HD for at least three months and exhibiting clinically relevant depressive symptoms at Fundación Renal Española centers. Participants were assigned to an ACT intervention or a waiting-list control. The intervention consisted of eight individual, face-to-face ACT sessions. Depression, anxiety, quality of life, coping strategies, and psychological inflexibility were evaluated using standardized measures, and clinical change was assessed with the Jacobson and Truax method. Preliminary results in the experimental arm indicated clinically meaningful reductions in anxiety and depression for 90.47% of participants, alongside improvements in quality of life (52.3%) and psychological flexibility (38.1%). These preliminary findings support the potential value of ACT for HD patients, although larger samples, extended follow up, and comparative analyses between the two experimental conditions are still needed.

- *Prescription Patterns of Psychotropic Drugs after Implementation of the Primary Care Behavioral Health Model*

Victor Feldin, Rosenhalsan Primary Care Center  
 Lise Bergman Nordgren, Örebro University  
 Per Nilsen, Division of Society and Health  
 Johan Sjögerén, Hallands sjukhus Varberg  
 Kristin Thomas, Linköping University  
 Hanna Israelsson Larsen, Linköping University

The Primary Care Behavioral Health (PCBH) model aims to address the complexity of mental health problems within primary care. Patterns of psychotropic prescribing provide an indicator of whether care is delivered in a targeted and guideline-aligned manner. This study examined changes in psychotropic drug prescriptions following PCBH implementation.

A pragmatic stepped-wedge cluster trial was used to assess 20 Swedish primary care centers year 2019-2022. Psychotropic drug prescriptions in adult patients with mental health diagnoses (ICD-10: F00-F99) were analyzed regarding overall number, medication classes (antipsychotics, anxiolytics, hypnotics/sedatives, antidepressants), sex, and age.

28,919 patients were included. Total number of prescriptions decreased by 11% between baseline and the first year after implementation ( $p < 0.001$ ) and 9% between baseline and the second year ( $p < 0.001$ ). Sub-analyses revealed that prescriptions for antipsychotics, anxiolytics, and hypnotics/sedatives decreased ( $p < 0.001$ ), consistently across sexes and age groups. Antidepressants remained stable between baseline and the first year and increased by 6% at the second year ( $p < 0.001$ ), with greater variability across groups.

Large-scale PCBH implementation may promote more targeted, guideline-aligned treatment, particularly by reducing potentially addictive medications.

- *The National Sexual Violence Stigma Study*

Emily Mellen, Ph.D., Tufts Medical Center

Mark Hatzenbuehler, Ph.D., Harvard Graduate School of Arts and Sciences

The National Sexual Violence Stigma Study is the first U.S. population-based sample of survivors of sexual violence (SV;  $N = 3,555$ ) to assess SV stigma. Measures of mental health, physical health (chronic pain, frequent headaches, difficulty sleeping), and treatment-related outcomes (perceived need for treatment, stigma-related treatment preferences) were also administered. Almost every participant (96%) endorsed at least one experience of SV stigma. Nearly half (43%) of participants in this nationally representative sample had never disclosed their experience(s) of SV. Of those who did disclose, the mean time between the most recent experience of SV and first disclosure of SV was 10 years (median = 6;  $SD = 11.66$ ). SV stigma was associated with elevations in anxiety, depression, and posttraumatic stress symptoms, with symptom increases ranging from 6-9% per additional point on the stigma scale. Positive associations were also observed between SV stigma and chronic pain, frequent headaches, and difficulty sleeping (AOR range: 1.07-1.10). While 70% of participants wanted healthcare providers to address SV stigma during treatment, only 11% reported that a healthcare provider had ever done so.

- *The Impact of Experiential Psychological First Aid Training on Trauma Coping and Cultural Adaptation*

Ela Ari, Istanbul Medipol University

Psychological First Aid (PFA) provides crisis support, yet its effects on aid providers' trauma-coping abilities and adaptation remain underexplored. This study examines the impact of experiential PFA training, integrating self-compassion practices and preparation phases to enhance readiness.

Participants included 75 psychology students: 25 Turkish students received experiential PFA training in Turkish, 25 international students received the same training in English, and 25 formed a control group without training. Findings revealed significant improvements in perceived trauma-focused coping ( $p < .05$ ) and self-compassion ( $p < .05$ ) in both trained groups.

Cultural differences emerged: international students exhibited higher impulsivity, emotion regulation difficulties, anxiety, and depression ( $p < .05$ ) but also greater resilience and future-oriented trauma coping ( $p < .05$ ). Turkish students showed higher trauma-focused coping ( $p < .05$ ) but lower resilience and distress tolerance self-efficacy ( $p < .05$ ). The control group showed no significant changes.

These findings highlight how experiential self-compassion training and psychological preparedness influence adaptation in crisis intervention, emphasizing cultural differences, language, and context sensitivity in coping strategies.

- *Healthcare staff experiences of the PCBH-model in Swedish primary care*

Erica Skagius Ruiz, M.Sc., Department of Health, Medicine and Health Sciences, Linköping University; Primary Health Care Center

Hanna Israelsson Larsen, M.D., Ph.D., Department of Health, Medicine and Health Sciences, Linköping University; Primary Health Care Center

Lise Bergman Nordgren, Ph.D., Department of Medicine, Faculty of Medicine and Health, Örebro University; Division of Psychiatry

#### Introduction

Primary Care Behavioral Health (PCBH) is implemented internationally, but how healthcare staff understand and operationalize the model remains under-researched in different health care settings. We aimed to explore how healthcare staff in Swedish primary care perceive and experience working with PCBH.

#### Methods

Semi-structured interviews were conducted with staff ( $n = 18$ ) at eight centers after a systematic implementation of PCBH. Participants included psychologists, counselors, physicians, nurses, and unit managers. Data were analyzed using inductive qualitative content analysis.

#### Results

Staff experienced PCBH as navigating tensions and alignments of working towards integrated practice, described as: (i) an interprofessional experience, with improved patient flows and shared responsibility

but with concerns regarding professional/individual needs and preferences; (ii) managing organizational conditions, including time constraints, competing tasks, and uneven managerial support and; (iii) ongoing efforts for a shared foundation with a demand for continuous efforts to cultivate a common practice of integrated care.

#### Conclusions

PCBH offered relational, professional, and clinical value, yet profession-specific concerns and organizational pressures fragmented practice. The findings emphasize the importance of organizational resources and ongoing facilitation activities.

#### Educational Objectives:

1. Describe how interacting personal, social, and systemic factors shape young men's patterns of avoidance and engagement with mental and physical healthcare.
2. Identify and describe the measurable effects of Acceptance and Commitment Therapy (ACT) on emotional well-being, quality of life, and coping strategies in patients undergoing hemodialysis.
3. Describe the adverse mental and physical health outcomes associated with exposure to sexual violence stigma and identify ways in which sexual violence stigma impedes access to treatment.

#### CEs Available (1.50): [CEs for Psychologists](#)

### 85. The Art and Science of Supervision

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data, Strategic planning*

Categories: Supervision and training, Social justice / equity / diversity, Professional Issues In ACT / CBS, Process-Based Approaches, Functional Contextualism, Mechanisms Of Change, Ethics And Professional Conduct, Psychedelics, Training, ACT For Refugees, Competency Measures, Training And Dissemination, Implementation Science, Assessment

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Chair: Sean P Wright, M.A., M.S., LMHC, Lutheran Community Services Northwest

Hubert Czupala, M.A., Akademia ACT

Henry J Whitfield, M.Sc., Maastricht University

Bugra Canpolat, Master's Student, Medipol University

Joel Templin, M.A., LMFT, Lutheran Community Services NW

Emily Darnett, B.A. (PsychSci), GDip (PsychSci), M.A./Ph.D. (ClinPsych), Black Dog Insitute, University of New South Wales

Supervision is both an art and a science, requiring mastery of relational, ethical, and process-based skills. This session showcases cutting-edge approaches to clinical supervision from a CBS perspective, highlighting innovations that strengthen psychological flexibility, relational attunement, and trainee development. Presentations explore humility as a dynamic relational process, domain-limited directiveness in complex therapy contexts, and prosocial-informed frameworks for building supervisory capacity under challenging conditions. The symposium will also examine pragmatic strategies for training and assessing ACT/CBS competencies in low-resource and culturally diverse settings, and spotlight the value of context-sensitive narrative methods, including Indigenous yarning practices, for functional behavioral assessment. Attendees will leave with actionable insights, practical tools, and inspiring examples for cultivating supervisory excellence that is both ethically grounded and process-driven, empowering supervisors to guide, challenge, and inspire their trainees while navigating the complexities of contemporary clinical practice.

- *Between Fear of Humiliation and Shared Humanity: A Contextual Analysis of Humility in the Supervisory Relationship: Supervision & Consultation SIG Sponsored*  
Hubert Czupala, Akademia ACT

Humility in supervision is often framed as a personal virtue of the supervisor. From a Contextual Behavioral Science (CBS) perspective, this paper conceptualizes humility as a relational process shaping learning, safety, and power dynamics within supervision. We report qualitative data from a longitudinal CBS-based supervisor training program conducted in Poland and Ukraine (2023–2026), including recorded

supervision sessions, transcripts, and reflective narratives from supervisors ( $N \approx 16$ ). Reflexive thematic analysis indicates that humility serves protective, regulatory, educational, and relational functions: it reduces experiences of humiliation, strengthens supervisory alliance, facilitates disclosure of uncertainty and error, and supports deliberate practice. In contrast, low humility was associated with shame, avoidance, and constrained learning. Drawing on ACT's psychological flexibility model, we introduce HUMBLe—a behaviorally grounded framework of supervisory humility integrating Humanity, Uncertainty openness, Mindful presence, Beliefs held lightly, Living values, and Engaged care. We propose humility as a key contextual variable that enables learning without fear of humiliation while maintaining ethical and clinical responsibility. Implications for supervision research, training, and fidelity within CBS are discussed.

- *Beyond "Non-Directive": A Domain-Limited Metamodel of Directiveness for Psychedelic Therapy Training and Fidelity*

Henry J. Whitfield, Maastricht University

Psychedelic-assisted therapies often intend to have a "non-directive" stance. Through a functional contextual lens this is problematic and poses the question of how to apply therapeutic stances context sensitively. The directive–non-directive binary is only coherent when specified as domain-limited constraints with an awareness of function.

We propose that tensions between "psychological support" models (Shnayder et al., 2022) and psychotherapy-inclusive models (Brennan & Belsler, 2025) are reduced when directiveness is domain-limited (e.g., somatic focus versus relational reinforcement), consented and function-bound.

We synthesize domain-limited influences across contextual behavioural, experiential, somatic, protocol-driven, and relational approaches; psychedelic therapy debates; and analogous authority-gradient fields.

A synthesis-derived metamodel specifies seven dimensions of permissible influence in dosing sessions, with explicit functions: presence; selective elicitation; attention placement; metaphorical framing; procedural/protocol framing; and related relational/procedural domains. A preparation matrix also front-loads consent and pre-agreed procedures.

Conclusion: Domain-limited directiveness provides a shared vocabulary for ethics, training, and fidelity in psychedelic therapy, supporting protocol design and therapist training. Outputs include a consent-prep 'matrix' and a draft fidelity checklist usable for training, supervision, and protocol development.

- *Enhancing Value-Based Living Among Displaced Populations: A Mixed-Methods Multiple Baseline ACT Study*

Buğra Canpolat, M.A., Medipol University

Ela Ari, Ph.D., Medipol University

Acceptance and Commitment Therapy (ACT) has gained increasing empirical support and clinical popularity. However, few studies have examined its effects within refugee populations. This mixed-methods study investigated the impact of a structured eight-session ACT protocol delivered individually to four Syrian refugees living in Türkiye, using a nonconcurrent multiple baseline design. Consistent with the radical behaviorist foundations of ACT, no pathological symptom threshold was required as an inclusion criterion. Outcomes included engaged living, psychological flexibility, psychological distress, and belongingness. These outcomes were assessed through standardized measures and ecological momentary assessment every two days in a four-month period. Preliminary findings indicate increases in life engagement during treatment and reductions in distress. Changes in psychological flexibility were modest, while experiencing complexity and ambivalence regarding belongingness were observed throughout the therapeutic process. These findings contribute to the limited literature on ACT with refugee populations and highlight the importance of process-sensitive designs when evaluating value-based interventions in contexts of forced migration.

- *A Pragmatic Evaluation of ACT Training Guided by the CBS International Training Standards in a Low-Resource Setting*

Sean Wright, M.A., M.S., LMHC, Lutheran Community Services Northwest

Joel Templin, M.A., LMFT, Lutheran Community Services Northwest

Promoting practitioner competency in ACT/CBS therapies is challenging, particularly in low-resourced settings where accessible training opportunities are limited and measurement of competency is rare. We used the MODIFI process (Brewer et al., 2024) with prospective ACT trainees to modify an established CBT training framework. The co-designed open-source, modular ACT training framework (a peer cohort model with asynchronous videos) was piloted ( $n=14$ ) in a community mental health clinic. We believe this is the first training explicitly informed by the recent international training standards for CBS therapies (Gillanders et al., 2025). We describe operationalizing measurement of competencies enumerated in the international standards. We report qualitative and quantitative data on training acceptability/helpfulness, and we report pre-post training data for multiple behavioral measures of ACT therapist competency.

including 1) Therapist Agreement with Sensitivity to Context (TASC; Long & Hayes, 2018), 2) ACT Knowledge Questionnaire (AKQ; Luoma & Vilardaga, 2013), and 3) ACT Situational Judgement Test (ACT-SJT; Jamison et al., 2025). Implications for pragmatic assessment of therapist competency and lessons learned regarding dissemination of ACT in low-resourced settings are discussed.

- *"Looking Wider to Be Closer": A Prosocial-Informed Pathway for Developing CBS Supervisor Capacity: Supervision & Consultation SIG Sponsored*  
Hubert Czupala, Center for Cognitive and Behavioral Therapies

Following the Russian full-scale invasion of Ukraine, ACBS Polska and the Center for Cognitive and Behavioral Therapies (Poznań), in collaboration with the Academy of CBT in Lviv, developed a staged supervisor training program to expand CBS-consistent supervision capacity under crisis conditions. The Polish implementation, delivered over 17 months (September 2024–January 2026), trained 11 supervisor candidates using a process-based and developmentally sequenced framework aligned with the Dreyfus model and Prosocial principles. Baseline assessment indicated participants were predominantly proficient ACT/CBS clinicians, and the program supported a functional transition from therapist identity toward CBS supervisor identity.

By completion, 10 graduates were actively supervising, collectively supporting 18 individual supervisees and facilitating 15 supervision groups, reaching 207 therapists. This cascade effect reflects expansion of regulatory and reflective infrastructure within the CBS community. Utility ratings identified relational-process components—such as functional contextual analysis, experiential methods, and real-time relational feedback—as central mechanisms of supervisory development.

Findings support a contextual, prosocial model of supervision training that strengthens psychological flexibility at the system level and enables scalable dissemination of CBS-consistent supervision.

- *Yarning as Contextual Behavioural Assessment: What We Lose When We Over-Standardise*  
Emily Darnett, Ph.D., Black Dog Institute, University of New South Wales

Standardised assessment tools dominate contemporary clinical practice, prioritising reliability, manualisation, and symptom quantification. Often contrasting contextual behavioural science approaches, which emphasise functional analysis and understanding behaviour in context. This presentation argues that Aboriginal yarning methods can serve as a rigorous, context-sensitive behavioural assessment method, often dismissed for not conforming to standardised formats.

Drawing on Indigenous research methodologies and contextual behavioural science principles, I will demonstrate how yarning elicits functional relations among behaviour, history, relational contingencies, values, and cultural context. Rather than treating narrative dialogue as "informal" or qualitative, we will map yarning onto behavioural assessment processes: identifying antecedents, consequences, rule-governed patterns, avoidance repertoires, and sources of meaning. Further, we will critically examine what is lost when assessment is over-standardised, particularly relational data, historical context, and culturally situated meaning-making, and discuss some implications for training and clinical integrity.

Attendees will leave with a theoretically defensible and clinically applicable framework for integrating relational, narrative assessment into CBS practice while maintaining functional precision.

#### Educational Objectives:

1. Describe how humility functions as a relational and regulatory process in CBS supervision, including its effects on psychological safety, learning, and disclosure of uncertainty.
2. Describe a developmental, process-based model for training CBS supervisors that supports the transition from ACT/CBS clinician to supervisor, aligned with functional contextualism and the Dreyfus model of skill development.
3. Describe the structure and key components of an open-source, modular ACT training delivered via a peer cohort and asynchronous learning model in a low-resourced community mental health setting.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

Friday Afternoon 15:15

### 86. Power, Harm, and the Dehumanization of Women: What Contextual Behavioral Science Can Do: Women in ACBS SIG Sponsored

Panel • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Didactic presentation, Literature review*

Categories: Clinical intervention development or outcomes, Violence Against Women

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Gounot**

Chair: Robyn D. Walser, Ph.D., Trauma and Life Consultation and Psychological Services  
 Lisa W Coyne, Ph.D., Harvard Medical School; New England Center for OCD and Anxiety  
 Denise C. P. Orsini Marcondes, M.A., Private Practice  
 Miranda Morris, Ph.D., True North Therapy and Training  
 Temple Morris, LCSW-C, True North Therapy & Training  
 Shawn Costello Whooley, Psy.D., Private Practice and VA Maryland Healthcare System

For countless women worldwide, threat, coercion, and violation are not exceptional events but recurring features of daily life. Despite decades of research and intervention, violence against women remains pervasive, with hundreds of millions having experienced physical or sexual violence and only minimal declines in intimate-partner violence. At the same time, researchers document the growth of online subcultures marked by misogyny, dehumanization, and, in some cases, alignment with extremist ideologies. The objectification of women persists across contexts. Together, these trends reflect harm and social environments in which hostility toward women is learned, reinforced, and sometimes radicalized. This panel examines these developments through contextual behavioral science (CBS) lens, asking what our field can contribute clinically, culturally, and systemically. Panelists consider how misogyny and gender-based violence are shaped by learning histories, relational networks, and sociocultural contingencies, including experiential avoidance, identity-based fusion, dominance and control repertoires, and dehumanizing relational frames. Moving beyond description, the panel emphasizes actionable responses: CBS-informed approaches to supporting survivors, addressing harmful behavioral patterns, interrupting radicalizing contexts, and advancing prevention across relational, community, and institutional levels.

Educational Objectives:

1. Explain how misogyny and gender-based violence can be understood as learned patterns shaped by contextual, relational, and sociocultural contingencies within a contextual behavioral science framework.
2. Analyze the roles of experiential avoidance, identity-based fusion, dominance and control repertoires, and dehumanizing relational frames in the development and maintenance of hostility toward women.
3. Apply CBS-informed principles to identify intervention strategies that support survivors, disrupt harmful behavioral patterns, and contribute to prevention at relational, community, and institutional levels.

**CEs Available (1.25):** CEs for Psychologists

### **87. Focused, Flexible, Brief: Processes of Change Across Contexts and Populations: Brief Interventions SIG Sponsored**

**Panel** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Experiential exercises*

Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Brief Interventions, FACT

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Ericka Rutledge, Ph.D., Wellness In Actions, LLC  
 Jill Holtz, Ph.D., Presbyterian Hospital  
 Jacob Tempchin, M.S., University of Memphis  
 Ash Weber, LPC-MHSP, Vanderbilt University Counseling Center  
 Courtney Barry, Psy.D., M.S., Medical College of Wisconsin  
 Francesca Brandolin, Ph.D., University of Jyväskylä  
 Kenia Velasquez, Psy.D., UTHHealth  
 Lauren Donovan, DO, MBA, M.S., Medical College of Wisconsin

Brief interventions are widely implemented across clinical, educational, and community settings, yet questions remain about how core processes can be effectively targeted within limited timeframes (e.g., Robinson & Reiter, 2025). This interactive panel brings together clinicians and researchers working in inpatient and outpatient services, primary care, and educational settings to illustrate how FACT/ACT-consistent brief interventions can be implemented in practice. Panelists will explore common challenges in time-limited work, including contextual constraints, reduced contact, complexity, and pressures toward rapid symptom change. From a contextual behavioral science perspective, the discussion will focus on how core behavioural processes such as psychological flexibility, values-based action, and compassionate responding can still be meaningfully activated in brief protocol. Presenters will share emerging clinical and research findings on outcomes and acceptability of brief interventions, emphasizing how practice-based evidence and formal research can inform one another. Panelists will highlight factors contributing to the success of brief interventions, and demonstrate how these approaches can reliably produce meaningful improvements in mental health, insight, and functioning across diverse populations.

#### Educational Objectives:

1. Describe the function and value of key contextual behavioural processes targeted in brief interventions.
2. Discuss common barriers and facilitators in delivering contextual behavioral processes within time-limited formats and describe practical strategies clinicians use to adapt effectively.
3. Apply focused brief interventions to support meaningful change across settings and populations with audience engagement.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 88. Planting a Digital Garden: Lessons Learned on Tending and Scaling ACT Digital Interventions in the Real-World

**Symposium** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Original data*

Categories: Mobile or digital technology, Dissemination or global health strategies, Intervention Development and Outcomes

Target Audience: *Beginner, Intermediate*

**Location: Mouterde**

Discussant: Jessica Kingston, DCLinPsy, Ph.D., Royal Holloway

Kristy Dalrymple, Ph.D., Brown University Health and the Alpert Medical School of Brown University

Michael Levin, Ph.D., Utah State University

Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

Although empirical support for ACT digital mental health interventions (DMHIs) is accruing, additional work is needed to scale these interventions from tightly controlled research environments to real-world settings. In this symposium, we will examine the translation of ACT DMHIs across three distinct “frontlines” of implementation: transitions of clinical care, the public, and global dissemination. The first presentation will describe results from My Values Program (MVP), an ACT DMHI developed to reduce suicide risk during the transitional period from partial hospital to outpatient care. Shifting from the clinic to the community, the second presentation will describe 7 years of naturalistic data from ACT Guide, a publicly available ACT DMHI. Broader dissemination and implementation data will be presented related to reach and engagement. The third presentation will scale to the global population level, by presenting data on values-based messaging of iCanQuit in India and its impact on public health engagement. Finally, our discussant, Dr. Jessica Kingston, will provide insights on navigating the challenges of real-world deployment of ACT DMHIs.

- *Finding True North During Transitions of Care: Leveraging an ACT Digital Tool to Mitigate Suicide Risk after Partial Hospital Discharge*  
 Kristy Dalrymple, Ph.D., Brown University Health and the Alpert Medical School of Brown University  
 Michael Levin, Ph.D., Utah State University  
 Madeline Sim, B.S., Rhode Island Hospital and the Alpert Medical School of Brown University  
 Michael Antonelli, B.S., Rhode Island Hospital and the Alpert Medical School of Brown University

The transition from partial hospital program (PHP) to outpatient care is a period of heightened risk for suicidality and rehospitalization. Digital interventions are uniquely poised to provide additional support during this transition, as they can provide brief, in-the-moment skills application. The current study pilot tested My Values Program (MVP), an ACT digital intervention, to reduce suicide risk for patients transitioning from PHP to outpatient care. It was hypothesized that MVP would demonstrate preliminary feasibility, acceptability, and signals of effect for reduced suicidality. PHP patients (n=20) used the intervention after discharge and completed measures of suicidality, psychological flexibility, and treatment satisfaction at 1-month follow-up. Time stamps provided MVP utilization data, and qualitative and quantitative data assessed patient satisfaction. Average log-ins per week were high (M=3.72), and participants reported high satisfaction after one month of use. Completer results showed large effect size decreases in suicidal ideation and intensity ( $d = 0.91$ ), and medium-large effect size improvements in psychological flexibility towards suicidal ideation ( $d = 0.73$ ). Results provide preliminary support for the intervention, suggesting that future testing is warranted.

- *"Real World" Deployment of Digital Acceptance and Commitment Therapy: Naturalistic Observations from Publicly Available Self-Help Services*

Michael Levin, Ph.D., Utah State University

Juyoung Yun, B.A., Utah State University

Examining interventions in naturalistic settings is a key feature of contextual behavioral science, ensuring rigorous research translates into meeting pragmatic goals. Much of the research on digital mental health interventions (DMHIs), including ACT, is in the context of controlled clinical trials. Often this research focuses on DMHIs that are not publicly available, further widening the gap between research and publicly available resources in the "real world." Over the past 7 years, our lab has developed and deployed a set of publicly available ACT DMHIs under the name ACT Guide. This provides an opportunity to examine important questions outside of a controlled research context such as who do these programs actually reach, what are people's goals in using these programs, do people engage in programs outside of clinical trials, and what variables might predict who engages more. This presentation will share key insights and lessons learned in examining the naturalistic data from these programs. Findings will be discussed in relation to potential strategies to address the challenges of deploying digital ACT outside of controlled research.

- *Disseminating ACT at Scale: Population-Level Reach and Cost-Effectiveness of Values-Based Messaging for a Smoking Cessation App*

Jonathan B. Bricker, Ph.D., Fred Hutchinson Cancer Center; University of Washington

Margarita Santiago-Torres, Ph.D., Fred Hutchinson Cancer Center

Kristin E. Mull, M.S., Fred Hutchinson Cancer Center

Brianna M. Sullivan, M.S., Fred Hutchinson Cancer Center

Ravi Mehrotra, M.D., Centre for Health, Innovation and Policy Foundation, India

ACT has strong empirical support for behavior change, yet scalable approaches to public dissemination remain underdeveloped. This paper presents a population-level dissemination study testing theory-based values messaging to promote uptake of iCanQuit, an ACT-based smoking cessation smartphone app that was proven efficacious in a full-scale randomized trial. Using a quasi-experimental design, six social media advertisements (five values-based; one generic control) were deployed sequentially over 16 weeks to adults living in seven major cities in India, a low- and middle-income country with high smoking prevalence. Values emphasized in advertisements included family, health, relationships, and self-care. Objective dissemination outcomes included impressions, click-through rates, app installs, app usage, and cost metrics, captured via Google Display & Video 360 and Firebase. Across 119 million impressions and 5.6 million clicks, values-based advertisements emphasizing family, health, and self-control—achieved the highest reach and lowest cost per install (mean \$4.83–\$5.16), outperforming industry benchmarks. Findings demonstrate how ACT-consistent values framing can be leveraged to disseminate evidence-based interventions at population scale, offering a replicable model for global public health dissemination of ACT.

#### Educational Objectives:

1. Describe the potential benefits and challenges of providing additional digital support during transitions of care.
2. Describe key challenges in deploying digital ACT to the public
3. Evaluate how ACT-consistent values framing can be used to disseminate behavioral interventions at population scale using digital media.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 89. Using ACT to Help Parents Stay Open, Aware, and Engaged: USA - Mid-Atlantic Region Chapter Sponsored

Workshop • 15:15 - 16:30

Translation: AI online with your phone - audio or text

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

Categories: Methods/approaches for individual variation, Parents

Target Audience: *Intermediate, Advanced*

**Location: Weil**

Erin Pressman, LCSW-C, Kennedy Krieger Institute, True North Therapy and Training  
Staci Martin, Ph.D., True North Therapy and Training

In recent years, national medical experts issued an advisory underscoring the urgent need to support the mental health and well-being of parents and caregivers. ACT therapists are in a prime position to help parents learn skills to increase their focus on parenting values and bring a mindful, accepting approach to interactions with their children.

In this interactive workshop, attendees will learn how to apply ACT techniques in their work with clients who feel overwhelmed or stressed by the demands of parenting.

The presenters will demonstrate evidence-based methods for assessing the workability of their client's parenting behaviors, exploring relevant contextual factors including cultural dynamics, and helping parents stay in the present moment with self-compassion. Through these processes, clients will learn to identify parenting values and remain connected with them during difficult interactions with their children. Whether your clients have young children or older adolescents, relevant resources for specific ACT techniques and setting measurable, values-based goals to support parenting practices will be shared.

Educational Objectives:

1. Describe how parents struggle with avoidance and fusion.
2. Explain how a functional analysis of parenting behaviors can undermine unworkable patterns.
3. Implement at least two ACT exercises designed to help parents increase their psychological flexibility.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 90. Metaphors, Fire, and Other Dangerous Things: Embodied Experience in the Therapy Room

Workshop • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Experiential exercises, Strategic planning*

Categories: Clinical intervention development or outcomes, RFT / RGB / language, Metaphors, Embodiment

Target Audience: *Beginner, Intermediate*

**Location: Aristotle**

Eugen Secară, MCogSc, MCLinPsych, Babeş-Bolyai University  
Matthew D Skinta, Ph.D., ABPP, Roosevelt University  
Ioana Ivan, MCLinPsych, Babeş-Bolyai University

There are few aspects of language that demonstrate its power in behavior change as elegantly as metaphors. More than just linguistic tools, metaphors structure how we perceive, feel, and act, shaping both our problems and their potential solutions. This workshop explores the use of metaphors in psychotherapy by integrating Relational Frame Theory with the 4E (enactive-embodied-embedded-extended) cognition approach in cognitive science. We will examine how metaphors are not only spoken but lived, offering a direct route to psychological flexibility and experiential change.

Through clinical demonstrations and experiential exercises, participants will explore the embodied nature of the metaphors that emerge in therapy and how embodiment can be skillfully employed to create and shape metaphors that support behavior change.

By the end of this workshop, participants will be able to analyze, construct, and apply metaphors from an embodied perspective, using them as dynamic tools for transformation in therapy.

## Educational Objectives:

1. Describe the role of embodiment in metaphor formation and explain how embodied experience influences metaphor use in psychotherapy.
2. Identify relevant present-moment embodied dynamics that can enhance metaphor generation.
3. Apply an embodied perspective when constructing and integrating metaphors in therapy, utilizing bodily experience, movement, and spatial awareness to shape effective metaphors that support psychological flexibility and behavior change.

**CEs Available (1.25):** CEs for Psychologists**91. ACT Across the Cancer Continuum: Feasibility, Outcomes, and Mechanisms**

Symposium • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Original data*Categories: Health / behavioral medicine, Clinical intervention development or outcomes, ACT in Cancer Populations*Target Audience: Beginner, Intermediate, Advanced***Location: Perroux**

Chair: Joanna Dudek, Ph.D., SWPS University

Discussant: Maria Karekla, Ph.D., University of Cyprus

Rhonda Merwin, Ph.D., Duke University

Joanna J Arch, Ph.D., University of Colorado Boulder

Miryam Yusufov, Ph.D., Dana-Farber Cancer Institute/Harvard Medical School

Cancer treatment poses significant physical and psychological challenges, particularly for individuals undergoing hematopoietic cell transplantation (HCT), living with advanced disease, or managing opioid-treated pain. Acceptance and Commitment Therapy (ACT), which promotes psychological flexibility, has growing relevance in oncology. This symposium presents four studies examining feasibility, outcomes, and mechanisms of ACT across the cancer continuum. The first presentation demonstrates associations between adaptive coping and improved medical and functional outcomes in HCT, and shows remotely delivered ACT for patients and caregivers is feasible and may improve well-being. The second evaluates a single-case study of an online self-help ACT program for HCT recipients post-discharge, indicating feasibility for some patients. The third reports a randomized trial of a group-based ACT program for advanced cancer, showing improvements in psychological processes while highlighting questions about mechanisms. The fourth describes ongoing work evaluating a virtual ACT intervention for oncology patients at risk for opioid misuse, assessing feasibility, acceptability, and psychological outcomes. Together, these studies support the potential of scalable ACT interventions in cancer care.

- *Increasing Survival in Allogeneic Hematopoietic Stem Cell Transplant (HCT)*

Rhonda M. Merwin, Ph.D., Duke University

Rebecca M. Foright, University of Kansas Medical Center

Patrick J. Smith, University of North Carolina Medical Center

Anthony Sung, University of Kansas

HCT can cure hematologic diseases but is associated with significant mortality. Maintaining physical activity can promote better outcomes, however, movement can be challenging during the pre, peri and post-transplant phases. Barriers include emotional distress and depressive withdrawal, and treatment-related limitations on activity and physical discomfort (pain, nausea...). This paper will report on the (1) relationship between coping style and clinical outcomes in N&#3f50 HCT patients (results indicated acceptance was associated with greater survival, Adjusted Hazard Ratio=0.22, p=.042, while behavioral disengagement was associated with longer length of hospital stay and relapse); and (2) development and outcomes of a pilot study of a remote ACT intervention for individuals undergoing HCT and their caregivers. Patient-caregiver dyads (N&#3f12) completed 6 online ACT sessions between Day -30 and Day +90. Sessions trained psychological flexibility skills with the goal of maintaining physical activity. Acceptability was high. Compared to N&#3f36 matched case controls, ACT participants showed greater improvements in 6-minute walk test at Day +30 (p=.039, Cohen's d=1.22) and functional wellbeing (p=.005, Cohen's d=0.71) at Day +90. Process data were incomplete and mixed.

- *An Online ACT Intervention Using a Multiple-Baseline Single-Case Design in Patients Following Hematopoietic Cell Transplantation*

Joanna Dudek, Ph.D., SWPS University  
 Marta Kijowska, SWPS University  
 Małgorzata Sobczyk-Kruszelnicka, Ph.D., Maria Skłodowska-Curie National Research Institute of Oncology Gliwice Branch  
 Ray Owen, Private Practice  
 Aleksandra Kroemeke, Ph.D., SWPS University

Psychological adaptation following hematopoietic cell transplantation (HCT) involves substantial challenges. Acceptance and Commitment Therapy (ACT), which aims to enhance psychological flexibility, may support this process. This paper presents findings from a feasibility and evaluation of an online self-help ACT intervention using a multiple-baseline single-case experimental design among seven male HCT recipients. Participants were randomly assigned to a baseline phase (7–21 days) after hospital discharge, followed by a 14-day ACT intervention and one- and three-month follow-ups (7 days each). Primary outcomes included adherence to and acceptability of the program. Secondary outcomes included positive and negative emotions and psychological flexibility. Four patients (57%) adhered to the intervention sufficiently and evaluated the program positively (attractive, motivating, and technically sound). Usefulness and recommendation to others were rated lower. One participant showed statistically significant reductions in negative emotions following the intervention. Effects on psychological flexibility were mixed. The intervention appears feasible and acceptable for some HCT recipients, with promising but preliminary effects.

- *ACT for Adults with Advanced Cancer: How Does it Work?*

Joanna Arch, Ph.D., University of Colorado Boulder and University of Colorado Cancer Center  
 Nora Barnes-Horowitz, Ph.D., University of Colorado Boulder  
 Sarah Schmiege, Ph.D., University of Colorado School of Public Health

Acceptance and Commitment Therapy is increasingly used with cancer populations but little is known about process variables or mediation in these contexts. This study evaluated process variables and mediation in a randomized trial (n=240) of a multi-modal Acceptance and Commitment Therapy online group intervention ('Valued Living') led by social workers in community oncology clinics among anxious and depressed adults with advanced cancer that led to significant improvement in advance care planning and well-being outcomes. Hypothesized Valued Living processes included defusion/acceptance, progress and barriers in moving toward values/goals, emotional expression and processing. Change in process variables from pre- to post-treatment was evaluated for mediating change in outcomes from pre-treatment to 3.5-month follow-up. Results showed that Valued Living led to significantly greater change in four of five processes than usual care, including for defusion/acceptance, progress toward values/goals, and emotional expression and processing,  $ps < .05$ , Cohen's  $ds = .23-.48$ . After correction, process variables showed only limited evidence of mediating outcomes, suggesting that they improved in parallel to outcomes rather than sequentially. Findings are discussed regarding next steps in ACT mediation work.

- *Feasibility and Acceptability of a Virtual Acceptance and Commitment Therapy Intervention in Adults with Cancer at Risk for Opioid Use Disorder: A Pilot Randomized Controlled Trial*

Miryam Yusuf, Ph.D., Dana-Farber Cancer Institute  
 William F Pirl, Memorial Sloan Kettering Cancer Center  
 Joseph A Greer, Massachusetts General Hospital  
 Emanuele Mazzola, Dana-Farber Cancer Institute  
 Kristy Dalrymple, Rhode Island Hospital  
 Dina Cui, Dana-Farber Cancer Institute  
 Stephen Conway, Dana-Farber Cancer Institute  
 Sarah Concannon, Dana-Farber Cancer Institute  
 James A Tulskey, Dana-Farber Cancer Institute  
 Kathryn McHugh, McLean Hospital

Patients with cancer prescribed opioids often experience substantial psychological distress and elevated risk for opioid use disorder (OUD), underscoring the need for integrated, process-based care. We developed a manualized, virtually delivered Acceptance and Commitment Therapy (ACT) intervention for oncology patients at risk for OUD and are conducting a randomized feasibility trial. Forty adults with cancer and elevated OUD risk (Opioid Risk Tool) are randomized 1:1 to a six-session, individual ACT intervention or wait-list control; 38 participants have enrolled to date. Primary outcomes include feasibility ( $\geq 60\%$  enrollment;  $\geq 75\%$  retention) and acceptability, assessed via CSQ-8 ratings and semi-structured exit interviews. Secondary outcomes examine patient-reported changes in depression, anxiety, and opioid misuse. The planned sample provides 90% power (one-sided  $\alpha = 0.10$ ) to detect a 22% feasibility difference. Interventionists (psychologist, psychiatrist, and social worker) were trained in the ACT protocol and supervised by the principal investigator. Integrated quantitative and qualitative findings

from this pilot RCT will inform refinement of ACT to influence psychological flexibility, reduce distress, and mitigate opioid-related risk in oncology settings, advancing ACBS priorities for contextual, transdiagnostic care.

Educational Objectives:

1. Describe the application of ACT across diverse oncology populations.
2. Identify the feasibility, acceptability, and outcomes of remote and in-person ACT interventions for improving psychological flexibility, coping, and functional well-being in cancer care.
3. List key process variables and mechanisms of action underlying ACT interventions that influence emotional, behavioral, and clinical outcomes across the cancer continuum.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**92. Resistance, Avoidance, Frustration! Responding to Problems In-session with FAP Principles**

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Supervision and training, FAP, Interpersonal Behavior Therapy, Therapy Process

Target Audience: *Beginner, Intermediate*

**Location: Aubert**

Glenn M Callaghan, Ph.D., San Jose State University  
Gladis-Lee Pereira, Ph.D., Universidad Europea de Madrid

When clients engage in problem behavior in-session, it isn't always clear how to respond. This workshop focuses on using principles outlined in Functional Analytic Psychotherapy (FAP) to engage client problems occurring in the context of the therapeutic interaction across a variety of contextual behavioral therapies and treatment goals (e.g., ACT, DBT). We will explore reasons for our difficulties responding to in-session problems and provide strategies to help therapists remain compassionate as they develop flexibility responding with intention. In the workshop we will show video role-plays of challenging client behaviors in the context of the therapeutic relationship and offer participants opportunities to role-play responding to problems and brief experiential exercises to contact how we might bring compassion to this process. We examine cases where therapists have challenges discerning in-session problem client behaviors as well as when those are accurately identified but therapists less effectively facilitate clinical change. Our intention is to help therapists identify relevant problems, understand why they might respond in-session given their clinical goals, and develop skills to engage clients to effect meaningful change.

Educational Objectives:

1. Design a case conceptualization that integrates client goals and accounts for intrapersonal and interpersonal psychological processes.
2. Describe strengths therapists have in supporting more effective client behavior in-session and challenges therapists may have responding to client problem behaviors in-session.
3. Apply strategies for responding to problem behaviors in-session to develop flexible interpersonal repertoires across multiple contextual behavioral interventions (ACT, DBT, CBT).

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

**93. Meaning in Music: Experiential Listening and Reflection for Psychological Flexibility**

**Workshop** • 15:15 - 16:30

Translation: Not available

Components: *Didactic presentation, Experiential exercises*

Categories: Professional development, Clinical intervention development or outcomes, Values, Mindfulness

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Maldiney**

DJ Moran, Ph.D., BCBA-D, Touro University  
M. Joann Wright, Ph.D., ACTOne

Music can function as a context that reliably evokes private events such as thoughts, emotions, memories, and bodily sensations. This workshop presents a contextual behavioral approach to using guided music listening as an experiential exercise to support psychological flexibility. Participants will learn how personally meaningful songs can occasion present-moment contact with internal experiences while practicing openness, defusion, and perspective-taking.

Developed through applied work with trauma-exposed populations, this method invites individuals to notice what shows up during listening and to relate differently to these experiences rather than avoiding or becoming entangled with them. The process emphasizes observing internal responses in context and linking them to chosen values and directions for action.

Through experiential exercises and discussion, attendees will gain a practical, ACT-consistent framework for integrating music into clinical work to support acceptance, self-as-context, and values-based action.

This workshop has consistently drawn strong attendance and positive feedback, with each offering becoming a fresh experiential process shaped by the participants and the music brought into the room.

Educational Objectives:

1. Describe how music listening can function as a stimulus that occasions private events relevant to ACT processes such as acceptance, defusion, and self-as-context.
2. Apply a structured experiential listening exercise to help clients contact present-moment internal experiences and link these responses to personally chosen values.
3. Utilize guided reflection on music-evoked responses to support values clarification and plan values-consistent actions within an ACT-consistent framework.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

#### 94. Leaning into Reflexive Practice - Using Process Based Reflexive practice in Supervision

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Supervision and training, Clinical intervention development or outcomes, Clinical Supervision, Reflexive Practice

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C125**

Toni Lindsay, Prof Dr., Chris O'Brien Lifehouse Sydney Australia

Reflexive practice is a core supervisory competency and is central to developing clinical competence, professional identity, and ethical awareness. However, managing the complexity of reflexive practice within clinical supervision requires active participation and needs to be a shared process between supervisors and supervisees. This workshop explores how process-based therapies (PBTs) such as Acceptance and Commitment Therapy (ACT) can support both supervisors and supervisees to bring reflexive practice more explicitly, transparently, and ethically into supervision. During the workshop, participants will connect to key processes such as perspective-taking, values clarification, attentional flexibility, and emotion regulation within themselves and the supervisory relationship. Case material and experiential examples, led by an experienced clinician and supervisor, will illustrate and model reflexivity in decision-making, use process-based formulation to reflect on power and alliance, and respond flexibly to supervisory ruptures.

The workshop will include strategies on how to use existing therapeutic skills to develop reflexive practice in supervision as well as addressing how to use reflexive practice to impact and enhance the supervision relationship (and the impact on both supervisees and supervisors).

Educational Objectives:

1. Describe how principles from process-based therapies can be used for reflexive practice within clinical supervision, with attention to professional, relational, and contextual influences.

2. Reflect on and evaluate how key processes (e.g. emotional responding, values, attentional focus, power and role dynamics) shape supervisory interactions and clinical decision-making.
3. Integrate process-based reflexive strategies into supervision to enhance professional competence, ethical practice, wellbeing, and the quality of client care.

**CEs Available (1.25):** CEs for Psychologists

### 95. Applied RFT for Generative Relational Language Training

**Symposium** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Original data*

Categories: RFT / RGB / language, Behavior analysis, Language Development, Applied-RFT

*Target Audience: Beginner, Intermediate*

**Location: C154**

Discussant: Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin  
 Elle Kirsten, Ph.D., BCBA, LBA, RLATE  
 Maithri Sivaraman, Ph.D, Teachers College, Columbia University  
 Christelle Gondat, DEA, BCBA, Autisme bel Avenir-SACS

Understanding and facilitating generative language remains a central challenge in behavior analysis. Relational Frame Theory (RFT) conceptualizes language as generalized operant relational responding and provides a framework for systematically teaching both nonarbitrary and arbitrarily derived relations. This symposium presents three complementary studies illustrating applied RFT interventions across a developmental continuum.

The first presentation examines procedures for establishing nonarbitrary relational responding in preschool children using Multiple Exemplar Instruction across distinction, comparative, and spatial frames, demonstrating generalized acquisition and increased spontaneous relational language.

The second presentation extends this work to arbitrarily derived relational responding in autistic children using the Relational Language Assessment and Training Elements (RLATE), including explicit training in transformation of stimulus function. Results show robust increases in generative language across relational frames.

The third presentation describes a clinically adapted, single-modality (visual) intervention targeting coordination and distinction frames in an autistic child, highlighting the application of a unimodal RFT-based teaching approach. Preliminary findings indicate progress in relational mastery and flexible language use.

Together, these studies highlight conceptual and clinical advances in applied RFT-based relational language training.

- *"I'm taller than Mummy" - Establishing Nonarbitrary Relational Responding in Preschoolers During Contrived Trials and Free-Talk*  
 Maithri Sivaraman, Teachers College, Columbia University

Understanding language acquisition is one of the greatest challenges in behavior analysis. Relational frame theory (RFT) provides a comprehensive approach to this challenge. Derived relational responding has been argued by RFT to be the basis for language, and nonarbitrary relational responding based on formal properties is said to provide a key foundation. The present study examined procedures to teach nonarbitrary relational responding to eight preschool children with and without developmental disabilities. We first identified specific training areas for each child spanning across distinction relations ("different"), comparative relations ("bigger/smaller", "more than/less than"), and spatial relations ("top/bottom"). Across all participants we evaluated the use of Multiple Exemplar Instruction (MEI) targeting two types of speaker and listener response topographies in establishing various forms of nonarbitrary relational responding. Overall, our procedures were effective, and the taught skills generalized across stimuli and trial types. Our training also produced improvements in some children's spontaneous use of relational cues during picture description trials. Conceptual implications and areas for future research are discussed.

- *"Colorless green ideas sleep furiously..." Applied-RFT for Training Functional and Meaningful Language*  
 Elle Kirsten, Ph.D., BCBA, LBA, RLATE, LLC

Training arbitrarily derived relational responding (ADRR) increases flexible, functional, and meaningful language in children struggling with language development beyond the basic verbal operants (i.e., mands and tacts). Research in relational frame theory (RFT) continues to find that operant acquisition of various patterns of relational framing is critical for increasingly complex linguistic development. This talk examines an RFT-based relational language curriculum, the Relational Language Assessment and Training Elements (RLATE). RLATE employs the relational evaluation procedure (REP), multiple exemplar training, and fluency instruction to teach increasingly complex derived relational responding, including the transformation of stimulus function (ToF), across various frames. Findings suggest explicit ToF training facilitates functional and meaningful arbitrary relational framing and generative language. Participants included 8- to 16-year-old autistic children who did not demonstrate arbitrary relational responding at intake. Post-training, all participants successfully generated derived relational responses across frames and levels of complexity, including ToF. Data showing the efficacy of the RFT-based language intervention will be shared.

- *Teaching Relational Frameworks in a Single Modality: a Simplified Approach to Supporting Language Generativity in Children with ASD*

Christelle Gondat, DEA, BCBA, Autisme Bel Avenir-SACS, France- La Réunion  
Pr. Jean-Louis Monestès, Ph.D.,

ABA is widely recognized for supporting the development of verbal and alternative communication in autistic people (Edgar et al., 2024). However, its protocols sometimes have limitations in terms of generativity, including a ceiling effect or the mechanical use of communication systems, limiting the spontaneous production of new utterances (Tager Flusberg, 2007; Eigsti et al., 2011). Relational frame theory (RFT; Hayes et al., 2001) offers a more nuanced understanding of this generativity of language (Ming & Stewart, 2019) and is relevant for autistic individuals, who are often less sensitive to linguistic flexibility (Stewart et al., 2013). Nevertheless, RFT procedures frequently involve multiple sensory modalities, which can lead to cognitive overload in some children (Gibbs et al., 2024). This presentation describes a single-modality (visual) intervention designed to teach coordination and distinction relational frames to an autistic child. Results indicate progress in mastering taught relations and the emergence of more flexible language use. This study provides a foundation for larger research on unimodal relational frame training in autistic children developing language skills.

Note: The present use of "autistic children" aligns with identity-first language preferred by many autistic individuals, as well as with recommendations in France for respectful and person-centered terminology (Autisme France, 2024).

#### Educational Objectives:

1. Describe how to use multiple exemplar intervention to establish nonarbitrary relational responding in young children
2. Describe RLATE for assessing and training relational language
3. Explain how to implement a single-modality intervention to teach coordination and distinction relational frames to a child with ASD

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

## 96. Understanding Autism Across Roles: Individuals, Siblings, and Caregivers

**Symposium** • 15:15 - 16:30

Translation: Not available

Components: *Didactic presentation, Experiential exercises, Literature review, Original data*

Categories: Processes of change, Social justice / equity / diversity, Neurodiversity, Autism Spectrum Disorder (ASD), Children, ADHD, Social Skills, Parents/Caregivers, Neurodevelopmental Conditions, Wellbeing, ACT, Mindfulness, Creative Arts Interventions

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

Chair: Lauren Lawson, Ph.D., La Trobe University

Sylvie Nguena, Ph.D., BCBA-D, Lewuh Behavioral Health Services, LLC and Community Support Services

Grazielle W Bonfim, Master's, Pontifícia Universidade Católica de São Paulo

Dana M Gadaire, Ph.D., University of Michigan

Ezaeza Gaby Sanz Galvan, Ph.D. Student, Edge Hill University

The experiences of individuals with Autism Spectrum Disorder and other neurodevelopmental conditions are embedded within complex family and social systems that shape wellbeing across multiple roles and developmental stages. This symposium brings together emerging research examining how mental health, adaptive functioning, and meaningful participation influence dynamics across autistic adults and neurodivergent youth to parents, siblings, and caregivers.

Across diverse methodological approaches, including longitudinal modeling, qualitative family interviews, single-case experimental designs, direct behavioral observation, and meta-analytic synthesis, the presented work explores key challenges faced by neurodiverse families. These include elevated caregiver stress, mental health difficulties among autistic adults, social barriers faced by youth, and relational dynamics affecting siblings and parents. At the same time, the research highlights promising directions for intervention, including culturally responsive approaches, skills that promote adaptive functioning, and supports that enhance wellbeing across family systems.

Together, the presentations offer an integrated perspective on how supporting wellbeing in autism requires attention not only to individuals, but also to the interconnected relationships and contexts that shape daily life for neurodiverse families.

- *Psychological Flexibility and Mental Health in Autistic Adults: A Multidimensional Longitudinal Study*

Lauren Lawson, Ph.D., La Trobe University  
Simon Bury, Ph.D., La Trobe University  
Amanda Richdale, Ph.D., La Trobe University  
Eric Morris, Ph.D., La Trobe University

Autistic adults experience high rates of mental health difficulties, including anxiety, depression, sleep difficulties, and burnout. Although Acceptance and Commitment Therapy (ACT) has been proposed as a promising intervention, research has not yet explored how all 12 psychological flexibility and inflexibility processes relate to mental health outcomes in this population. Participants (n=280) recruited via Prolific, an online research platform, completed the T1 survey, with T2 data collection scheduled for May 2026. Psychological flexibility and inflexibility were measured using the Multidimensional Psychological Flexibility Inventory (MPFI), along with measures of mental health symptoms (anxiety, depression, paranoid thinking, insomnia), mental wellbeing, and burnout. Cross-Lagged Panel Network Analysis (CLPN) will be used to assess the temporal and directional relationships between psychological flexibility/inflexibility and mental health variables. CLPN allows for analysis of how each psychological flexibility process influences mental health outcomes over time, as well as how mental health, in turn, impacts psychological flexibility. Understanding these relationships will support the development of targeted, neurodiversity-affirming interventions to enhance quality of life for autistic adults.

- *Culturally Adapted ACT and Direct Behavioral Measurement in African Immigrant Parents of Children with ASD*

Sylvie Nguena, Ph.D., BCBA-D, Lewuh Behavioral Health Services LLC, and Community Support Services, Inc.

Acceptance and Commitment Training (ACT) has demonstrated efficacy for parents of children with autism spectrum disorder (ASD); however, empirical studies have primarily relied on Western samples and self-report outcomes. This study empirically evaluated a culturally adapted ACT intervention conducted in the United States with West and Central Sub-Saharan African immigrant parents raising children with ASD, using direct behavioral measurement of committed action as an observable indicator of psychological flexibility. Experiment 1 (N = 39) experimentally compared culturally adapted and non-adapted ACT exercises on relationality, engagement, and perceived helpfulness. Exercise-level analyses revealed significantly greater engagement and perceived relevance for targeted adaptations. Experiment 2 employed a concurrent multiple baseline design across three parents, including two fathers, to evaluate functional changes in directly observed value-directed behaviors. Visual and level-change analyses demonstrated variable but clinically meaningful increases in committed action, with sustained improvement for one father and gradual gains for one mother. Results advance process-based ACT research by integrating cultural contextualization with objective behavioral indicators of values-based action in diverse communities.

- *Autism Spectrum Disorder and the Impact on Typically Developing Brothers and Sisters*

Grazielle Bonfim, M.Sc., Pontifícia Universidade Católica de São Paulo

People diagnosed with Autism Spectrum Disorder (ASD) may experience difficulties in daily activities, requiring continuous care that can affect their typically developing siblings (TDS). This study aimed to identify variables in family interactions influencing these dynamics, based on parents' verbal reports. Participants were ten mothers of children with ASD and TDS aged between 2 years and 6 months and 10

years. Data were collected through semi-structured interviews addressing family characteristics, parental routines, maternal overload, sibling interactions, and help-seeking behaviors. Most parents had a high level of education, and caregiving responsibilities were primarily assumed by mothers. Caregiver overload, stress, limited personal time, and lack of privacy were frequently reported. Mothers described difficulties in their relationship with the TDS, especially perceived asymmetry in treatment, jealousy, and attention-seeking behaviors. From the TDS perspective, aggressive behaviors were associated with sibling conflict, while ASD children's difficulties initiating play also contributed. Findings indicate that continuous caregiving demands shape family dynamics and have significant implications for the development and well-being of typically developing siblings.

- *Self-monitoring as a Pivotal Skill: A Multiple Probe Evaluation of a to a CBS-informed social skills intervention*

Dana Gadaire, Ph.D., University of Michigan  
Katrina Creel, Florida Institute of Technology  
Michael Kelley, University of Michigan

Youth with neurodevelopmental differences often experience social challenges that limit access to valued opportunities. Self-monitoring has long been used to support behavior change, yet its role as a pivotal skill within a contextual behavioral science (CBS) framework has not been thoroughly investigated. This study evaluated a CBS-informed self-monitoring intervention embedded in social skills intervention for 19 youth (ages 10–14) with Autism and/or ADHD. Using a multiple probe design across skills, we measured self-monitoring accuracy, skill performance, and collateral changes in untrained social behaviors. Visual and statistical analyses demonstrated clinically and statistically significant improvements in self-monitoring accuracy and skill performance, with generalized gains in untrained behaviors and settings. These findings support the assertion that self-monitoring functions as a pivotal skill with the potential to enhance success in untrained domains of social functioning.

#### Educational Objectives:

1. Identify key psychological flexibility and inflexibility processes linked to mental health outcomes in autistic adults.
2. Describe methods for directly measuring committed action as a behavioral indicator of psychological flexibility in ACT interventions.
3. Analyze caregiver outcome meta-analytic findings and apply these results to design and implement evidence-based psychological supports within their own services.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### 97. Beyond the Headset: ACT-Informed VR Exposure for Enhancing Psychological Flexibility in Specific Phobias: Greece & Cyprus Chapter Sponsored

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Mobile or digital technology, Clinical intervention development or outcomes, Specific Phobias

*Target Audience: Beginner, Intermediate*

**Location: C254**

Evi Neofotistou, M.Sc., Psychologist  
Vasiliki Tzola, M.A., Psychologist

Research highlights Virtual Reality Therapy (VRT) as a highly effective alternative to traditional exposure for specific phobias. Meta-analyses demonstrate that VRT offers comparable efficacy to in vivo exposure, with distinct advantages: higher patient acceptance, lower drop out rates, and significant neurobiological changes in brain regions associated with fear processing. Combining ACT with VR represents a pioneering approach that merges functional contextualism with immersive technology. Rather than focusing solely on habituation, this integration utilizes VR to facilitate "values-based exposure." Within a controlled environment, people encounter phobic stimuli while actively practicing acceptance and defusion. This synergy allows individuals to experience fear without experiential avoidance, using mindfulness to remain present. The exposure becomes a vehicle for strengthening psychological flexibility, linking the confrontation of fear directly to long-term goals.

This experiential workshop demonstrates custom VR scenarios (e.g., acrophobia, fear of flights) tailored to ACT-based interventions. Participants will explore how to weave flexibility exercises into VR and engage in a live simulation to personally experience ACT-informed exposure techniques.

Educational Objectives:

1. Implement ACT-based acceptance and defusion techniques within Virtual Reality environments to enhance psychological flexibility during exposure for specific phobias.
2. Explain the neurobiological evidence supporting Virtual Reality exposure and its clinical advantages over traditional in-vivo exposure methods for anxiety disorders.
3. Design values-based exposure hierarchies using customized VR scenarios to align phobic symptom treatment with the client's long-term life goals.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 98. Working with Acceptance in Couples Therapy: Process-Based Interventions in Interpersonal Contexts

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Couples Therapy

Target Audience: *Intermediate, Advanced*

**Location: C302**

Ahmet Nalbant, M.D., Private Practice

K. Fatih Yavuz, M.D., Private Practice

Acceptance is a core process within Acceptance and Commitment Therapy (ACT), yet its application in couples therapy requires nuanced adaptation to interpersonal dynamics. In intimate relationships, experiential avoidance often manifests as control attempts, emotional withdrawal, blame cycles, or rigid demands for change. Thus, acceptance in couples therapy extends beyond intrapersonal experience to include relational space-making and psychological flexibility within interaction patterns.

This workshop provides a process-based framework for understanding acceptance in couples therapy. Participants will examine how experiential avoidance operates within conflict cycles and how acceptance interventions can reduce escalation while increasing emotional openness and values-based responding. Theoretical foundations will be integrated with practical strategies, including in-session experiential exercises, acceptance-based relational interventions, and values clarification at the relational level.

Through demonstrations and structured practice, attendees will learn how to distinguish acceptance from resignation, facilitate emotional willingness without reinforcing harmful patterns, and support couples in shifting from change agendas toward flexible engagement. The workshop aims to equip clinicians with both conceptual clarity and applied tools for implementing acceptance interventions in relational contexts.

Educational Objectives:

1. Analyze acceptance processes within couples therapy by distinguishing experiential avoidance from relational willingness in common conflict cycles.
2. Apply at least two acceptance-based relational interventions to reduce escalation and increase emotional openness during in-session couple interactions.
3. Differentiate acceptance from resignation and formulate values-guided therapeutic responses that support psychological flexibility within intimate relationships.

**CEs Available (1.25):** CEs for Psychologists

Friday Afternoon Plenary 16:45

### 99. ACT Across Contexts: Insights from 20 Years of Anxiety and Cancer Intervention Research

Plenary • 16:45 - 17:45

Translation: AI online with your phone - audio or text

Components: *Experiential exercises, Original data*

Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Anxiety, Cancer

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Merieux (Overflow Rooms: Weil, Aristote, Perroux)**

Joanna J Arch, Ph.D., University of Colorado Boulder

Introduction by: Michael Levin, Ph.D., Utah State University



This talk will highlight key findings, lessons, and emerging directions from two decades of research on Acceptance and Commitment Therapy (ACT) across diverse populations—ranging from adults with anxiety disorders to those coping with cancer. I will begin by summarizing our early work evaluating ACT for anxiety disorders, then turn to our ongoing efforts in adapting and assessing ACT to support mental health, spiritual well-being, and treatment adherence among adults with cancer. Similarities and differences will be highlighted. Central insights emerging

from this work include the need to balance the many capabilities of ACT with simple, focused interventions, as well as the advantages and lessons of collaborating with community clinic staff to deliver ACT interventions. I will conclude by discussing key challenges and future directions for advancing ACT interventions across these contexts.

Educational Objectives:

1. Summarize key findings from randomized trials of ACT (and related interventions) for distressed cancer populations and adults with anxiety disorders from our lab.
2. Identify practical lessons, challenges, and future directions for implementing ACT interventions, including in community clinic settings.
3. Explain key strategies for using ACT with cancer populations and adults with anxiety disorders.

**CEs Available (1.00):** CEs for Psychologists BCBA CEUs

## Program Detail • Saturday • 18 July

Saturday Morning 8:00

**Bijeenkomst voor Vlaamse en Nederlandse ACT/RFT/enz enthousiastelingen**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Gounot**Jacqueline A-Tjak, A-Tjak Cursussen  
Mirjam Hohmann, Team Werklust

Het bestuur van de ACBS BeNe nodigt je uit om samen te komen met andere Vlaamse en Nederlandse ACT/RFT/enz enthousiastelingen. Je hoeft geen lid te zijn om erbij te kunnen zijn. Het is een informele bijeenkomst, waar je, als je wilt, wat meer informatie kunt krijgen over onze Belgisch-Nederlandse vereniging. Het lijkt ons leuk om elkaar daar te kunnen ontmoeten.

**Brief Interventions SIG Meeting**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Mouterde**Jill Holtz, Presbyterian Hospital  
Ericka Rutledge, Wellness in Action, LLC

All are welcome.

**UK & ROI ACBS Chapter Meeting**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Aubert**Louise McHugh, University College Dublin  
Mark Oliver, Cumbria, Northumberland, Tyne and Wear NHS Trust  
Joseph Lavelle, Ph.D., Dublin Business School

Join board members of the UK and Republic of Ireland Chapter of the Association for Contextual Behavioral Science for an informal and welcoming chapter meeting at the ACBS World Conference in Lyon.

This gathering offers an opportunity to connect with colleagues, share updates on chapter activities, and discuss opportunities for collaboration across research, clinical practice, and training. Whether you are a long standing member, new to the chapter or just interested in our chapter, you are very welcome to attend.

We look forward to seeing you there and strengthening our UK&ROI ACBS community.

**Trauma SIG**

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Maldiny**Laurie Gallo, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine  
Laura Neal, The Behaviour Clinic

This is the second annual in person meeting for the Trauma SIG. We welcome members and new folks interested in learning more. We look forward to continuing to build community, as well as discuss initiatives including formation of a research subcommittee, peer consultation group, and speakers series. We also look forward to your ideas!

### Australia & New Zealand Meet-Up - ANZACBS Chapter

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C125**

Eric Morris, La Trobe University

G'day & Kia Ora!

Whether you're from down under, across the Tasman, or simply feel a connection to Australia or New Zealand: this one's for you.

Join fellow delegates for a relaxed catch-up, a chance to swap stories, and a little slice of home amid the conference buzz. Old friends and new faces are equally welcome, no dramas - get amongst it!

### Psychosis SIG

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C154**

Adrienne Lapidos, Ph.D., University of Michigan

Anyone interested in topics related to psychosis, including serious mental illness (SMI), voice-hearing, and early intervention, is welcome to attend.

Educational Objectives:

### Latin-American Culture and CBS SIG Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C225**

Alexandra Ávila Alzate, Universidad de Los Andes, Práctica Privada  
Daniel Granados, Asociación Contextual de Terapia, Práctica Privada

All are welcome to meet and greet with members and leaders at the conference to talk about what we have done and also get new ideas and feedback so we can continue to get better at the settlement of this SIG. Hope to see you there fellas!

### ACBS New England Chapter: Nurturing a Community with Heart

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C254**

Lisa Coyne, New England Center for OCD and Anxiety (NECOA), McLean OCD Institute for Children and Adolescents (OCDI Jr), Harvard Medical School  
Brooke White, Full Circle Health and Wellness, LLC

This meeting will provide an opportunity to gather, create community, and reignite the New England Chapter of ACBS. Come join us to connect, network, share resources, and tell us your hopes for our chapter in the coming years. We will create a space for conversation, creativity, and celebration of our diverse voices, lived experiences, and cultures. We will invite participants to contribute to a shared mission and vision, and to engage with us in deepening our ACT community in the northeast US with awareness, courage, and love. All members of the broader ACBS community are welcome and we hope you will visit and say hello!

### FAP SIG Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C302**

Daniel Maitland, University of Missouri - Kansas City

The Functional Analytic Psychotherapy (FAP) Special Interest Group (SIG) meeting at ACBS will focus on re-establishing sustainable leadership and setting clear, achievable goals for the upcoming year. As interest in process-based and relational approaches continues to grow, this meeting provides an opportunity to clarify the role of the FAP SIG within ACBS and to strengthen coordination among members committed to advancing FAP research, training, and clinical practice.

We will review the current status of the SIG, identify leadership needs, and invite members to step into defined roles with transparent expectations and manageable commitments. In addition, we will collaboratively generate 3–5 concrete goals for the next year, such as educational programming, student engagement, research collaboration, and communication infrastructure. Emphasis will be placed on feasibility, accountability, and shared ownership to ensure follow-through. All current and prospective members are encouraged to attend and contribute to shaping the future direction of the FAP SIG.

### Saturday Morning Plenary 9:00

#### 100. Embodied Flexibility: How the Body Expands the Horizon of CBS

Plenary • 9:00 - 10:15

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Experiential exercises*

Categories: Clinical intervention development or outcomes, Processes of change, Clinical Interventions, Somatic

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Merieux (Overflow Rooms: Weil, Aristote, Perroux)**

Manuela O'Connell, Lic., Private Practice

Introduction by: *Robyn D. Walsler, Ph.D., Trauma and Life Consultation and Psychological Services*



Contextual Behavioral Science (CBS) has offered a powerful, pragmatic, and functionally coherent account of human suffering and flourishing through the model of psychological flexibility. Within CBS, the body has often remained in the background, rather than being engaged as a central target of learning and transformation.

Over the past decades, somatic and body-based interventions have expanded across psychotherapy. This plenary proposes the possibility of an embodied CBS—one in which the body and somatic experience are more fully included within our understanding of learning and change. The talk reviews embodied interventions already operating within CBS and argues for their more explicit integration. The plenary introduces embodied metaphors as a way of integrating somatic interventions as contexts for learning new behavior. Embodied metaphors use bodily experience as the vehicle, allowing flexibility processes to be evoked and shaped directly at the level of lived experience.

Finally, moving toward a more embodied CBS is presented not as an add-on, but as an opportunity for conceptual growth, clinical refinement, and deeper alignment with the complexity of human suffering and resilience.

Educational Objectives:

1. Identify how bodily experience and somatic processes can be understood as sites of learning and transformation within Contextual Behavioral Science and the model of psychological flexibility.
2. Describe how embodied interventions and somatic experience can be explicitly integrated into core ACT processes, enhancing assessment, intervention, and learning.
3. Apply embodied metaphors as experiential contexts for evoking, practicing, and shaping psychological flexibility through lived, bodily experience.

**CEs Available (1.00):** CEs for Psychologists

Saturday Morning 10:45

**101. When All the Books are Gone: Poetics in Human Behavior Change****Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play*Categories: Clinical intervention development or outcomes, Processes of change, Clinical Behavior AnalysisTarget Audience: *Beginner, Intermediate, Advanced***Location: Merieux**

Lisa W Coyne, Ph.D., Harvard Medical School; New England Center for OCD and Anxiety

Kelly Wilson, Ph.D., University of Mississippi

The "holy grail" of clinical practice might be summarized as knowing the answer to this question: How can clinicians create a context where they say the exact right thing, at the exact right time, and in the right way to evoke epiphanies leading to meaningful growth and change in their stuck clients? Idionomic analysis is one answer, and while it is an essential part of behavioral assessment, it can feel heavily technical, clinical, and distant from the subtle and complex human experience it tries to capture. However, consideration of the poetics of human behavior change – rhythm, meter, tone, form, metaphor – may bring the practice of ACT to life in the way poetry evokes complex feelings and meanings through feel and sound rather than mechanism and manual. This workshop will explore, experientially, the poetics of behavior in individual psychotherapy. Using a contextual behavioral framework, presenters will discuss issues of process, invite participants into immersive experiential exercises, and provide opportunities to explore writing in behavior change.

Educational Objectives:

1. Apply poetics to enhance their clinical behavior analysis and create more evocative therapeutic moments with clients in Acceptance and Commitment Therapy
2. Identify and utilize a process-based approach that moves beyond technical idionomic analysis to capture the subtle, experiential dimensions of behavior change in psychotherapy
3. Integrate experiential writing exercises into their Acceptance and Commitment Therapy practice to deepen therapeutic process and facilitate client epiphanies through embodied, poetic exploration of behavior

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs**102. Artificial Intelligence in Contextual Behavioral Mental Health Interventions: Clinical and Research Priorities****Panel** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Strategic planning*Categories: Mobile or digital technology, Clinical intervention development or outcomes, Mental HealthTarget Audience: *Beginner, Intermediate, Advanced***Location: Gounot**

Chair: Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

Robert Johansson, Ph.D., Massachusetts Institute of Technology

Mike K Kemani, Ph.D., Karolinska University Hospital; Karolinska Institutet

Raimo Lappalainen, Ph.D., University of Jyväskylä

Hannah van Kolfschooten, Ph.D., LL.M, Centre for Life Sciences Law, University of Basel

Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong

Ken Carswell, DClInPsy, World Health Organization

Staci Martin, Ph.D., True North Therapy and Training

Artificial intelligence (AI) is rapidly moving from concept to clinic, with conversational agents, adaptive coaching systems, and data-informed decision supports reshaping how contextual behavioral

interventions are delivered. For clinicians, these technologies offer the possibility of extending care beyond the session, personalizing process-based support, and reaching individuals who may never access traditional services—while raising critical questions about preserving CBS principles of functional contextualism, process-based therapy, values-driven action, and psychological flexibility. For researchers, the technologies present methodological and conceptual challenges for therapy personalization, representation of psychological mechanisms, algorithmic biases, transparency, and ethical governance of therapy and data protection. This panel convenes leaders in contextual behavioral science, digital mental health, ethics, computer science, and AI who will discuss how AI can go beyond merely digitizing existing care--instead reimagining how contextual behavioral principles can be enacted at scale. Serving as a prelude to the following day's invitational retreat on AI in CBS, the session will preview a collaborative effort to articulate a CBS-informed framework for responsible innovation, with audience insights contributing to a community co-created roadmap for the field.

Educational Objectives:

1. Identify emerging clinical applications of AI in contextual behavioral interventions.
2. Describe ethical considerations including bias, transparency, privacy, and data governance.
3. Explain how CBS principles can guide responsible AI integration in practice and research.

**CEs Available (1.25):** CEs for Psychologists

### 103. ACT and Psychosis Recovery: International Perspectives on Translating Research to Practice in Clinical Settings: Psychosis SIG Sponsored

**Panel** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data, Strategic planning*

Categories: Clinical intervention development or outcomes, Dissemination or global health strategies, Psychosis

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Adrienne Lavidos, Ph.D., University of Michigan

Brandon Gaudio, Ph.D., Brown University and Butler Hospital

Eric Morris, Ph.D., La Trobe University

Joris Corthouts, M.Sc., PC St Hiëronymus

Merve Terzioğlu, M.D., Private Practice

Over the past two decades, ACT for Psychosis (ACT-p) has demonstrated meaningful effects in various settings, influencing outcomes such as rehospitalization, depression, and psychotic symptom distress. In real-world settings serving people with serious mental illness (SMI), particularly psychosis-spectrum disorders, ACT can be integrated within systems of care that include other models and practices, generating potential synergies, opportunities, and pitfalls. This international panel will discuss experiences translating ACT research into practice within real-world settings serving people with SMI, including topics such as (1) blending ACT/CBS and recovery philosophies within public mental health settings, (2) training frontline staff to provide ACT-informed interventions, (3) implementing the ART model, an ACT-p rehabilitation service model, and (4) conceptualizing invasive psychological experiences from a functional contextual perspective in frontline clinical practice.

Educational Objectives:

1. Describe the evidence informing ACT interventions for people with SMI.
2. Describe key features of alignment between ACT and Recovery Oriented Systems of Care.
3. List the key features of the ART model.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 104. From Symptoms to Processes: Current Research on PBT

**Symposium** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components: *Original data*

Categories: Processes of change, PBT, Idiographic Methods, Clinical Intervention

Target Audience: *Intermediate, Advanced*

**Location: Mouterde**

Chair: Giovambattista Presti, Ph.D., University of Enna Kore  
 Discussant: Annalisa Oppo, Ph.D., Sigmund Freud University  
 Claudia Minutola, M.Sc., IULM University  
 Andrew Gloster, Ph.D., Univeristy of Luzern  
 Katerina Georgiou, Ph.D., University of Cyprus  
 Andreas Larsson, Ph.D., Mid Sweden University

This symposium brings together empirical and methodological contributions addressing central challenges in process based clinical science. Across diverse designs and populations, the presentations examine how psychological processes can be operationalized, measured and modeled to better capture individual functioning and change. Focus is placed on the development and evaluation of process-based assessment strategies, the role of affective and behavioral dynamics, and the consequences of measurement choices for research and intervention. The contributions highlight potential imbalances in commonly assessed outcomes, raising questions about how prevailing practices may shape theoretical and clinical priorities. Complementing this perspective, intensive longitudinal and time-series approaches are used to investigate within-person variability and heterogeneity in process- outcome relationships, illustrating the limits of aggregate models. Additional work demonstrates how integrating multiple levels of assessment can clarify person-specific patterns associated with well-being, impairment, and adaptation. Taken together, these studies emphasize the importance of improving measurement precision, embracing methodological diversity, and refining analytic frameworks capable of representing dynamic, individualized psychological phenomena.

- *Current Research on Process Based Therapy: Assessment and Affective Change*

Claudia Minutola, M.Sc., IULM University  
 Giovanni Coppola, M.Sc., IULM University  
 Paola Kory, M.Sc., Kore University of Enna  
 Chiara Vona, Ph.D., Kore University of Enna  
 Giovambattista Presti, Ph.D., Kore University of Enna

Process Based Therapy (PBT) is an evidence-based model that promotes a transition from a symptom-centered framework to one focused on processes of change and individual functioning (Hofmann & Hayes, 2019; Hayes et al., 2020).

This contribution outlines the current state of research conducted by our group on PBT, focusing on two parallel lines of inquiry: the Italian validation of the Process Based Assessment Tool (PBAT) and research on affective change. The PBAT is a pool of items designed to assess functional behaviors associated with health and vitality, as well as dysfunctional behaviors related to psychological distress and potential clinical outcomes. The validation follows the hypotheses of the original model (Ciarrochi J., et al., 2022), tested through the use of a learning algorithm grounded in evolutionary concepts. In parallel, research on affective change conceptualizes affective states as dynamic phenomena and adopts valence to distinguish positive affect (PA) and negative affect (NA), highlighting their association with psychological well-being (Goicoechea et al., 2023).

- *You Are What You Measure: An Examination of Processes Assessed in Randomized Controlled Trials*

Andrew Gloster, Ph.D., University of Lucerne  
 Elisa Haller, Ph.D., Integrierte Psychiatrie Winterthur  
 Fiona Pfister, M.Sc., University of Lucerne  
 Stella Brogna, M.Sc., University of Lucerne  
 Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong  
 Clarissa Ong, Ph.D., University of Louisville  
 Cristóbal Hernández, Ph.D., Universidad de los Andes  
 Joseph Ciarrochi, Ph.D., Australian Catholic University

The outcomes measured in psychotherapy trials reflect and reinforce what we believe matters in psychological suffering and recovery. The reciprocal relationship between theory and measurement risks narrowing our understanding unless current practice captures the full breadth of human experience relevant to psychotherapy. To determine this, we examined all outcome measures used in psychotherapy trials in four leading journals over a four-year period, classifying each measure according to the PBT

process it addresses. Results showed that studies targeted Affect, Cognition, and Behavior most frequently, whereas outcomes measuring Motivation, Self, Attention, sociocultural, and physiological factors were underrepresented. These patterns were consistent across population, diagnosis, age groups and intervention type. Furthermore, only a minority of studies considered interpersonal factors. The findings reveal a preferential focus on specific constructs and a relative neglect of others. This neglect may represent a bias in the field and limit the development of theory and interventions.

- *Examining Inter-individual Variability in Processes of Change Relating to Anxiety*

Katerina Georgiou, Ph.D., ACTHealthy Lab, University of Cyprus  
Maria Karekla, Ph.D., ACTHealthy Lab, University of Cyprus

Group-level methodologies often fail to capture individual-level effects, resulting in aggregate values being applied to each and all cases. In the context of anxiety, assuming ergodicity implies that the average experience of people with anxiety applies to each individual case. This study examined inter-individual variability between processes of change relating to the outcome of anxiety. Participants (N = 9, Mage = 21.56, SD = 2.01) completed the Greek version of the Process Based Assessment Tool (G-PBAT) daily through the course of approximately 12 weeks. Analyses used the i-ARIMAX model of idionomic analysis. Results showed high inconsistency between process of change items and anxiety in almost all models, indicating that the relationship between behavioral processes of change and anxiety differ among individuals with similar experiences. This is the first study to apply idionomic data analytic approaches to time-series data relating to anxiety. Findings support the utility of and idiographic tool in a time-series fashion for tracking therapeutic change unique to each individual and informing personalized intervention.

- *Processes of Migraine: Integrating Trait and Behavioral Process Measures to Model Migraine-Related Disability*

Andreas Larsson, Ph.D., Mid Sweden University  
Vidar Ahlkvist, Mid Sweden University  
Joakim Rytter, Mid Sweden University

Migraine is a complex biopsychosocial condition influenced by dynamic psychological processes. This study combined cross-sectional assessment with idiographic ecological momentary assessment (EMA) to examine how psychological flexibility processes contribute to migraine-related disability and life satisfaction. Participants with self-reported migraine completed the Multidimensional Psychological Flexibility Inventory (MPFI), the Process-Based Assessment Tool (PBAT), HIT-6, pain acceptance, catastrophizing, and life satisfaction measures. Factor analysis supported a two-component structure of the HIT-6: symptom burden and functional interference. Regression and mediation models indicated that pain acceptance mediated the impact of symptom burden on life satisfaction, while psychological inflexibility predicted reduced life satisfaction. Boruta feature selection and process-level regressions highlighted PBAT indicators of distraction, fusion, and values disengagement as key predictors of headache burden. Idiographic EMA modeling revealed person-specific feedback loops involving values disengagement and impairment, aligning with trait-level patterns. These findings demonstrate the value of integrating idiographic and nomothetic ACT process assessment to inform personalized, process-based interventions for migraine.

#### Educational Objectives:

1. Identify and describe distinct approaches to measuring psychological processes and explain how different assessment strategies constrain or expand clinical inference.
2. Compare and evaluate how different measurement frameworks influence the identification and interpretation of processes of change.
3. Identify two measurable ACT-relevant psychological processes that contribute to migraine-related disability and explain how these can inform personalized, process-based intervention planning.

**CEs Available (1.25):** [CEs for Psychologists](#) [BCBA CEUs](#)

### 105. ACT Applied Inward: Therapist Processes in High-Impact Clinical Work

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Professional development, Therapist Processes

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Weil**

Henry Wong, Psy.D., Hospital Authority  
 Robyn D. Walsler, Ph.D., Trauma and Life Consultation and Psychological Services

ACT clinicians are trained to attend to their clients' psychological flexibility, yet the therapist's own behavioral repertoire is always part of the therapeutic context. Exposure to high-stakes situations such as chronic risk, deteriorating presentations, client suicidality, ethical threats, or perceived treatment failure often evokes powerful private events that shape therapist behavior in subtle but consequential ways. This workshop focuses on applying ACT principles to the clinician's own moment-to-moment responding under pressure. We will examine how fusion, avoidance, self-judgment, and role-based control strategies can narrow therapist flexibility, influence timing, and impact the therapeutic relationship. Using an ACT-consistent functional lens, participants will learn to notice, make room for, and skillfully respond to their internal experiences while staying oriented to values-based clinical action. Through experiential exercises, guided reflection, and structured dialogue, this workshop invites ACT practitioners into a deeper examination of what it means to practice ACT while practicing therapy. The emphasis is not on eliminating distress, but on expanding the clinician's capacity to remain present, responsive, and values-guided in the most challenging moments of clinical work.

Educational Objectives:

1. Apply ACT principles to the clinician's own responding in high-stakes clinical situations.
2. Analyze how a clinician's fusion, avoidance, self-judgment, and role-based control strategies impact therapeutic work with clients.
3. Apply ACT strategies to yourself during therapy sessions, particularly in challenging clinical moments.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 106. Teaching Adolescents to Break the Rules and Build Healthy Relationships

**Workshop** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, Behavior analysis, Adolescents, Youth, Relationships, Values, Rule-Governed Behavior

*Target Audience: Beginner, Intermediate*

**Location: Aristotle**

Sheri L Turrell, Ph.D., Life in Balance Therapy  
 Emanuele Rossi, Ph.D., APC-SPC, SITCC

Adolescents often navigate their social world through rigid verbal rules—internal scripts about how they should behave and what they must avoid. When fused with rules, their behavior is governed by mental instructions rather than by direct experience, impacting genuine connection. For young people struggling with relational difficulties, rule following can narrow their behavioral repertoire and distance them from the meaningful relationships they long for.

This workshop offers an experiential ACT based exploration of what it truly means to “break the rules.” Through experiential exercises, demonstrations, and reflective dialogue, participants will learn how to support adolescents in loosening the grip of rule following and opening space for psychological flexibility.

The session is designed to be lively, practical, and deeply human, offering participants concrete tools to help adolescents cultivate more flexible, authentic, and fulfilling behavior in relationships.

Familiarity with the hexaflex and functional analysis helps but is not required.

Educational Objectives:

1. Demonstrate how to use a functional analysis to identify relational rules and their impact.
2. Apply ACT-based strategies to promote flexible valuing in adolescents' relationships with themselves and others.
3. Identify practical approaches to help adolescents move from rule driven behavior toward more value oriented choices by enhancing context specificity.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 107. “Even if I am with the nicest person; I am on my guard”: Using CBS to Enhance Interpersonal Safety and Trust

**Invited** • 10:45 - 12:00

Translation: AI online with your phone - audio or text

Components:

Categories: Clinical intervention development or outcomes, Processes of change, Paranoia

Target Audience: *Beginner*

**Location: Perroux**

Jessica Kingston, DClinPsy, Ph.D., Royal Holloway, University of London



A defining feature of Contextual Behavioural Science (CBS) is its commitment to improving meaningful life outcomes for people experiencing psychological suffering. For many, valued outcomes include building close, safe, and fulfilling relationships. However, for individuals who experience paranoia—exaggerated fears that others intend to cause you harm—social connection can become a source of threat rather than safety. Across clinical and general population settings, paranoia is associated with distress, avoidance, and isolation, limiting opportunities for valued action and sustained interpersonal support.

This plenary will draw on a programme of research examining paranoia across adolescent and adult populations, focusing on psychosocial processes that shape the development of interpersonal threat beliefs and their impact on daily functioning. This work conceptualises paranoia as a dimensional phenomenon and an understandable response to social context and learning histories, often emerging alongside experiences such as bullying, adversity, discrimination, anxious attachment, and loneliness. The plenary will consider how key CBS processes—including mindfulness, values, and cognitive defusion—can inform understanding of the development, maintenance, and treatment of paranoia, with implications for supporting reconnection and valued living.

Educational Objectives:

1. Understand and formulate paranoid experiences within a psychosocial context.
2. Describe clinical methods of intervention for paranoia.
3. Critique the current evidence-base and consider important future directions.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 108. Beyond Technique: Therapist Sensibility and Psychological Flexibility as a Relational Process

**Workshop** • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Supervision and training, Therapeutic Relationship, Embodiment

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Aubert**

Jim Lucas, PG Dip CBT, Openforwards  
Manuela O'Connell, Lic., Private Practice

Psychological flexibility is often conceptualized as a set of client repertoires targeted through specific interventions. While this focus has clinical precision, it can inadvertently obscure the relational conditions under which flexibility emerges (Wilson et al., 2008; Steindl et al. 2023). Increasingly, clinical experience and research suggest that psychological flexibility is not only taught through technique, but is enacted, felt, and co-regulated within the therapeutic relationship itself (Walser, 2019).

This workshop proposes therapist sensibility; the therapist’s moment-to-moment capacity to perceive, respond, and position themselves in relationship; as a critical contextual variable shaping psychological flexibility. Drawing on ACT and functional contextualism, we’ll explore how therapist

behavior functions in real time to either invite or constrain flexibility, often prior to explicit intervention (Vilardaga et al., 2009).

Participants will engage in brief, structured relational practices that train embodied presence and dyadic co-regulation, and develop skill in identifying and flexibly responding to in-the-moment therapist choice points around timing, pacing, emotional proximity, and restraint. The workshop is designed for ACT clinicians seeking greater relational depth and embodied precision in complex work.

Educational Objectives:

1. Conceptualize psychological flexibility as a relational, co-regulated process, not only an individual client skill set.
2. Demonstrate embodied relational presence (brief dyadic co-regulation and pacing skills) to increase contact, safety, and openness in-session.
3. Identify and practise therapist choice points in role-plays, selecting responses more likely to invite psychological flexibility within the therapeutic relationship.

**CEs Available (1.25):** CEs for Psychologists

### 109. Harnessing Your Clinical Interventions by Targeting Hierarchical Framing

Workshop • 10:45 - 12:00

Translation: Not available

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

Categories: Clinical intervention development or outcomes, RFT / RGB / language, Hierarchical Framing, RFT, Defusion, Self-as-Context

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Maldiney**

Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz  
Bárbara Gil-Luciano, Ph.D., Madrid Institute of Contextual Psychology

Relational frame theory (RFT) conceptualizes psychological flexibility as framing ongoing private events in a hierarchy with the deictic "I," thereby reducing their discriminative functions and facilitating values-driven behavior (Luciano et al., 2023; Törneke et al., 2016). Hierarchical framing is thus a core process underlying defusion, self-as-context, and flexible perspective-taking. Although this analysis has informed the development of some intervention protocols, clinicians often struggle to identify and target hierarchical framing in session. This workshop will train participants to recognize opportunities for hierarchical framing and implement specific clinical strategies that strengthen this relational response. Through guided experiential exercises, live demonstrations, and structured practice, participants will learn to use verbal cues and metaphors that promote hierarchical framing and integrate these strategies into their clinical practice. Participants will leave with concrete tools to enhance the precision of their clinical interventions.

Educational Objectives:

1. Identify in-session opportunities for targeting hierarchical framing based on the conceptualization of psychological flexibility provided by relational frame theory.
2. Use verbal cues and metaphors that promote hierarchical framing of ongoing private events with the deictic "I" during clinical interactions.
3. Integrate hierarchical framing strategies into their existing clinical practice to enhance defusion, self-as-context, and values-driven behavior.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 110. RFT in Clinical Supervision: Training Case Conceptualization Skills

Workshop • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Role play, Strategic planning*

Categories: Supervision and training, RFT / RGB / language, Training and Case Conceptualization

Target Audience: *Intermediate, Advanced*

**Location: C125**

Scott M Charlton, M.S., Kaiser Permanente  
Nathan Lam, Kaiser Permanente

This interactive training workshop equips clinical supervisors and advanced clinicians with practical skills for applying Relational Frame Theory (RFT) principles to case conceptualization. Supervisors often encounter gaps in functional analyses—missing cognitive or sensory elements, or behaviors incongruent with their context—that challenge coherent case formulation. RFT provides a systematic framework for identifying these "missing links" by analyzing the relational frames maintaining client suffering.

Following brief didactic instruction on key relational frames (coordination, opposition, distinction, comparison, hierarchical, and deictic), participants engage in extensive behavioral rehearsal using structured case vignettes and supervisor role-plays. Attendees will practice identifying relational frames in clinical presentations, formulating process-based conceptualizations that specify contextual control variables, and applying frame-specific questioning techniques in supervision.

Participants leave with immediately applicable skills, structured question sets organized by frame type, and confidence in developing RFT-informed case conceptualizations. This workshop bridges the gap between RFT theory and practical supervision application, advancing training quality and treatment effectiveness across contextual behavioral science settings.

Educational Objectives:

1. Identify at least four types of relational frames (coordination, opposition, distinction, comparison, hierarchical, and deictic) operating in client presentations during case discussions.
2. Analyze how specific relational frames can explore patterns of psychological inflexibility that created or maintain client distress.
3. Apply structured questioning techniques in supervision to help therapists recognize their clients' verbal behavior and learning history.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **111. Compassionate Care in the Perinatal Period**

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Didactic presentation, Original data*

Categories: Clinical intervention development or outcomes, Processes of change, Compassion, Pregnancy, Postpartum Depression, Perinatal Loss, Perinatal Depression, Maternal Health

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C154**

Chair: Jennifer Berrett, DClInPsy, M.Sc., Cardiff and Vale University Health Board/Cardiff University  
Ana Xavier, Ph.D., RISE-Health, Portucalense University  
Andreea Astefanei, Ph.D. (C), Babes-Bolyai University  
Carlota Tortell Milhano, Cardiff University  
Cerith Waters, DclInpsy, Ph.D., M.Sc., Cardiff University  
Zhixuan Kang, B.D., School of Nursing, Fujian Medical University

The perinatal period is a critical window for shaping maternal well-being, parent-infant bonding, and family resilience. Emerging research highlights the transformative potential of compassion- and ACT-based interventions for supporting mothers, high-risk dyads, and parents navigating pregnancy after loss. Across diverse delivery formats, such as web-based programs, group intervention, or dyadic approaches, these studies reveal consistent gains in psychological flexibility, self-compassion, and emotional regulation. Preliminary findings indicate reductions in depression and anxiety, strengthened maternal-infant attachment, and enhanced relational coping. Attendees will explore practical strategies and implementation to promote sustainable perinatal mental health, offering pathways for compassionate, evidence-informed care during one of life's most pivotal transitions.

- *Care4Mommies: Preliminary Findings from a Pilot RCT of a Compassion-Based Intervention for Pregnant Women*  
Ana Xavier, Ph.D., RISE-Health, Portucalense University

Bruna Veloso, M.Sc., RISE-Health, Portucalense University  
 Ana Conde, Ph.D., RISE-Health, Portucalense University  
 Joana Silva, Ph.D., RISE-Health, Portucalense University  
 Natália Machado, M.Sc., ULS Alto-Ave, UCC Guimarães  
 Paula Vagos, Ph.D., William James Center for Research, University of Aveiro  
 Lara Palmeira, Ph.D., RISE-Health, Portucalense University

The perinatal period represents a critical window for preventing maternal mental health difficulties and promoting early mother-baby bonding. While Compassion-based Interventions have shown promise, their implementation in primary health care remains scarce. This study presents preliminary findings from the "Care4Mommies in Action" project, an ongoing pilot randomized controlled trial in Portuguese public health centers. Pregnant women ( $\leq 34$  weeks gestation) are randomized in either a five-session group Compassion Mind Training intervention plus Treatment-as-Usual (TAU) or TAU alone. We address the primary research question: Does the intervention promote mothers' compassion and higher quality mother-baby bonding? We examine pre- and post-intervention data from 40 participants and explore whether changes in self-compassion-related processes mediate improvements in attachment and mental health outcomes. We will discuss the challenges of implementing group interventions in public settings and the potential of compassion training to sustain maternal well-being and early bonding quality.

- *Enhancing Psychological Flexibility in Postpartum Depression: Feasibility of a Web-Based Intervention Program*

Andreea Astefanei, Ph.D. (C), Babes-Bolyai University  
 Mircea Miclea, Ph.D., Babes-Bolyai University

Despite the effectiveness of psychological interventions for postpartum depression (PPD), only 13% of affected women seek help due to barriers like stigma, lack of time, and reduced mobility. Web-based programs can increase treatment access, yet the field remains in early development. This trial evaluates the feasibility, usability, and potential efficacy of a guided web-based intervention. Thirty women with PPD symptoms (EPDS > 9) completed five multimedia modules and three online support group sessions. The program focused on increasing acceptance of difficult emotions, defusion from self-critical thoughts, and maternal values. Assessments occur at screening, posttest, and 1-month follow-up. We evaluate effects on depression, anxiety, maternal attitudes, negative thoughts, and self-efficacy, testing if improvements are mediated changes by changes in psychological flexibility and self-compassion. Usability is assessed via semi-structured interviews. This study is currently in progress. Data will be analyzed using linear mixed-effects models and mediation analysis. Findings will discuss the role of psychological flexibility as a key mediator in postpartum recovery, evaluating if this scalable format effectively addresses traditional barriers to care.

- *ACT for Pregnancy After Perinatal loss: Findings from a Novel Group Intervention (ACT-PAL)*

Jennifer Berrett, Ph.D., Cardiff and Vale UHB, Cardiff University  
 Carlota Tortell Milhano, Cardiff University  
 Cerith Waters, Ph.D., Cardiff and Vale UHB, Cardiff University  
 India Galanti, Cardiff University  
 Ciara Puckerin, Cardiff University  
 Sarah Douglass, Ph.D., Cardiff and Vale UHB, Cardiff University

Perinatal loss refers to pregnancy loss or neonatal death occurring between conception and up to 28 days after birth (Donegan et al., 2023). Approximately 15-25% of parents will experience symptoms such as anxiety, depression and post-traumatic stress following perinatal loss (Bhat et al., 2016; Cote-Arsenault & Mahlmeister, 2012; Hunter et al., 2017; Lee et al., 2017), and around 25-50% of parents will experience complicated grief (Kersting & Wagner, 2012). Research exploring psychological interventions for perinatal loss is limited (Campillo et al., 2017), with a growing evidence base for third wave therapies. This presentation will share findings from a year-long evaluation of a novel ACT-based group intervention delivered in Wales, UK, for mothers experiencing pregnancy-after-loss. Drawing on both quantitative and qualitative data, it will highlight the intervention's positive impact on participants' experiences of pregnancy and illustrate how self-reported increases in psychological flexibility were reflected in their daily lives. The findings indicate that the group is a safe, feasible, and acceptable psychological intervention for pregnancy-after-loss. The presentation will conclude by outlining future directions for research and practice.

- *Dyadic Acceptance and Commitment Therapy for Perinatal Depression High-risk Couples: A Randomized Controlled Trial*

Zhixuan Kang, B. D., Fujian Medical University  
 Ping Gao, M.D., Fujian Medical University  
 Feifei Huang, Ph.D., Fujian Medical University

Background: Perinatal depression (PND) is highly prevalent, harming maternal-infant and family well-being. Individual-focused interventions inadequately address family-centered relational processes. This study evaluated a dyadic, process-based ACT for PND dyads (ACT-PDDI). Methods: A randomized controlled trial (November 2024-February 2025) was conducted at a tertiary hospital in Quanzhou, China. High-risk PND dyads received either ACT-PDDI plus routine care or routine care alone. Outcomes were assessed at baseline, post-intervention, 12 weeks postpartum and analyzed using GEE models and repeated-measures ANOVA. Feasibility and fidelity were evaluated through completion rates, satisfaction, adverse events, and interviews. Results: Among 120 couples (60 per group), 55 intervention and 58 control dyads completed follow-up. At 12 weeks postpartum, the intervention group demonstrated significantly reduced depressive symptoms, cognitive responses, and psychological distress, alongside improved psychological flexibility, sleep quality, dyadic coping, and intimate relationship (all  $p < 0.05$ ). The completion rate was 91.67%, with high satisfaction and no adverse events. Interviews highlighted self-awareness and relational transformation. Conclusions: Dyadic ACT was effective and feasible for high-risk PND dyads, offering a cultural approach for perinatal mental health.

#### Educational Objectives:

1. Analyse preliminary data regarding the hypothesis that self-compassion changes explain improvements in mother-fetal attachment.
2. Identify key factors involved in the maintenance of postpartum depressive symptoms, specifically focusing on the role of experiential avoidance and lack of psychological flexibility in the transition to motherhood.
3. Identify the core components of the ACT-PDDI intervention and the seven primary outcome domains targeted in perinatal depression high-risk couples.

**CEs Available (1.25):** [CEs for Psychologists](#)

### 112. From Isolation to Connection: Group-Based Pathways to Resilience

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Original data*

Categories: Clinical intervention development or outcomes, Processes of change, FAP, Loneliness, Resilience, Compassion, Connection, PTSD, Compassion-Focused Therapy, Chronic Pain, Nurse Clinic, Mindfulness, Substance Use

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

Chair: Arryn A Guy, Ph.D., Illinois Institute of Technology

Ela Ari, Ph.D., Istanbul Medipol University

Güler Arslantaş, Istanbul Medipol University

Michaela B. Swee, Ph.D., ABPP, McLean Hospital/Harvard Medical School

Ching Yee Lam, Ph.D., RN, Hong Kong Metropolitan University

Gita Sankaran, Psy.D., BCBA, WeCAN Indian

Swati Narayan, BCBA, WeCAN

Isolation can intensify personal challenges, but new innovations show how connection can transform struggle into growth. This session highlights innovative group interventions that harness process-based approaches, including Acceptance and Commitment Therapy (ACT), Functional Analytic Psychotherapy (FAP), and Compassion-Focused Therapy (CFT), to promote resilience across diverse populations. For adults navigating loneliness, trauma survivors cultivating self-compassion, chronic pain patients building adaptive coping, under-resourced women taking meaningful steps, and transgender adults confronting stigma and substance use, groups offer a unique opportunity for psychological and relational change. Participants will explore practical strategies to foster interpersonal courage, values-driven action, and experiential engagement, while learning to leverage the relational dynamics of groups to accelerate behavioral transformation. Attendees will leave inspired and equipped to design, implement, and scale group interventions that turns shared experiences into meaningful change.

- *A FAP-Based Group Intervention for Loneliness in Emerging Adulthood: Single-Case Study*  
Ela Ari, Istanbul Medipol University  
Güler Arslantaş, Istanbul Medipol University

Loneliness is an increasing global concern. Although research on loneliness among older adults has received substantial attention, interventions targeting youth remain relatively understudied. Functional Analytic Psychotherapy (FAP), which emphasizes the therapeutic relationship as a mechanism of change, offers a framework for strengthening interpersonal connections. Building on this framework, an 8-week, in-person FAP-based group program was developed to bring participants together through experiential practices supporting interpersonal awareness, emotional openness, and courageous relational engagement. The program was implemented to examine changes in loneliness, resilience, awareness, and self-compassion among 11 university students using an AB+ single-case experimental design. Participants completed daily assessments over 89 days alongside standardized pre- and post-intervention measures. Daily data were analyzed using TAU-U and visual analysis, with Hedges'  $g$  estimating effect sizes, while standardized outcomes were evaluated using the Reliable Change Index and the Wilcoxon signed-rank test. Results indicated reductions in loneliness and increases in self-compassion, resilience, and awareness, with notable improvements in courage, depressive symptoms, and stress. These findings provide preliminary evidence supporting relationship-focused interventions for loneliness in emerging adulthood.

- *Compassion-Focused Group Therapy is Associated with Meaningful Changes for Survivors of Trauma*

Michaela B. Swee, Ph.D., McLean Hospital/Harvard Medical School  
 Xi Pan, LICSW, M.A., Columbia University  
 Allison G. Corman, LICSW, McLean Hospital  
 Alexandra M. Dick, Ph.D., McLean Hospital/Harvard Medical School  
 Jessica M. Margolis, LICSW, McLean Hospital  
 Juliann B. Purcell, McLean Hospital/Harvard Medical School  
 Meghan E. Shanahan, NP, McLean Hospital  
 Lauren A.M. Lebois, Ph.D., McLean Hospital/Harvard Medical School  
 Milissa L. Kaufman, M.D., Ph.D., McLean Hospital/Harvard Medical School  
 Matthew A. Robinson, Ph.D., McLean Hospital/Harvard Medical School

Compassion-focused therapy (CFT; Gilbert, 2010) is a process-based biopsychosocial approach that aims to help individuals experiencing shame and self-criticism. The current study investigated the effects of a 12-week CFT group for survivors of trauma ( $N=87$ ) seeking treatment in an outpatient trauma program of a large psychiatric hospital. Patients were 40 years old on average, majority White (84%); White, and majority cisgender women (72%). Results evidenced large decreases in PTSD symptoms,  $t(78)=-8.87$ ,  $p<.001$ ,  $d=-1.00$ , shame,  $t(86)=-9.39$ ,  $p<.001$ ,  $d=-1.01$ , self-hatred,  $t(83)=-7.48$ ,  $p<.001$ ,  $d=-0.82$ , and fears of self-compassion,  $t(81)=-9.04$ ,  $p<.001$ ,  $d=-1.00$ , as well as moderate decreases in depressive symptoms,  $t(80)=5.81$ ,  $p<.001$ ,  $d=-0.65$ . Individuals experienced large increases in self-compassion,  $t(56)=7.87$ ,  $p<.001$ ,  $d=1.04$ , and self-reassurance,  $t(84)=8.90$ ,  $p<.001$ ,  $d=0.97$ , over the course of the group. A separate qualitative study of the group described powerful lived experience of individuals who participated. This study is the largest study of CFT in a clinical civilian sample of individuals seeking trauma-focused treatment and demonstrates the power of group therapy and compassion-focused approaches for survivors of trauma.

- *Beyond Pain Scores: Evaluating a Group-based ACT Programme at Nurse Outpatient Clinic of Chronic Pain*

Ching-yee Lam, Ph.D., RN, Hong Kong Metropolitan University  
 Chun-mei Chang, MPainMed, RN, Hospital Authority, Hong Kong  
 Ka-yee Lo, DNurs, RN, Hong Kong Metropolitan University

Chronic pain nurse clinics primarily provide biomedical management and nurses are most familiar with this approach, yet patients continue to struggle with distress, interference, and avoidance. Embedding ACT processes into these services may enhance psychological and functional outcomes in patients with chronic pain. This study evaluated the feasibility and acceptability and early outcomes of ACT sessions delivered by a nurse researcher within an outpatient nurse clinic for chronic pain, as the first step towards service integration. Fifty adults with chronic non-cancer pain were evenly randomised into either the ACT group or the control group – treatment as usual. Patients of ACT group received four 2.5-hour face-to-face sessions in addition to usual care. During this pilot phase, pre-post self-report measures assessed pain interference, mood, sleep quality, psychological flexibility, and treatment satisfaction. We also explored barriers and facilitators to implementation by analysing qualitative feedback from patients and nurses – time pressure, institutional support, and patient expectations. These findings inform strategies for training clinic nurses and integrating ACT processes into routine chronic pain services in future phases.

- *Strong Inside, Steady Outside: A Brief ACT Group Intervention for Underprivileged Women*

Gita Sankaran, Psy.D., BCBA, Wecan India  
 Swati Narayan, BCBA, WeCAN, India

Women living in underprivileged, high-stress contexts often experience chronic psychological strain with limited access to mental health support. Acceptance and Commitment Therapy (ACT), emphasizing psychological flexibility and values-based action, is well-suited for such settings, yet brief, culturally adapted group interventions remain underexplored. This study describes Strong Inside, Steady Outside, a single-session (1 hour) ACT group for women aged 20-38 in low-resource communities in India. The session used trauma-informed, low-literacy adaptations, including grounding exercises, metaphors, and experiential tasks targeting present-moment awareness, acceptance of difficult thoughts, cognitive defusion, values clarification, and small committed actions. Participants used stones or chits to externalize stress and identify daily challenges, then chose one personal value and one achievable action for the coming week. Preliminary outcomes indicate high completion, with most participants identifying a value and a small, realistic action. Qualitative reflections highlighted themes of "carrying stress silently," "recognizing thoughts as separate from self," and "small steps feel possible." Findings suggest that even a single-session ACT group can enhance psychological flexibility and support values-based action in low-resource contexts.

- *Mixed-Methods Pilot Results of a Trans-Led, ACT-Based Stigma and Substance Use Group for Transgender Adults*

Arryn A. Guy, Ph.D., Illinois Institute of Technology  
 Liza A. Kolbasov, AB, Illinois Institute of Technology  
 Jennifer Schwartz, LMSW, LAAN, TLC Community Advisory Board  
 Mika Baumgardner, Los Angeles LGBT Center  
 Kristi E. Gamarel, Ph.D., University of Michigan School of Public Health  
 Brandon A. Gaudiano, Ph.D., Brown University  
 Katie B. Biello, Ph.D., Brown University School of Public Health  
 Jae Sevelius, Ph.D., Columbia University  
 Alex Stitt, LMHC, Author of ACT for Gender Identity: A Comprehensive Guide  
 Christopher W. Kahler, Ph.D., Brown University School of Public Health

Using an explanatory sequential mixed-methods design with a community-based participatory research approach, we adapted and pilot-tested an Acceptance and Commitment Therapy-based, gender-affirming stigma reduction intervention ("the TLC Program") for transgender adults with past-year substance use problems (<https://doi.org/10.17605/OSF.IO/MF6Z9>). A community advisory board guided development of an initial 10-session protocol informed by focus groups with transfeminine adults (n = 21), interviews with transmasculine adults (n = 16), and input from providers and peers (n = 13). The protocol was revised based on pre-post questionnaires and exit interviews from two successive pilots (n = 16; n = 26). We present key findings informing the final 12-session TLC Program, including weekly within-person psychological distress and flexibility scores across 20 weeks. Substance use problems decreased from baseline (M = 16.81, SE = 2.26) to post-intervention (M = 9.33, SE = 2.47) and 3-month follow-up (M = 6.48, SE = 2.82). Qualitative themes included making peer delivery feel like mutual-help rather than group therapy, balancing values exercises, and discussing substance use explicitly each session. Implications for efficacy testing will be discussed.

#### Educational Objectives:

1. Identify and apply key FAP processes to support interpersonal connection and intervene loneliness among emerging adults.
2. Define compassion-focused therapy (CFT) and delineate the core evolutionary theory of CFT as it applies to trauma treatment.
3. Describe preliminary outcomes of a group-based ACT program on psychological flexibility, moods, and pain interference among chronic pain patients in a nurse outpatient clinic.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 113. Ignite 2

**Ignite** • 10:45 - 12:00

Translation: Not available

**Location: C254**

- *Behavior Analytic Learning Support Strategies in International Schools: Essential and Ethical Practices*

Robert M Gomez, Ed.D., BCBA, International School of Uganda  
 Junward G Soyosa, M.A., The American School of Kinshasa

Behavior analysts working in international schools often deliver support through various educational frameworks rather than stand-alone behavioral services. They frequently hold dual roles as Learning Support teachers and staff trainers support classroom teachers and teaching assistants. These contexts present distinct challenges, including diverse student profiles, culturally varied beliefs about learning support, and school systems designed primarily for academic instruction. Drawing on experience in international schools in Thailand, the Democratic Republic of Congo, and Uganda, this presentation examines how behavior analytic classroom strategies are adapted within learning support structures and which core processes are most vulnerable to being minimized. The talk highlights non-negotiable practices aligned with the Ethics Code, including competence, data-based decision making, accountability, and client dignity. A practical, school-embedded framework is proposed to help practitioners maintain procedural fidelity, monitor treatment integrity, and support teaching assistants while respecting educational constraints and family perspectives. The goal is not to impose a clinical model on schools, but to integrate behavior analytic practice in ethical, feasible, and culturally responsive ways.

- *Beyond Skills: The Potential of a Process-Based Path Forward for Sport Psychology*  
Luca Leithuisser, Royal Netherlands Air and Space Force

Performance psychology has traditionally focused on developing skills, tools and techniques. Provide an athlete with a focus cue or a pre-performance routine and performance frequently improves, at least in the short term. Such strategies are valuable, but may not address the underlying mechanism maintaining the problem.

What if we stopped pursuing “quick fixes” and dared to move below the surface to target processes?

This Ignite pitch explores Process-Based Therapy (PBT) as a promising direction for complex and context-sensitive performance environments (Gutman et al., 2025). Rather than applying standardized interventions, a process-based approach seeks to identify and target core psychological processes that enhance performance and well-being. In this way, PBT may refine the design of performance psychology interventions and thus increase effectiveness and sustainable change. Attendees will be able to describe the potential role and significance of adopting a process-oriented lens in both research and applied sport psychology.

- *Can Self-Compassion and ACT Principles Promote Resilience after Weight Regain?*  
Charlotte Hagerman, Ph.D., Oregon Research Institute  
Meghan Butryn, Ph.D., Drexel University

Although many people can successfully lose weight, most are unable to keep it off. In theory, weight loss maintenance should be simple—if someone is monitoring their weight, they can quickly reverse small regain as soon as it occurs. However, our preliminary data suggest that weight regain is psychologically taxing, leading to demoralization, frustration, and shame. Therefore, when individuals start to gain weight, they are not mobilized to reverse it; rather, they avoid and disengage from their health goals. We theorize that psychological tools to support resilience following weight regain are critical for long-term maintenance.

I will discuss the process of developing a tech-based weight loss maintenance program (“Momentum”) that uses brief mindfulness, acceptance, and self-compassion interventions to help participants respond more productively to weight regain. Interventions (e.g., videos, meditations) are deployed via smartphone app to support participants in the moments after they step on the scale. Challenges include distilling complex therapeutic frameworks into brief exercises and promoting engagement with the intervention in the absence of a clinician. Feedback from 10 pilot participants will be reported.

- *How Death Acceptance Defuses Fascism*  
Devin Guthrie, Ph.D., Life & Death Coaching

Terror Management Theory (TMT) links death anxiety with ingroup favoritism, outgroup aggression, rigid thinking, & attraction to charismatic leaders – all factors that make persons & populations vulnerable to fascism. Although numerous studies show that fascist tendencies increase after people think about their own mortality, it is not the thought of death that causes this increase but rather the attempt to suppress those thoughts & the anxiety they arouse. In other words, fascism’s allure is a negative externality of our control agendas surrounding our fear of death. Within an Acceptance & Commitment Therapy (ACT) framework, the solution becomes clear: Treat thanatophobia like any other anxiety & undermine the control agenda with psychological flexibility. A growing body of research suggests that death acceptance has equal & opposite effects to death avoidance, promoting prosociality, psychological flexibility, tolerance, authenticity, & experiential appreciation. This IGNITE invites you to use your ACT knowledge & skills to practice & teach death acceptance, thereby helping dissolve fascism at its psychological roots.

- *Making Sense of Masculinity. A Contextual Behavioral Perspective on Male-Specific Therapy Needs*  
Aleksander M Wilczynski, ACBS Polska

Men are often viewed as a privileged group and in the therapy room many of them still struggle with psychological difficulties shaped by their context of masculinity. Based on my experience both facilitating a support group for men and being a participant of one, I will discuss how narratives such as: "toxic masculinity," "male depression," or the idea that men cope through self-harm and acting out, can become objects of cognitive fusion. Although sometimes helpful as broad descriptors, these labels may reinforce self-stigma, when taken as personal truths.

Using principles from Contextual Behavioral Science, this talk highlights key processes relevant for male clients: fusion with masculinity norms, problem-solving urgency, emotional avoidance, and male-specific presentations of distress. I will illustrate how self-as-context, defusion, and creative hopelessness can support men in noticing their internal narratives without automatically following them.

The aim is not to define "healthy" or "positive" masculinity, but to show how therapists can examine their own attitudes towards masculinity and help male clients build a flexible, values-based relationship with their identity.

- *Playful Minds, Flexible Lives: Reimagining the Hexaflex*  
Beatriz Rodriguez, Psy.D., Institute for Life Renovation

According to the U.S. Bureau of Labor Statistics (2024), adults in the United States spend an average of five to six hours per day on total leisure activities and sports, with about 30 minutes spent solely on play. Based on what the science on playing says, we may need more than just 30 minutes of play time! Dr. Stuart Brown (2009) defines play as "a state of mind that one has when absorbed in an activity that provides enjoyment and a suspension of sense of time" (p. 60). When individuals engage in play, neural connections are created, resulting in higher creativity, emotion regulation, and resilience (National Institute for Play, 2025). All of these attributes resonate with the teachings of ACT, particularly when thinking about psychological flexibility. Imagine using play as a coping strategy to help you be more psychologically flexible. What would that look like? What would you do? This IGNITE presentation aims to describe how play can engage the six core therapeutic processes of ACT so as to increase psychological flexibility.

- *Psychological Inflexibility and Zest for Life in Older Adults: Preliminary Analysis with Longitudinal Data*

Laura García-García, Ph.D. Student, Rey Juan Carlos University  
Naoko Kishita, Ph.D., University of East Anglia  
María Márquez-González, Ph.D., Autonomous University of Madrid  
Claudia Benito-Rincón, Ph.D. Student, Rey Juan Carlos University  
Luis Manuel Pérez-Cardona, Ph.D. Student, Autonomous University of Madrid  
Lucía Jiménez-Gonzalo, Ph.D., Rey Juan Carlos University  
Natalia Martín-María, Ph.D., Autonomous University of Madrid

Zest for life—encompassing the will to live and enjoyment of life—has been considered an important aspect of successful aging. This study aimed to analyze the longitudinal association between psychological inflexibility and zest for life one year later in older adults. Participants were 205 individuals aged 65–92 years (76.6% women) who were assessed twice over a 1-year period in Spain, one of Europe's fastest-aging populations. Zest for life was measured using the item "I feel a sense of zest for doing things" and psychological inflexibility was assessed with the AFQ-Y8, adapted and validated for older adults. The logistic regression analysis showed that higher psychological inflexibility predicted lower zest for life one year later, even after controlling for relevant covariates, including chronological age, education level and gender ( $p < .05$ ). Research on Acceptance and Commitment Therapy in the context of successful aging remains limited. These findings suggest that psychological inflexibility plays a critical role in the longitudinal aging process, highlighting the need for further research in this area.

- *Race, Gender & Social Judgement: Differential Social Evaluation and Misogynoir in Autism-Associated Behaviours*  
Anabel Amadasu, M.Sc., Trinity College Dublin

Objective: To examine how misogynoir and systemic bias contribute to the under recognition of black autistic women and to situate this inequity within a CBS framework. As both black people and women have been historically underrepresented within autism research and media representation, it is important to consider what this means for how autistic black women are perceived by others and by themselves.

Methods: This conceptual synthesis draws on interdisciplinary research and literature on autism, intersectionality, social judgement and misogynoir, linking these ideas with CBS concepts such as learning through social context, cultural messages and psychological flexibility.

Results: Past research shows that autistic-associated behaviours are often judged negatively and that racialised and gendered stereotypes shape perceptions of warmth, competence and social acceptability.

These patterns may contribute to misunderstanding of autistic traits, reduced help-seeking and delayed or missed diagnosis among black women.

Implications: CBS-informed, context-sensitive approaches, including increasing psychological flexibility, improving culturally responsive diagnostic practice and supporting intersectional research, may help promote more equitable recognition, care and representation for autistic black women.

- *Reframing Suicide as an Interpersonal Phenomenon*

Taylor C. McGuire, M.A., Harvard University

Suicide is often conceptualized as an individual crisis, yet it unfolds within relationships. Despite decades of evidence demonstrating the interpersonal nature of suicide, dominant theories reduce relational life to singular constructs such as belongingness or connectedness. This narrowing limits our ability to understand how relationships shape risk across time and context. We argue that advancing suicide science requires a more comprehensive interpersonal framework. We introduce three conceptual models to address key gaps in existing theory. First, a multidimensional framework reconceptualizes relationships in terms of their existence, quality, and duration. Second, a static-dynamic framework distinguishes enduring interpersonal vulnerabilities from moment-to-moment relational shifts that influence risk. Third, an ecological multilevel framework situates interpersonal processes within broader intrapersonal and structural systems.

Together, these models reposition suicide as fundamentally embedded in relational and structural contexts, offering new directions for theory development, measurement, and culturally responsive prevention.

- *The "Kayfabe" of the Self*

Jared M Broussard, M.A., Thumos.Life Mindfulness & Psychotherapy

"Kayfabe" is the Professional Wrestling code of maintaining the illusion that the performance is real, not predetermined. The wrestler portrays a character so convincingly that the audience, and sometimes even the wrestler themselves, forgets where the person ends and the persona begins. In ACT terms, this is Fusion with Self-as-Content. This talk uses the history of pro wrestling to explain the liberation of Self-as-Content. When a wrestler "breaks Kayfabe," they acknowledge the performance without destroying the art. Similarly, mental health requires us to break the Kayfabe of our own egos. We will explore how recognizing our "character/persona" as a constructed performance allows us to step back, observe the script, and improvise a better ending.

- *Translation and Validation of an Updated Version of the Greek Psy-Flex*

Dafni Kyriakou, M.Sc., University of Cyprus  
Katerina Georgiou, Ph.D., University of Cyprus  
Maria Karekla, Ph.D., University of Cyprus

Given the previously reported deviations in the factorial structure of the original Greek Psy-Flex, the present study aims to validate an updated version of the Greek Psy-Flex (G-Psy-Flex II) in the Greek Cypriot population. The Psy-Flex scale consists of six items assessing psychological flexibility (PF) exhibited during the past week. A Confirmatory Factor Analysis will be conducted to identify the factorial structure of the G-Psy-Flex II. Incremental validity will be examined to determine whether the G-Psy-Flex II explains additional variance in PF over the original Greek Psy-Flex. It is hypothesized that the G-Psy-Flex II will reveal a unifactorial structure and result in a significant increase in explained variance of the PF. Data collection is currently in progress and expected to be completed by May 2026. Upon completion of data collection, statistical analyses will be performed using R. The validation of an updated version of G-Psy-Flex could provide added predictive value, supporting contextual behavioral assessments and interventions aimed at alleviating suffering and enhancing well-being.

- *We're All Gonna Die!: An ACT-Based Exploration of Death Awareness and Values Commitment*

Jonathan Kaplan, Ph.D., ABPP, SoHo CBT + Mindfulness Center

Death remains our most certain yet avoided reality. Integrating ACT's focus on psychological flexibility, Buddhist teachings on impermanence, and research on mortality salience representative of Terror Management Theory, this IGNITE presentation guides attendees through a transformative exploration of mortality. Rather than defensively avoiding death awareness, we can harness it as a catalyst for authentic living.

Attendees will be invited to defuse from cultural death-denial narratives and commit to concrete, values-based actions that honor life's finite nature. This session offers practical strategies for using death awareness—not as a source of existential dread—but as a compass pointing toward what matters most. By accepting our inevitable end, we can live with greater intention, meaning, and psychological vitality.

- *When Coping Is Not Enough: What Caregivers of Cancer Patients Teach Us About Psychological Flexibility*

Elena Gevorkian, Master, Independent researcher

Family members of children with cancer often experience emotional pressure while trying to cope as best they can. In a completed study of caregivers of pediatric oncology patients undergoing proton therapy in Saint Petersburg, Russia (N = 21; 17 mothers, 4 fathers) we assessed stress, coping, and quality of life using the following questionnaires: PSM-25, CISS, Q-LES-Q. In this sample, participants showed moderate to high stress and reduced quality of life. Emotion-focused coping was associated with higher distress, whereas greater knowledge of stress-management strategies and access to internal resources were linked to lower strain. Avoidance and distraction appeared helpful in the short term but were associated with limited resources. In this IGNITE talk, I use these findings to highlight a contextual behavioral science message: the key issue is not simply whether caregivers are coping, but how they are relating to distress and what actions they take in its presence. I show how these data point toward psychological flexibility, values-based action, and functionally informed support as central targets for ACT-oriented protocol in real-world medical settings.

***This session is not eligible for any type of CEs.***

#### **114. Understanding Shame, Perfectionism, and Catastrophic Performance Failure Through CBS**

**Symposium** • 10:45 - 12:00

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data, Strategic planning*

Categories: Sports or performance-enhancing, Processes of change, Perfectionism, Shame, Self-Compassion and Catastrophic Performance Failure

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Discussant: Trevor Jones, B.A., Aware Performance Group

Tanuj Kohli, Loughborough University

Sanna Turakka, M.Sc., M.Ed., University of Jyväskylä

Jorge Aguilar, M.D., Ph.D., Montefiore Einstein

Elite sport does not simply test skill—it amplifies shame, perfectionism, and threat-based learning histories (Gutman et al., 2025). Under pressure, these forces can collapse finely tuned motor systems into paradoxical breakdowns such as the yips (Lobinger et al., 2016). This symposium integrates quantitative, qualitative, and neuroscientific perspectives to examine how high-performance environments shape behavioral rigidity—and how compassion restores flexibility.

First, new mediation data demonstrate how self-compassion and ACT-related processes mediate the potentially toxic relationship between multidimensional perfectionism and mental health. Second, qualitative analyses of elite athletes' paradoxical performance episodes reveal how attachment histories, achievement cultures, and experiential avoidance converge to narrow behavioral repertoires under threat. Finally, drawing on predictive processing neuroscience and the ACE (Acknowledge–Compose–Engage) framework, we offer a neuro-contextual account of how shame and fear become over-weighted precision signals in fine motor control—and how compassion-informed interventions recalibrate these systems.

Across methodologies, we argue that performance collapse is not a failure of confidence, but a predictable outcome of threat-dominant regulation. This integration advances a bold contextual vision for CBS in performance psychology.

- *The Functional Contextual Narratives of Elite Athletes' Paradoxical Performance Experiences of Fine Motor Skills*

Tanuj Kohli, Loughborough University

Karl Steptoe, Loughborough University

Jamie Barker, Loughborough University

Denise Hill, Swansea University

Paradoxical performance research has explored gaps such as a thorough understanding of contextual factors and behaviour processes that can bridge practical challenges and theoretical models (Christensen

et al., 2015; Lobinger, 2016). Relational Frame theory and functional contextualism have the potential to address these gaps (Gutman et al., 2025). Our study explored the context and processes around paradoxical performances qualitatively. We conducted thematic analysis on interviews capturing skill learning and execution contexts, and behavioural responding during paradoxical performance events respectively. Developed themes reflected interplay between learning history, behaviour patterns, well-being and paradoxical performances; lack of self-compassion, attachment, avoidance, lack of purpose and fusion were extrapolated as processes from behavioural response interviews. Discussion untangled holistic impact (factoring well-being) of paradoxical performances, integrated understanding of paradoxical performances and the broad context through behaviour patterns, and the contextual influence of identified processes on paradoxical performances and recovery. Particularly, lack of self-compassion, acquired through learning contexts that included social hierarchies, skill mastery strategies, and achievement culture, was explored as a potential process linking perfectionism, paradoxical performances and well-being.

- *Perfectionism in Competitive Sport - How does self-compassion fit in the picture?*

Sanna Turakka, Faculty of Sport and Health Sciences, University of Jyväskylä, Finland

Ross G. White, Queen's University Belfast

Claudio Robazza, University of Chieti-Pescara

Katariina Keinonen, University of Jyväskylä

Montse C. Ruiz, University of Jyväskylä

This paper narrows in on multidimensional perfectionism (e.g. Stoeber, 2011; Gotwals et al., 2012) and mental health in competitive sport. A novel model is proposed with four distinct mediators between perfectionism and mental health indicators: self-compassion, fear of self-compassion, and forms of responding to self-critical thoughts with mindful acceptance or unworkable actions. The theoretical framework of this paper innovatively combines the functional similarities of CFT- and ACT- based approaches with new trends in research on emotions (e.g. Ruiz et al., 2021) in sport and performance psychology. A functional and contextual stance to human behavior in environments that pull for threat responses is explored throughout the presentation. The presentation concludes with practical and theoretical implications of the proposed model on the advancement of wellbeing among athletes.

- *Releasing the Performance Handbrake; How Contextual Behavioral Science, Compassion and Neuroscience are Helping Performers Move Beyond the Hopelessness of the Yips*

Trevor Jones, Private Practice

Jorge Aguilar, M.D., Private Practice

Elite performers train for precision, and applied sport psychology has traditionally targeted confidence, focus, and emotional control to protect that precision under pressure. Research has expanded our understanding of performance anxiety and perfectionism, and neuroscience has illuminated the predictive nature of motor control (Harris et al., 2024). However, catastrophic breakdowns such as the yips continue to defy mechanistic accounts: highly skilled athletes can experience sudden loss of fluency despite intact ability, often accompanied by shame, threat sensitivity, and escalating self-monitoring. Drawing from Contextual Behavioral Science and predictive processing, and informed by contemporary extensions of the Fear-Avoidance Model (Varangot-Reille et al., 2024), we propose the "Performance Handbrake" model: under high-stakes conditions, threat-based learning histories can lead to over-weighted danger predictions in fine motor systems, narrowing behavioural repertoires and disrupting skill execution. We outline how compassion-informed, process-based interventions-operationalised through the ACE (Acknowledge-Compose-Engage) framework-recalibrate threat precision through behavioural re-engagement rather than reassurance. This model integrates neuroscience and contextual principles to advance a flexible, non-pathologising account of catastrophic skill breakdown.

#### Educational Objectives:

1. Develop a contextual case conceptualization of catastrophic skill breakdown using the "Performance Handbrake" Venn diagram, integrating precision-weighting, shame, and threat-based learning histories.
2. Identify processes that are potentially transformative for perfectionistic athletes' mental health and wellbeing.
3. Integrate behaviour processes with behaviour patterns rooted in learning history for a functional understanding of catastrophic performance failure.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

Saturday Afternoon 13:15

**115. Body-Related Shame and the Transformative Power of Perspective Taking****Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Case presentation, Didactic presentation, Experiential exercises, Role play*Categories: Clinical intervention development or outcomes, Health / behavioral medicine, Shame, Self-CriticismTarget Audience: *Beginner, Intermediate, Advanced***Location: Merieux**

Jenna LeJeune, Ph.D., Portland Institute for Psychedelic Science

Sarah Pegrum, Ph.D., Pegrum Therapy &amp; Training

People in stigmatized bodies, including those in larger or physically disabled bodies, often encounter experiences of rejection, stigmatization, or invalidation. These experiences can become internalized, resulting in increased body-related shame. While addressing distal stressors requires systemic change (Meyer, 2003), proximal stressors can be addressed through individual therapy. This workshop is designed to introduce attendees to the Empathic Reimagining Task (ERT), a CBS-based perspective-taking intervention that also draws from imagery rescripting. The ERT has been used in clinical trials to target various forms of shame and self-criticism. In this workshop, we will focus on how the ERT can be used in clinical settings to address proximal stressors related to stigmatized bodies. Attendees will learn how the ERT can help clients 1) access self-acceptance, empathy, and adaptive needs related to shaming experiences, 2) practice self-compassion and values-based relating to their body, and 3) recontextualize shame as a response to societal stigma rather than individual fault.

Educational Objectives:

1. Describe the impact of societal stigma on individuals in larger or physically disabled bodies, including the development of internalized shame.
2. Identify key CBS processes (e.g., perspective-taking, cognitive fusion, experiential avoidance) implicated in body-related shame.
3. Explain the core components and therapeutic aims of the Empathic Reimagining Task as a CBS perspective-taking exercise.

**CEs Available (1.50):** [CEs for Psychologists](#)**116. Changemakers Beyond Capitalism: How to Engage in the Public Square Toward What Matters Now: Australia & New Zealand Chapter Sponsored****Panel** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Strategic planning*Categories: Evolutionary behavioral science, Dissemination or global health strategies, Leadership, Change Making, DNA-V, Prosocial, Community, WellbeingTarget Audience: *Beginner, Intermediate, Advanced***Location: Gounot**

Chair: May Chi, Psychologist, Made It Clinic

Paul WB Atkins, Ph.D., ProSocial World

Louise Hayes, Ph.D., LaTrobe University

Carly L McKinnis, BSC, HONS, MPSYCH, One Red Tree Resource Centre

Arianna Prudenzi, Ph.D., The University of Sheffield

Viveka Ramel, Ph.D., Sevitara and University of California Eco-Resilience Group

The tools and ideas of Contextual Behavioural Science (CBS) position us to create sustainable change despite real-world constraints. This panel brings together different perspectives to look beyond current definitions of cooperation, value, and purpose, and to consider our emerging context and how post-capitalist capacity shapes societal wellbeing.

The panel is led by experienced changemakers; people with careers based on leading with their head, heart, and hands to promote vital communities.

The panel will excite those who want to think beyond their current contexts, and apply practical examples of change-making to their specific circumstance. The intention is a vibrant collaboration between the panel and audience.

Discussion Questions:

How has exposure to CBS collaboration changed your awareness of, and hope for, the future of humanity?

What does post-capitalist collaboration look like in practice?

How has this changed power and collaboration in your community?

How do we help people recognise their capacity to make change from the grassroots, using what we know from CBS perspectives?

What helps collaboration in practice, and what typically gets in the way?

Educational Objectives:

1. Describe multiple accessible ways of applying CBS to create grassroots change.
2. Identify one opportunity for action that is specific to personal circumstance and context.
3. Demonstrate one CBS-consistent strategy for collaboration (e.g., values clarification, working with power dynamics, prosocial commitment-making).

**CEs Available (1.50):** [CEs for Psychologists](#)

### **117. Making Sense and Making Choices: Integrating ACT and Existential Practice**

**Panel** • 13:15 - 14:45

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review*

Categories: Theory and philosophical foundations, Processes of change, Modality Integration

*Target Audience: Beginner*

**Location: Barrot**

Chair: Jim Lucas, PG Dip CBT, Openforwards

Oksana Martysiak-Dorosh, Ph.D, Academy of CBT in Ukraine

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

Ray Owen, DClinPsychol, DRO Psychology Services

Robyn D. Walser, Ph.D., Trauma and Life Consultation and Psychological Services

Values work invites clients to explore what makes life meaningful (LeJeune et al, 2019). Yet when conversations turn toward death, isolation, or the search for purpose, many practitioners feel uncertain about their responses. Existential therapy offers a long tradition of engaging these “givens of existence” (Yalom, 1980; van Deurzen, 2014) through presence, authenticity, and personal responsibility. Though arising from different philosophical roots, ACT and existential therapy share a spirit of non-pathologising, experiential inquiry and freedom of choice (Ramsey-Wade, 2015).

Discussing these challenges in contexts as varied as trauma, terminal illness and life in a warzone, this panel brings ACT and existential perspectives into dialogue, exploring how each approach helps clients face the realities of existence while moving toward meaningful action. Panellists will examine where functional contextualism and existential phenomenology intersect and diverge, and how existential insights can enrich ACT’s capacity for depth and compassion. Participants will leave with practical language, reflective prompts, and clinical examples that illustrate how existential awareness can strengthen values work and support psychological flexibility in the face of life’s ultimate concerns.

Educational Objectives:

1. Identify key similarities and distinctions between ACT and existential therapy, including their approaches to meaning, choice, and suffering.
2. Describe how existential themes (death, freedom, isolation, meaninglessness) show up in ACT work, especially in values clarification and creative hopelessness.
3. Apply existential perspectives in an ACT-consistent way to enhance depth and compassion in client conversations.

**CEs Available (1.50):** [CEs for Psychologists](#)

**118. Relationships in Therapy and in Life****Symposium** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Literature review, Original data*Categories: Theory and philosophical foundations, Social justice / equity / diversity, RelationshipsTarget Audience: *Beginner, Intermediate***Location: Mouterde**

Discussant: Linda Parrott Hayes, Ph.D., University of Nevada

Mitch Fryling, Ph.D., California State University, Los Angeles

Daniel W. M. Maitland, Ph.D., University of Missouri

Barbara S Kohlenberg, Ph.D., University of Nevada Reno School of Medicine

Jennifer K Truitt, B.A., University of Missouri

This symposium centers on the topic of relationships, both within psychotherapy specifically, as well as in life more broadly speaking. This includes a consideration of relationships when a loved one has died or is absent (the first presentation) and a conceptual analysis of cultural stimulus functions in the context of relationships (the second presentation). The third presentation describes an intervention study looking at behavioral activation compared to FAP enhanced behavioral activation, with LGBTQ+ young adults who are experiencing loneliness and depression. The fourth presentation considers factors that impact Black and Latinx communities, and how these factors may be conceptualized and incorporated into individualized and context specific support. The symposium will conclude with a discussion reflecting on cultural psychology and conceptual foundations for psychologists and therapists doing work in this important area.

- *Love and Relationships when the Loved one has Died or is Absent, a Behavioral Exploration*  
Barbara Kohlenberg, Ph.D., University of Nevada, Reno School of Medicine

Social relationships are associated with health and wellbeing, as well as psychological and physical suffering. Within contextual behavioral science traditions, relationships are typically studied based upon observable behaviors that occur between living people. This paper will explore relationships between one person, who is living, and another who is deceased. Ambiguous loss will also be considered, such as when the lost person may or may not be deceased, but is not findable due to dementia, is missing, and chosen absence such as adoption or estrangement. There is much variability, within families, and across cultures with respect to these relationships. Some people find no connection with loved ones after death. Others continue to set a place at the table, and distinctly feel the deceased person's presence. People describe "moving on" from losses, as well as reporting continued interaction even when the loved one is lost. Longing, yearning, and continued connection, or no connection, between people who are living, and their absent loved ones will be explored, from a Contextual Behavioral Science perspective.

- *Cultural Stimulus Functions in Relationships*  
Mitch Fryling, Ph.D., California State University

The importance of relationships is increasingly highlighted throughout work in CBS, and is especially emphasized in Functional Analytic Psychotherapy (FAP; Kohlenberg & Tsai, 1991). This presentation focuses on the therapeutic relationship in more detail, from the perspective of the interbehavioral analysis of cultural psychological events. The analysis considers relational interactions as dynamic interactions, not caused by any one factor, but rather multiple-factors. Following from this, shared or relational stimulus functions are described and distinguished from cultural stimulus functions (which develop during the process of culturalization). Within therapeutic relationships involving individuals who may have had different culturalization processes, cultural stimulus functions that are not shared between the therapist and client are likely. This presentation includes examples of cultural stimuli within relationships, focusing on situations where cultural stimuli can result in both therapeutic ruptures as well as the necessity of these differences to promote growth.

- *Comparing Therapist Behavior in Behavioral Activation vs. FAP-Enhanced Behavioral Activation with a Sample of Lonely and Depressed LGBTQ+ Young Adults*  
Jennifer Truitt, University of Missouri - Kansas City  
Daniel Maitland, Ph.D., University of Missouri - Kansas City

Loneliness and depression are increasing health concerns for LGBTQ+ young adults. There is evidence that loneliness is a causal factor in depression, but not vice versa (Cacioppo et al., 2006). Brief Behavioral

Activation for the Treatment of Depression (BATD-R) is effective for the average person experiencing depressive symptoms. However, if the person experiences loneliness due to low-quality relationships rather than a lack of social interaction, BATD-R may be less effective for addressing their depressive symptoms. FAP-enhanced Behavioral Activation may mitigate loneliness resulting from low-quality relationships through effective responses to the client's Clinically Relevant Behaviors (CRB). The current study is a randomized controlled trial of LGBTQ+ young adults who report high levels of loneliness, as measured by the UCLA Loneliness Scale, and moderate levels of depression, measured by the Beck Depression Inventory - II. The study examines the interaction effect of treatment and social environment on depression and loneliness. This presentation will examine the impact of contingent responding to CRB on treatment outcomes by analyzing session-by-session data coded using the FAPRS.

- *Loneliness in Context: A Functional Analysis of Social Disconnection in Black and Latino Communities*

Daniel Maitland, Ph.D., University of Missouri - Kansas City

Loneliness, the cognitive and affective experience arising from a discrepancy between one's actual and desired level of social connection, is a significant public health concern. Meta-analytic reviews indicate loneliness has a significant impact on mental and physical health increasing mortality at the same rate as smoking 15 cigarettes a day. Reflecting the widespread and deleterious effects of loneliness on health, the US Surgeon General has previously declared that the USA is in the midst of a loneliness epidemic. While the numbers fluctuate based on measurement, roughly 58% of U.S. adults report being lonely. However, loneliness disproportionately burdens people from marginalized communities. For example, 75 % of Hispanic adults and 68 % of Black/African-American adults report being lonely. In this talk, the unique contextual factors that impact these communities' experiences of loneliness will be discussed. A conceptual functional analysis will be presented out anchored in Functional Analytic Psychotherapy based models of social connection. Finally, ramifications for treatment will be discussed.

Educational Objectives:

1. Describe how both cultural and non-cultural stimuli participate in relationships.
2. Explain some differences between behavioral activation and a FAP-enhanced version of behavioral activation.
3. Discuss the importance of understanding cultural factors in the design of individualized and context-specific support.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**119. Thriving Parent, Thriving Child: Creating Contexts for children to Flourish with Psychologically Flexible Parenting: Children, Adolescents & Families SIG Sponsored Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

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

Categories: Children and Families

Target Audience: *Beginner, Intermediate*

**Location: Weil**

Duncan Gillard, D.Ed.Psy, Enable Trust

Lisa W Coyne, Ph.D., Harvard Medical School; New England Center for OCD and Anxiety

Youth mental health declined significantly during the COVID pandemic and this situation persists several years on. Concurrently, parents experienced unprecedented stress, with 48% reporting overwhelming daily stress, and elevated rates of depression and anxiety. Thus, it is clear that although many intervention programs focus on direct intervention with children, carers play a central role in creating contexts for young people to thrive. Caregivers' influence helps determine how children engage with the social world, and with their internal worlds. Parental influence is especially critical during the pre-adolescence phase of development. Many interventions designed to support parents focus on advice-giving and the provision of explicit behavioural strategies. Whilst these have yielded some beneficial outcomes, they often underemphasise the lived experience of the parent themselves. In this workshop, delegates learn how to engage with parents of children presenting as highly anxious, using ACT and the ACT for youth model, DNA-V. Within the workshop approach, it's recognised that parental psychological flexibility is foundational to effective parenting. The workshop explores explicit Relational Frame Theory (RFT) formulation and intervention.

Educational Objectives:

1. Apply Acceptance & Commitment Therapy (ACT) and the ACT for youth model, DNA-V, to work with parents and carers of children presenting as highly anxious and experientially avoidant.
2. Develop and apply interventions to enhance parents' psychological flexibility in both parenting behaviors and their own self-care and wellbeing.
3. Use explicit Relational Frame Theory (RFT) formulation and intervention approaches through relating processes such as coordination, distinction and hierarchical framing.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

**120. Bringing FAP to the General Public: Societal Change through the Awareness, Courage & Love Global Project**

**Workshop** • 13:15 - 14:45

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Experiential exercises, Original data*

Categories: Dissemination or global health strategies, Clinical intervention development or outcomes, FAP

Target Audience: *Beginner*

**Location: Aristotle**

Mavis Tsai, Ph.D., University of Washington; ACL Global Project  
Mathias Funke, Dipl.-Psych., Private Practice  
Herbert Assaloni, M.D., Praxis zum beherzten Leben, Bildungswerkstatt ACT  
Paulo G Sousa-Filho, Ph.D., Universidade Federal do Rio Grande  
Ioana Ivan, MCLinPsych, Babeş-Bolyai University  
Andressa S Silveira, Private Practice; Volunteer at ACL Global Project

How do we disseminate an intervention sensitively and equitably to people in different cultures in a way that understands and calls for societal change? The Awareness, Courage and Love (ACL) Global Project addresses the worldwide loneliness epidemic by bringing the key concepts of Functional Analytic Psychotherapy (FAP) to the general public through group meetings that foster connection with self and others. FAP emphasizes scientific principles that focus on the healing power of present-moment authentic interactions. ACL meetings create a safe and accepting space to thrive, to be one's true self, and to create a sense of belonging through the practice of vulnerable self-disclosure and responsive listening and personalized appreciation. In this workshop, co-led by global ACL leaders, you will learn about and experience an innovative approach to disseminate FAP principles by using powerful protocols that require minimal training and that enhance the potential of individuals. You will be invited to join our worldwide ACL movement that currently has chapter leaders in 35+ countries and 6 continents.

Educational Objectives:

1. Analyze how cultural context influences the adaptation of concepts and exercises, and apply strategies to preserve their original intent and function across diverse populations.
2. Demonstrate true self and authentic connection exercises that have been adapted for diverse cultural contexts and analyze their impact on client engagement and meaning-making.
3. Implement a model of Functional Analytic Psychotherapy that moves beyond the therapy room and can be disseminated widely and equitably to the general public.

**CEs Available (1.50):** [CEs for Psychologists](#)

**121. Regenerative IMP'ACT: Inner Resources Development for Outer Transformations, Toward Bienvivance**

**Invited** • 13:15 - 14:45

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis*

Categories: Academics or education, Processes of change, bienvivance, wellness, regenerative transformation

*Target Audience: Beginner*

**Location: Perroux**

Bénédicte Gendron, Prof. Dr. Dr., Université Montpellier Paul Valéry - Lirdef-



Psychological suffering exceeds medical boundaries. Drawing on two decades of interdisciplinary research in healthcare, education, and leadership, studies mobilizing the IMP'ACT protocol (Inner Management of Peace' Acceptance and Commitment Training), inspired by ACT, enriched by mindfulness and other CBS approaches, show how developing emotional capital and mobilizing inner resources foster capacitation: the conversion of capabilities into competence to act, generating individual and systemic regenerative transformation.

Applied to psychosocial risk prevention in nursing care (BQR-UM-RPS 2011-2014), student anxiety (ANR-IDEFI-UM3D-15b-2013-2021), and executive training for capacitating leadership (Master 2 REFE/RESET, 2012-...), this process is framed within the bienvivance paradigm: vitality and meaning, inner peace, acceptance, and committed action toward flowrishing (flow + flourishing), working toward a shared meaningful existence.

This keynote demonstrates the power and scalability of CBS, from individual regeneration to systemic transformation, repositioning these sciences as potent frameworks for human and organizational development against everyday distress and transformation imperatives across diverse contexts, to strive toward bienvivance.

Educational Objectives:

1. Describe the bienvivance paradigm as a scientific framework integrating vitality, meaning, inner peace, acceptance, and flourishing to enable regenerative transformation.
2. Describe how empirical IMP'ACT applications across healthcare, education, and leadership demonstrate Contextual Behavioral Science (CBS) scalability from individual regenerative transformation to systemic change.
3. Describe and evaluate the CBS's theoretical evolution from pathology treatment to human development frameworks fostering regenerative transformation toward shared meaningful existence.

**CEs Available (1.50):** CEs for Psychologists

## **122. Using Metaphor in Contextual Therapies**

**Workshop** • 13:15 - 16:30

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Processes of change, Therapeutic Dialogue in Practice

*Target Audience: Beginner*

**Location: Aubert**

Niklas D. Törneke, M.D., NT Psykiatri, private practice

In almost all models of psychotherapy, metaphor is considered an important aspect of communication. Metaphors help clients express complex experiences in a more accessible way. They can provide an alternative perspective, offer insight, and facilitate behavioural change. In many modern behavioural therapy models, such as ACT and DBT, this is given special emphasis.

This workshop will give a short theoretical overview of the way metaphor function in human language and how this understanding can guide psychotherapists in their interaction with clients. The main focus will be practical, offering experiential exercises meant to give participants a first hand experience of the function of metaphors and thus offer new insights for daily practice.

Educational Objectives:

1. Demonstrate the function of metaphor in dialogue through personal experiential exercises.
2. Describe basic principles of metaphor use in therapy.
3. Demonstrate using metaphor in a clinical dialogue to target central principles of change.

**CEs Available (2.75):** CEs for Psychologists BCBA CEUs

### **123. Hierarchical Framing and Psychological Flexibility: Neurophysiological, Experimental, and Clinical Process Evidence**

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Conceptual analysis, Original data*

Categories: RFT / RGB / language, Clinical intervention development or outcomes, RFT, ACT

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Maldiney**

Chair: Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Discussant: Carmen Luciano, Ph.D., Universidad de Almería

Andreas Larsson, Ph.D., Mid Sweden University

Giovambattista Presti, Ph.D., University of Enna Kore

Miguel Rodríguez-Valverde, Ph.D., Universidad de Jaén

Bárbara Gil-Luciano, Ph.D., Madrid Institute of Contextual Psychology

Hierarchical framing has been identified as a core relational process underlying psychological flexibility within relational frame theory (RFT). Framing ongoing private events in hierarchy with the deictic "I" reduces their discriminative functions and facilitates flexible, values-driven behavior. This symposium presents four studies that advance the understanding of hierarchical framing across neurophysiological, experimental, and clinical domains. The first paper examines how a defusion exercise alters neural and experiential markers using high-density EEG, revealing that defusion may engage a distinct attentional mode rather than simply reducing cognitive load. The second paper compares a standard body scan with a hierarchical self-frame enhanced body scan, showing differential effects on attention, arousal regulation, and self-stigma. The third paper uses an auditory-visual adaptation of the Implicit Relational Assessment Procedure to examine the connection between emotional dominance and psychological flexibility before and after a brief hierarchical framing intervention. The fourth paper analyzes the processes involved in framing one's behavior hierarchically to transform emotional and motivational functions through speaker/listener interactions. Together, these studies illuminate the mechanisms and clinical relevance of hierarchical framing.

- *DEEGfusion: Integrating Neurophysiological and Psychological Process Measures in a Defusion Study*

Andreas B. Larsson, Mid Sweden University

Jens Bernhardsson, Mid Sweden University

Nicolas Raimondo, Mid Sweden University

Erika Mattsson, Mid Sweden University

Julia Petersson, Mid Sweden University

Cognitive defusion is a central process in Acceptance and Commitment Therapy (ACT), yet its neurophysiological mechanisms remain insufficiently understood. This experimental study examined how an established defusion exercise (Leaves on a Stream) alters neural and experiential markers related to attention, cognitive load, and affective processing. Sixty participants underwent three conditions—fusion, defusion, and resting state—while high-density EEG was recorded. Neural indices included frontal alpha asymmetry (FAA), theta-alpha ratio (TAR), beta activity, and fronto-parietal alpha coherence. Participants also completed validated measures of psychological flexibility (MPFI-24, PBAT-18), fusion (CFQ), credibility/expectancy (CEQ), and moment-to-moment self-reports of defusion. Preliminary analyses revealed divergent neural and subjective patterns across conditions, suggesting that defusion may engage a distinct attentional mode rather than simply reducing cognitive load. Changes in FAA and TAR showed non-linear relationships with subjective defusion, and beta activity patterns pointed toward nuanced shifts in regulatory effort rather than uniform decreases. These findings offer novel insight into how ACT processes map onto neurophysiological dynamics and highlight the importance of capturing process-specific mechanisms when designing precision-based ACT interventions.

- *Brief Mindfulness as Relational Frame Training: A Comparison Between Standard Body Scan and Hierarchical Self-Frame Cueing on Attentional Flexibility, Arousal Regulation, and Self-Stigma*

Annalisa Oppo, Kore University of Enna

Alice Savoia, Kore University of Enna

Alberto Misitano, Kore University of Enna  
 Michela Rizzo, Kore University of Enna  
 Nanni Presti, Kore University of Enna

Within acceptance and commitment therapy (ACT) and relational frame theory (RFT), mindfulness practices can be conceptualized as procedures that alter the functional properties of ongoing private events through shifts in relational framing. Although traditional body scan practices train attentional contact with present-moment bodily experience, variations enriched with hierarchical verbal cueing may more directly strengthen an observing-self perspective (i.e., self-as-context). This ongoing randomized controlled feasibility study investigates whether a standard body scan and a hierarchical self-frame enhanced body scan differentially impact attention, arousal regulation, and self-stigma. Participants were randomly assigned to three conditions: standard body scan, hierarchical self-frame enhanced body scan, and psychoeducation control. Primary outcomes were behavioral indices assessed through the Attentional Network Test (ANT) and the Emotional Stroop Task. Preliminary findings indicate that the standard body scan showed stronger reductions in self-stigma-related interference ( $d = 1.57$ ), whereas the hierarchical condition more specifically influenced orienting processes ( $d = 0.94$ ) and emotional interference ( $d = 1.29$ ). These differential patterns suggest that distinct mindfulness formats may engage partially different mechanisms of psychological flexibility

- *Using an Auditory-Visual Adaptation of the Implicit Relational Assessment Procedure to Examine Emotional Dominance and its Relation with Psychological Flexibility*

Miguel Rodríguez-Valverde, Universidad de Jaén  
 Rosario Santaella-Alcocer, Universidad de Jaén  
 Mónica Hernández López, Universidad de Jaén

Emotional dominance, the extent to which a person feels in control of (or controlled by) an emotional situation or stimulus is one of the three core dimensions of Peter J. Lang's notorious dimensional theory of emotion (Lang et al., 1979). This study explored the connection between emotional dominance and psychological flexibility (PF), since both involve responding hierarchically to one's own emotional reaction. Typically, the dominance elicited by visual or auditory emotional stimuli is assessed explicitly with a pictorial scale, the self-assessment mannequin (SAM). The present study used an auditory-visual (AV) IRAP to assess dominance implicitly (under time-pressure conditions). Participants underwent an IRAP task where aversive auditory stimuli from the International Affective Digitized Sounds (IADS; Bradley & Lang, 1999) were used as labels, and the low and high dominance extremes of the SAM were used as targets. Subsequently, they received a brief intervention aimed at increasing PF by framing emotion hierarchically under the deictic I. After that, they underwent the same AV-IRAP. Changes in explicit and implicit measures of emotional dominance and PF were assessed.

- *The Processes Involved in Framing Hierarchically One's Behavior to Bring Emotional and Motivational Functions*

Bárbara Gil-Luciano, Madrid Institute of Contextual Psychology  
 Carmen Luciano, Universidad de Almería  
 Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz  
 Jorge Villarroel, Universidad de Almería  
 Eugenia Dahbar, Madrid Institute of Contextual Psychology

The present paper focuses on the conditions under which emotions and motivations arise or are intensified. A series of examples is analyzed in terms of the processes involved in speaker/listener interactions when different cues are manipulated. In some cases, the context is manipulated through tone and timing, for example, when reciting poetry or during pleasant or painful conversations. In other cases, context manipulation is achieved through metaphors and categorization of experiences. To date, 60 adults have participated in one or more of these manipulations, which were carried out at different times. Overall, the results consistently demonstrate an alteration in emotional and motivational responses among most participants. The role of deictic and hierarchical responding was a transparent and replicable process for transforming functions in all these examples.

#### Educational Objectives:

1. Describe the neurophysiological and behavioral mechanisms through which hierarchical framing and defusion alter attentional, emotional, and self-referential processing.
2. Identify how distinct formats of hierarchical framing interventions differentially impact psychological flexibility processes, including arousal regulation, emotional dominance, and self-stigma.
3. Discuss the role of deictic and hierarchical responding in transforming emotional and motivational functions across experimental and clinical contexts.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**124. Staying Present in the Presence of Suicide: An ACT Approach to High-Risk Clinical Work: Türkiye Chapter Sponsored**

**Workshop** • 13:15 - 14:45

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Behavior analysis, Suicide, University Students

Target Audience: *Intermediate*

**Location: C125**

Şengül İlkay, M.D., Bogazici University, Health Center

Engin Büyükköksüz, Ph.D., Istanbul Technical University, Psychological Counseling and Guidance Center

Rana Kayaalp Pehlivan, M.A., Istanbul Technical University

Suicide is one of the leading causes of death worldwide, and working with suicidal clients is among the most challenging clinical situations for therapists. Suicide risk often evokes fear, urgency, and avoidance in clinicians, which may narrow therapeutic responding. Within ACT, suicidal behavior can be conceptualized as an extreme version of experiential avoidance. Experiential avoidance and interpersonal disconnection are frequently central maintaining processes. A clear functional understanding of avoidance patterns strengthens both the therapeutic alliance and intervention planning.

This workshop trains clinicians to respond flexibly rather than reactively while specifically targeting experiential avoidance in suicidal behavior. Participants will practice noticing their own internal reactions, conducting functional chain analyses, and shaping willingness as an alternative to avoidance.

Educational Objectives:

1. Assess their own in-session reactions and apply strategies to respond flexibly.
2. Conduct an ACT-consistent chain analysis of suicidal behavior.
3. Identify experiential avoidance patterns in suicidal clients.

**CEs Available (1.50):** CEs for Psychologists

**125. From Threat to Safeness: Trauma Sensitive Yoga and Compassion-Focused Therapy to Cultivate Flexibility and Presence**

**Workshop** • 13:15 - 14:45

Translation: Not available

Components: *Didactic presentation, Experiential exercises*

Categories: Clinical intervention development or outcomes, Processes of change, PTSD, Mindfulness, Compassion, Yoga

Target Audience: *Beginner*

**Location: C154**

Michaela B. Swee, Ph.D., ABPP, McLean Hospital/Harvard Medical School

Laurie Gallo, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine

Many survivors of trauma report heightened sympathetic nervous system arousal (Solomon & Heide, 2005) and the perpetual experience of feeling unsafe in their bodies. Trauma-focused therapies evidence substantial attrition rates and a proportion of patients struggle with distress and impairment following treatment (Larsen et al., 2019; Lewis et al., 2020). Helping individuals establish safeness and trust in their physical bodies is imperative and serves to decrease hyperarousal, dissociation, and negative trauma-related beliefs about self. The presenters will guide attendees to experience applications of Trauma Center Trauma Sensitive Yoga (TCTSY; Dietrich et al., 2024) and compassion-focused therapy for trauma (CFT; McLean et al., 2018) integrated within a contextual behavioral process-based framework. After introducing TCTSY and CFT, presenters will lead attendees through several practices they can do from their chairs that involve bottom-up, process-based attunement to

body movement, breathwork, and compassion-focused imagery to cultivate and establish safeness and security in the body and flexibility in the mind. Attendees will be invited to reflect on their experience and how this work can be applied to their clients.

Educational Objectives:

1. Describe how trauma-sensitive yoga and compassion-focused imagery, movement, and breathwork practices decrease threat-based responding and increase safeness in the body and mind.
2. Demonstrate understanding of how embodied, somatic, and imagery-oriented practices enhance psychological flexibility processes (e.g., present-mindedness, defusion, and self-as-context).
3. Demonstrate at least three embodied exercises from Trauma Center Trauma Sensitive Yoga and compassion-focused therapy that can be integrated into trauma-focused therapy.

**CEs Available (1.50):** CEs for Psychologists

### 126. Psychological Flexibility and Social Processes in Paranoia & Psychosis: CBS Perspectives

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Literature review, Original data*

Categories: Clinical intervention development or outcomes, Processes of change, Psychosis

Target Audience: *Beginner, Intermediate*

**Location: C225**

Eric Morris, Ph.D., La Trobe University

Jessica Kingston, DCLinPsy, Ph.D., Royal Holloway

Angelika Radeka, Master of Clinical Psychology, ACTUALISE Lab, La Trobe University

Laura A Tierney-Sutton, B.A., M.Sc., Royal Holloway University of London

Yuhan Murros, MSc, LLB, University of Oxford

Paranoia and unusual experiences exist on a continuum from common suspicions to clinical psychosis. This symposium presents evidence on psychological flexibility as a transdiagnostic mechanism underlying paranoia and evaluates interventions targeting this process.

Paper 1 presents longitudinal findings of the influence of psychological inflexibility on the relationship between sleep quality and increased paranoid thinking in a general community sample.

Paper 2 extends these findings experimentally, showing that secure attachment and compassionate imagery reduce paranoia in adolescents, particularly benefiting those with high attachment anxiety.

Paper 3 provides theoretical integration through a contextual behavioural science framework, proposing that rigid self-conceptions and inflexible relating to private events maintain paranoia by heightening social threat sensitivity.

Paper 4 completes the translational pathway with a comprehensive meta-analysis of Acceptance and Commitment Therapy (ACT) for psychosis RCTs. ACT directly targets psychological flexibility - the central mechanism identified across Papers 1-3 - offering evidence-based interventions for clinical populations.

Collectively, this symposium demonstrates that psychological flexibility is a critical therapeutic target across the paranoia and psychosis continua.

- *Paranoia, Sleep Quality, Negative Affect and Psychological Inflexibility: A Longitudinal Investigation*

Eric M.J. Morris, La Trobe University, Northern Health

Liana Risicato, La Trobe University

Darcy Fahroedin, La Trobe University

Lauren Lawson, La Trobe University

Jordan Hince, La Trobe University

Daniel Simsion, La Trobe University

Paranoia, the unfounded fear others intend harm, is prevalent in the general population and impacts health, social relationships and community cohesion. Understanding factors associated with paranoia's etiology and maintenance aids intervention development. Current literature links poor sleep quality,

negative affect (NA), and psychological inflexibility (PI) to paranoia (Brown et al., 2024; Freeman & Loe, 2023; Pittmann et al., 2024), yet longitudinal investigations remain limited. This study examined how sleep changes influence paranoia over time, and whether PI and NA mediate these effects. A convenience sample of 235 adults (aged 18 - 65, English-fluent) completed online surveys 12 months apart. Deteriorating sleep quality predicted increased paranoia at T2. Parallel mediation analysis revealed this relationship was fully mediated by PI changes, with sleep quality's direct effect becoming non-significant when mediators were included. Contrary to hypotheses, NA was not a significant mediator. Findings highlight PI as a critical mechanism linking sleep disturbance to paranoia in non-clinical samples. Interventions targeting sleep quality and psychological flexibility may offer promising approaches for reducing population-level paranoia, with implications for preventive mental health strategies.

- *Examining the Influence of Mental Imagery and Social Exclusion on Paranoid Thinking in Adolescents-An Experimental Study*

Laura Tierney, Royal Holloway University of London  
Jessica Kingston, Royal Holloway University of London

Introduction: Paranoia in adolescents is common and can contribute to various psychological difficulties, yet research examining potential treatment targets is lacking. The current study aimed to experimentally investigate the influence of different types of attachment and compassion-based imagery strategies on paranoia and to examine whether they impact vulnerability to paranoia induction. Method: N&#3f497 UK adolescents aged 15-17, recruited via Qualtrics completed baseline measures of paranoia, motivation to meet new people, and anticipated enjoyment meeting others (T1). They were then randomised to one of five imagery conditions which involved listening to a recording eliciting compassionate, critical, secure, insecure or neutral imagery. They then repeated baseline measures (T2), followed by playing cyber ball, and repeated baseline measures for a third and final time (T3). Results: The compassionate group showed lower paranoia relative to the insecure group at T2. The secure imagery group also showed reductions in paranoia alongside increased motivation to meet new people from T1-T2. Neither the insecure nor the critical groups showed changes on assessed outcomes from T1-T2. The critical group but not the insecure group, showed a significant increase in paranoia from T2-T3. Attachment anxiety moderated the effect of compassionate imagery on paranoia at T2. Conclusions: Results suggest that secure imagery strategies may be effective in reducing paranoia in adolescents, and that compassionate imagery may be particularly beneficial for those high in attachment anxiety. More sustained, long-term intervention may be necessary to protect from the negative effects of social stressors on paranoia in teens.

- *Reframing Self: a Contextual Behavioural Science Approach to Understanding Self and Paranoia*

Angelika Radeka, La Trobe University  
Lauren Lawson, La Trobe University  
Eric Morris, La Trobe University, Northern Health

Paranoia has traditionally been conceptualised in terms of anomalous beliefs about others' threatening intentions. Yet, as the core target of threat, an individual's sense of self is central to understanding experiences of paranoia. Self-concept is complex, multi-dimensional and proving influential in understanding the development and maintenance of paranoia. From a contextual behavioural science (CBS) perspective, paranoia is understood as emerging from patterns of relating to private events that shape how the self is experienced (and defended) in social contexts. This paper synthesises CBS theory and empirical findings to articulate a functional account of the self in paranoia. We propose that paranoid ideation is maintained not only by threat appraisals of others, but also by rigid, vulnerable self-conceptions that increase sensitivity to social threat and constrain behavioural repertoires. We will integrate clinical, experimental, and intervention-focused evidence to evaluate self and psychosis through the framework of Relational Frame Theory (RFT).

- *Acceptance and Commitment Therapy for Psychosis: A Systematic Review and Meta-Analysis of RCTs*

Yuhan Murros, University of Oxford  
Daniel Hua, University of Oxford  
Brandon Gaudiano, Alpert Medical School of Brown University  
Eric Morris, La Trobe University  
Louise Johns, University of Oxford

Background: Acceptance and Commitment Therapy for psychosis (ACTp) has shown promising effects across trials. However, previous meta-analyses have used differing inclusion criteria, often combining ACTp with mindfulness-based interventions or including limited subsets of studies, leading to inconsistent conclusions. A comprehensive synthesis of ACTp-specific RCTs is needed. Aims: To systematically review and meta-analyse RCTs evaluating ACT-based interventions for psychosis. Methods: The protocol was prospectively registered (PROSPERO: CRD42024528663). Following PRISMA guidelines, databases were

searched to January 2026. Eligible studies were RCTs including individuals ( $\geq 15$  years) with psychosis receiving ACT compared to treatment-as-usual or active control. Primary outcomes were psychotic symptom severity; secondary outcomes included affective symptoms, functioning, quality of life, hospitalisation, psychological flexibility, safety, and other outcomes. Risk of bias will be assessed using a validated RCT tool. >Results (Preliminary): After duplicates were removed, 2562 records were identified; 25 met full-text eligibility. Data extraction and synthesis are ongoing. Conclusions: This review will provide a comprehensive and up-to-date and synthesis of RCTs for ACTp.

#### Educational Objectives:

1. Describe the current evidence regarding the influence of compassionate and attachment-based imagery on paranoia in adolescents
2. Identify modifiable targets (sleep quality and psychological inflexibility) for preventive interventions addressing paranoia in community samples.
3. Differentiate the effects of ACT for psychosis across symptom, functional, and recovery-related outcome domains.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

### 127. Ignite 3

**Ignite** • 13:15 - 14:45

Translation: Not available

**Location: C254**

- *"Lights, Camera, ACT!": The Grammar of Cinema in Service of Psychological Flexibility*  
Ramon WS da Silva Sr., M.A., FACCAT

Cinema does more than tell stories — it shapes how we feel and interpret the world. In Acceptance and Commitment Therapy (ACT), we aim to transform people's relationship with their thoughts and emotions. But how can we make this process more experiential and engaging? The language of cinema, with its own grammar, offers a compelling pathway. This Ignite explores how framing, shot composition, and camera movement can function as powerful metaphors for understanding and applying core ACT processes: "zooming out" as cognitive defusion, close-ups as present-moment contact, and camera movement as perspective-taking. Drawing from cinematic language and visual grammar, clinical concepts will be illustrated through images that speak directly to lived experience. By the end, participants will leave with a creative repertoire for teaching and applying ACT in clinical practice — demonstrating that, just as in film, small shifts in framing can transform the story we tell about ourselves.

- *ACT and the City*  
Johannes Freymann, M.Sc., Fliedner Klinik Berlin  
Mazda Adli, M.D., Charité – Universitätsmedizin Berlin

According to the United Nations, by 2050, approximately 68% of the world's population will live in large cities. From a mental health perspective, this rapid urbanization raises important concerns. Urban residents show significantly higher rates of mental ill-health than people living in rural areas—an effect often linked to chronic social stress and, in particular, the paradoxical combination of high population density and social isolation. At the same time, cities represent cultural, social, and creative achievements that exert a strong fascination. Combined with economic opportunities, urban life places many individuals in a constant tension between attraction and exhaustion. In this IGNITE talk, the presenter explores how to navigate the challenges—and embrace the opportunities—of big-city life from a CBS perspective, drawing on findings from urban mental health research and personal experiences in Berlin. It is both a call to explicitly integrate psychological flexibility into urban mental health strategies and an exploration of how accessible ACT models such as DNA-V can inform mental health interventions and public campaigns in urban environments.

- *Le rôle de la langue française dans la pratique fondée sur les données probantes*  
Lisa Marie Sauve, DCLinPsy, OPQ

La présente étude rapporte les résultats d'un sondage pancanadien examinant les attitudes des psychologues envers la pratique fondée sur les données probantes (PFDP). Les résultats révèlent des différences significatives entre les psychologues francophones du Québec et leurs collègues des autres provinces. Plus précisément, les psychologues québécois francophones rapportent des attitudes globalement moins positives envers la PFDP, notamment en ce qui concerne la valeur perçue des données issues des essais contrôlés randomisés et l'applicabilité des lignes directrices standardisées à la pratique clinique. Ces résultats soulignent l'importance de considérer les facteurs contextuels — culturels,

linguistiques, historiques et liés aux modèles de formation — dans la promotion et l’implantation de la PFDP au Canada et dans le reste du monde. Dans une perspective de CBS, ces différences invitent à adopter une approche sensible au contexte afin de favoriser l’adhésion aux données probantes tout en respectant la diversité des traditions cliniques et des cadres professionnels.

- *Love Is the Way: Using ACT to Increase Giving and Receiving Love Through Values Awareness and Experiential Openness*

Lori Eickelberry, Ph.D., ABPP, Institute for Life Renovation; Nova Southeastern University

Love is widely endorsed as a core human value, yet many individuals struggle to consistently enact it in daily life—both in giving and receiving. Acceptance and Commitment Therapy (ACT) offers a functional contextual framework for understanding this gap by targeting processes such as experiential avoidance, cognitive fusion, and disconnection from chosen values. This Ignite session presents an experiential, ACT-based group intervention titled *Love Is the Way*, designed to help participants clarify the role of love within their broader values system while building psychological flexibility around vulnerability, intimacy, and connection. The group emphasizes structured experiential exercises that cultivate present-moment awareness, self-compassion, and willingness to experience internal barriers that arise when engaging in loving behavior. Group participants are guided through practicing love in vivo—toward self and others—while identifying thoughts, emotions, and avoidance patterns that pull behavior away from what is valued and workable. Pilot data shared showing changes in social connectedness, compassion, and experiences in close relationships, as well as increases in valued living congruency.

- *Mediating Role of Psychological Flexibility: A Link Between Executive Function and Trauma in Indian Adolescents*

Kaeyoor Joshi, Ph.D., New Mexico State University  
 Amogh Joshi, Ph.D., World Bank  
 Yashkumar Pithva, M.A., The Maharaja Sayajirao University of Baroda  
 Hardik Joshi, Ph.D., Gujarat University  
 Carrie Clark, Ph.D., University of Nebraska-Lincoln

Psychological flexibility is central to contextual behavioral models of mental health; however, its relationship with executive function and trauma symptoms remains underexplored in adolescent populations, particularly in low- and middle-income contexts. The present study examined whether psychological flexibility mediates the association between executive function and trauma symptoms among Indian high-school students (N = 560). Participants completed standardized executive function tasks (Go/No-Go, Digit Span, SART, WCST), a culturally adapted measure of psychological flexibility, and the UCLA PTSD Index. Structural equation modeling with bootstrapping (5,000 samples) was used to test indirect effects. Executive function was positively associated with psychological flexibility, which was strongly negatively associated with trauma symptoms. Although executive function demonstrated a significant total association with trauma, this relationship became non-significant when psychological flexibility was included in the model, and the indirect effect was significant. The model accounted for 26.6% of the variance in trauma symptoms. These findings support a process-based account in which psychological flexibility represents a functional pathway linking cognitive control capacities to trauma-related distress in adolescents.

- *Navigating the Maze: Black Parents, Neurodiversity, and Systemic Challenges*

Jennifer Shepard Payne, Ph.D., LCSW-C, Kennedy Krieger Institute/ Johns Hopkins University

Parents and caregivers of neurodiverse children face ongoing challenges with medical, mental, and educational system coordination. Those who are underprivileged must also navigate systemic barriers in addition to these challenges. In the United States, caregivers report issues with access to and quality of care in healthcare and educational settings. Furthermore, evidence has shown that Black families have failed to prosper due to racism in healthcare and educational systems.

A qualitative content analysis was conducted with data from ten Black parents with neurodiverse children to answer the following question: What are the adverse experiences that Black caregivers of neurodiverse children may face when seeking proper care for their children? The results are discussed in this lightning-style Ignite session, along with implications for moving forward.

- *Reconnecting With What Matters: Values-Focused Work After Spinal Cord Injury*

Jess Farrar, Ph.D., University of Utah

Spinal cord injury (SCI) disrupts far more than physical functioning; it can fracture the sense of identity, purpose, and connection that came from once-valued activities. Many individuals describe feeling cut off from who they “used to be” because the behaviors that previously expressed their values—movement, caregiving, community roles, creative pursuits—are no longer accessible in the same form.

This talk highlights how Acceptance and Commitment Therapy (ACT)-based values work can help patients differentiate between the activity that was lost and the value that can still be lived.

Drawing on clinical examples from rehabilitation psychology, I will illustrate how values exploration supports grieving the old life, identifying the qualities that continue to matter, and flexibly creating new, workable pathways for meaning. By emphasizing values as ongoing patterns of action rather than fixed behaviors, clinicians can help patients move from withdrawal and stuckness toward renewed engagement, vitality, and purpose.

This session will offer a fast-paced, practice-focused demonstration of simple values interventions that empower individuals with SCI to reclaim what matters—within their changed bodies and evolving lives.

- *Reducing Teacher Burnout: Introducing ACT to Teachers of Students with Emotional-Behavioral Disorders*

Benjamin D Tobe, M.Ed., M.A., Pennsylvania State University  
Stefanie R Salyer, Ed.S., Pennsylvania State University

Teachers of students with emotional-behavioral disorders (EBD) experience disproportionately high levels of stress, emotional exhaustion, and attrition, often due to chronic exposure to challenging behavior and limited systemic support. This future project introduces an Acceptance and Commitment Training (ACT)-based professional development model designed to reduce burnout by increasing psychological flexibility among educators serving students with high support needs. Grounded in a behavior analytic framework, the intervention teaches core ACT processes, including present-moment awareness, values clarification, cognitive defusion, acceptance, and committed action, and supports individualized classroom implementation. Rather than targeting symptom reduction alone, the model aims to shift educators' relational responding to stressors, promoting flexible, values-consistent responding under conditions of emotional strain.

- *The World We Created in Our Phones: Does It Mirror, Shape, or Constrain Psychological Flexibility?*

Oya Yerin Güneri, Ph.D., Middle East Technical University

Digital advancements are reshaping nearly every aspect of human wellbeing. Yet determining the extent to which they contribute to or undermine our psychological health remains a complex question. Among these technologies, the smartphone is not merely a device — it is a lived world where identities are constructed, relationships unfold, comparisons are constantly made, emotions are experienced, and information from diverse sources flows toward us. Phones are more than tools; they function as reflections and extensions of the self, as well as our instant digital doorway to the outer world.

Conceptualizing smartphones as contexts we inhabit, this Ignite session explores the digital world intentionally and unintentionally constructed within our smartphones and asks a central question: do these contexts flourish, diminish, or simply mirror our psychological flexibility?

Drawing on qualitative data from university students, including guided "tours" of their digital worlds, this talk examines not only how individuals relate to their devices but also how their experiences both reflect and shape the six core processes of psychological flexibility.

- *What If Therapist Humanity Changes The Context Of Self-Criticism?*

Florence Simonetta, M.Sc., Schweizer Institut für nachhaltige Gesundheit (SING)

Who has not experienced therapy sessions in which clients seem stuck—fused with self-critical processes, avoiding shame or anxiety, and showing little behavioral flexibility? Self-criticism is implicated in a wide range of mental health difficulties and therefore appears in most therapies. When clients are fused with self-critical processes, avoidance of painful emotions often increases, leading to reduced psychological flexibility and a narrowed range of possible actions.

But how can we, as therapists, effectively change the context of shame and self-criticism so that new room for action emerges?

Grounded in Compassion-Focused Therapy, this Ignite talk explores therapist humanity—specifically therapeutic self-disclosure—as a contextual intervention. By briefly and genuinely sharing that we, too, know these difficult feelings and thoughts, clients may experience common humanity rather than isolation. This contextual shift can soothe threat-based responding, reduce self-critical fusion, and open space for approach-oriented, values-consistent behavior.

- *What If Flexibility Is Not Always About Liberating Minds?*

Anne Uphoff, M.A. Social Work, Universität Fribourg

What if governance structures and institutional pressures quietly restrict the space for meaningful choice, so that the demand for psychological flexibility risks becoming less about liberation and more about adjustment?

This presentation draws on my ongoing doctoral research project examining how ACT could be adapted for Social Work practice in Switzerland, where “flexibility” is frequently institutionalized as a demand for adjustment and tied to activation policies that prioritize rapid reintegration into paid employment over clients’ individual values.

I aim to explore the potential and the tensions of applying ACT in contexts shaped by neoliberal governance logics, where intervention goals may privilege efficiency, compliance, and employability over values-based action grounded in clients’ lived realities. It asks whether—and under what conditions—ACT risks being co-opted into an adjustment-oriented framework, thereby undermining its emancipatory promise, rather than supporting clients in pursuing what genuinely matters to them.

The question is not whether ACT helps, but to what extent it can foster liberation rather than adaptation in neoliberal contexts.

- *Time Restricted Eating in Alzheimer's Disease (TREAD): A pilot study*

Yonas E. Geda, M.D., M.Sc., BARROW Neurological Institute

Danielle E. Eagan, BARROW Neurological Institute

Janina Krell-Roesch, Karlsruhe Institute of Technology

Jordan A. Gunning, Arizona State University

Isabella Zaniletti, IZ Statistics LLC

Tracy L. Smith, BARROW Neurological Institute

Nevine A. Khan, BARROW Neurological Institute

Geetika Chahal, Institution Unknown

Susan B. Racette, Arizona State University

Brain glucose uptake is impaired in Alzheimer's disease (AD), but ketone utilization remains intact. Fasting  $\geq 12$  hours induces a metabolic switch from glucose to ketone utilization, providing an alternative energy source for the AD brain. We evaluated the feasibility of time-restricted eating (TRE) in individuals with mild cognitive impairment (MCI), an intermediate stage between normal aging and Alzheimer's dementia.

This 12-week single-arm pre-post pilot study enrolled participants with MCI (age 55-85 years). Intervention: 16-hour fasting (e.g., 6 PM to 10 AM) on  $\geq 5$  days/week. Primary outcomes: feasibility measures (recruitment, retention, adherence, and study completion). Secondary outcomes: Valued Living Questionnaire (VLQ), WHO QOL, and blood-based AD biomarker (p-Tau 217).

21 participants (mean age 71 years, 71% male) completed the study. TRE is feasible, well-accepted, and safe in MCI.

Valued living is associated with higher Psychological QOL. The decline in p-Tau 217 after TRE intervention approached significance. Needs to be tested in a large trial.

**This session is not eligible for any type of CEs.**

## **128. Reimagining Care: AI, VR, and the Digital Future of ACT**

**Symposium** • 13:15 - 14:45

Translation: Not available

Components: *Didactic presentation, Literature review, Original data*

Categories: Mobile or digital technology, Clinical intervention development or outcomes, Implementation Science, Digital Health, Global Mental Health, Clinical Trial, Digital ACT, Cancer, Depression, Anxiety, Distress, Sleep interference, Health-related Quality of Life, Chronic Post-Stroke Pain, Virtual Reality, Prison Population, AI, Personalized Mental Health, Adolescence, Addiction

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C302**

Chair: Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong

Pui Tik Yau, MPsyMed, The Chinese University of Hong Kong

Youran Liu, Ph.D. Student, The Chinese University of Hong Kong

Sérgio A Carvalho, Ph.D., CINEICC, University of Coimbra

Vasiliki Christodoulou, Psy.D., UCLan Cyprus

Kin Fung Chan, MRes, The Chinese University of Hong Kong

Gökçen Aydın, Ph.D., TED University

Digital innovation is reshaping mental health care and expanding how ACT can be delivered. This symposium highlights emerging work at the intersection of ACT and technology, including artificial intelligence, virtual reality, and web-based interventions.

Explore AI-assisted, tiered ACT models that enhance access and personalization within real-world systems, technology-delivered ACT for improving psychological and health outcomes in medical populations, and immersive VR applications that deepen engagement and experiential learning. Findings examine how digital contexts influence key processes such as experiential avoidance and emotional competence.

Together, these studies illustrate the possibilities and challenges of digital ACT: balancing scalability with fidelity, and innovation with human connection. Attendees will gain insight into implementation, mechanisms of change, and future directions for delivering flexible, process-based care in an increasingly digital world.

- *AI-Assisted ACT for Tiered Mental Health Support: An Implementation Science Perspective*

Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong  
 Pui Tik Yau, The Chinese University of Hong Kong  
 Hiu Fung Lam, Ph.D., The Chinese University of Hong Kong  
 Kenneth Fung, University of Toronto  
 Tim Man Ho Li, Ph.D., The Chinese University of Hong Kong  
 Wai Tong Chien, Ph.D., The Chinese University of Hong Kong

Translating evidence-based digital interventions into routine social services remains challenging, particularly when scaling delivery while maintaining fidelity and fit with existing workflows. Pai.ACT is an AI-enabled, tiered Acceptance and Commitment Therapy (ACT) program that uses automated triage to link parents of children with special needs to escalating mental health support, ranging from guided self-help to individual videoconferencing. This mixed-methods implementation study embedded Pai.ACT within Hong Kong's Social Welfare service infrastructure to assess early signals of effectiveness alongside real-world determinants of delivery. Preliminary data from an ongoing randomized controlled trial (N = 90; target N = 220) showed significant improvements in secondary outcomes of depression ( $p = .007$ ) and anxiety ( $p = .016$ ). In parallel, qualitative interviews with frontline social workers suggested overall feasibility and identified key implementation determinants, including workforce digital/AI literacy and integration of digital referral pathways into routine case management. Overall, findings indicate that an AI-enabled, tiered ACT model is feasible in public social services; scale-up should prioritize workforce capacity building and workflow integration to support sustained adoption.

- *Effects of Technology-Based ACT on Health-Related Outcomes in Cancer Patients: Systematic Review and Meta-Analysis*

Youran Liu, Ph.D. Student, The Chinese University of Hong Kong  
 Cho Lee Wong, Ph.D., The Chinese University of Hong Kong  
 Juan Chen, Ph.D. Student, Universiti Putra Malaysia  
 Zhixuan Xiang, Ph.D. Student, The Chinese University of Hong Kong  
 Vi D.P.N., Ph.D., The Chinese University of Hong Kong  
 Shishuang Zhou, Ph.D., The Chinese University of Hong Kong  
 Vanessa Ka Wing Chau, Ph.D., The Chinese University of Hong Kong

Objectives: To examine the effects of technology-based acceptance and commitment therapy (ACT) on physical symptoms (fatigue, pain, sleep interference), psychological symptoms (anxiety, depression, cancer-specific distress), and health-related quality of life (HRQoL) among cancer patients. Methods: This study followed PRISMA 2020 guidelines. Ten electronic databases were searched from inception to December 2025. Randomised controlled trials (RCTs) evaluating technology-based ACT in cancer patients were included. Two reviewers independently assessed risk of bias using the Joanna Briggs Institute critical appraisal checklist for RCTs. Meta-analysis was conducted using R software. Results: Twelve RCTs involving 1043 participants (54.27% breast cancer patients) were included. Technology-based ACT showed small to moderate effects in improving anxiety, depression, cancer-specific distress, sleep interference, and HRQoL at post-intervention. Improvements in anxiety and HRQoL were maintained at 3-month follow-up. Subgroup analyses suggested that four-week interventions with 60-90 minutes per session were associated with greater HRQoL improvements. Conclusions: Technology-based ACT may improve psychological outcomes, sleep interference, and HRQoL in cancer patients. However, given heterogeneity and limited follow-up, well-designed RCTs are needed to confirm effects and evaluate long-term outcomes.

- *The VR-ACT Feasibility Study: Using ACT via Virtual Reality in Chronic Post-Stroke Pain.*

Sérgio A. Carvalho, University of Coimbra (CINEICC)  
 Paulo Menezes, Institute of Systems and Robotics (ISR), University of Coimbra  
 Ana João, Institute of Systems and Robotics (ISR), University of Coimbra  
 Catarina Duarte, Coimbra Institute for Biomedical Imaging and Translational Research (CIBIT),  
 Institute of Nuclear Sciences Applied to Health (ICNAS)  
 David Skvarc, Deakin University

The VR-ACT Project Team, Hospitais da Universidade de Coimbra; Center for Classical and Humanistic Studies (CECH)

Gerhard Andersson, Linköping University

Miguel Castelo-Branco, Coimbra Institute for Biomedical Imaging and Translational Research (CIBIT), Institute of Nuclear Sciences Applied to Health (ICNAS)

**BACKGROUND:** Chronic post-stroke pain (CPSP) affects 40%-65% of stroke survivors and is linked to functional dependence, cognitive decline, and elevated risks of depression, anxiety, fatigue, and suicidality. Acceptance and Commitment Therapy (ACT) is well suited to chronic conditions given its focus on acceptance and valued living. However, its delivery through immersive digital technologies remains underexplored. **METHODS:** This funded pilot trial (2023.13402.PEX) will develop and assess the feasibility and acceptability of an 8-week virtual reality ACT intervention (VR-ACT) for individuals with CPSP, and conduct a preliminary evaluation of its efficacy. Participants will be randomized to VR-ACT or a non-immersive 2D sham condition with distracting video animations. Outcomes (pre-post) will include pain, mental health, psychological flexibility, and Triple Network functional connectivity (DMN, SN, FPN). The trial begins January 2026 (see [clinicaltrials.org](https://clinicaltrials.org) ID: NCT06990646). **EXPECTED RESULTS:** VR-ACT is expected to show feasibility and acceptability, reduce pain intensity/disability, improve psychological symptoms and well-being, and decrease Triple Network connectivity relative to the sham condition. **CONCLUSION:** Findings may advance CPSP rehabilitation by integrating immersive digital technologies with an evidence-based psychological intervention.

- *Acceptance and Commitment Training with VR for Pre-Release Prison Populations*

Vasiliki Christodoulou, UCLan Cyprus

Carmen Bora, University of Oradea

Maria Petridou, University of Cyprus

Olga Solomontos-Kountouri, Theology School of the Church of Cyprus

Workplace integration and communication challenges are substantial for individuals nearing release from custody, particularly due to stigma, employer discrimination, and disclosure dilemmas (Pager, 2003). Recommit, an Erasmus+ funded program, integrated Acceptance and Commitment Training (ACT) with Virtual Reality (VR) to support work-related communication skills among individuals in pre-release custody across four European countries (Cyprus, Greece, Romania, Spain). A 10-week ACT-based intervention (2 hours/week) was evaluated using pre-post questionnaires and post-program qualitative interviews.

Qualitative findings from 14 participant interviews indicated improved communication and interpersonal skills, increased self-awareness, enhanced perspective-taking, clarification of personal values, and stronger motivation for future planning. Thirteen facilitators identified communication skills and group engagement as key outcomes. Quantitative results from 73 participants showed significant improvements in mental health, values-based learning, knowledge acquisition, and interpersonal skills.

Overall, findings support the feasibility of combining ACT with immersive technologies to enhance engagement and rehabilitation outcomes (Maples-Keller et al., 2017).

- *Artificial Intelligence for Personalized Acceptance and Commitment Therapy: A Preliminary Investigation*

Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong

Jacky Kin Fung Chan, MRes, The Chinese University of Hong Kong

Hiu Fung Lam, Ph.D., The Chinese University of Hong Kong

Kenneth Fung, University of Toronto

Andrew Gloster, Ph.D., University of Lucerne

Tim Man Ho Li, Ph.D., The Chinese University of Hong Kong

Wai Tong Chien, Ph.D., The Chinese University of Hong Kong

Personalised approaches strengthen mental health service delivery by supporting case formulation and intervention planning. While artificial intelligence (AI) may enhance precision by accelerating the identification of clinically relevant processes, its effectiveness requires rigorous evaluation. This presentation reports on an ongoing multi-site, repeated-measures randomised controlled trial (target N = 210) evaluating Pai.ACT—a Chinese-optimised, AI-assisted, Acceptance and Commitment Therapy-based guided self-help programme—compared with an active control (standardised positive parenting advice). Pai.ACT integrates a Chinese RoBERTa classifier trained on >19,000 annotated texts to detect psychological inflexibility (AUC =0.88; F1 =0.82–0.92 per process). Primary outcomes include parenting stress and child emotional and behavioural symptoms. Preliminary recruitment enrolled 83 parents (91.6%#37; mothers) from 189 referrals (recruitment rate =43.9%#37;) via Hong Kong community centres; children had identified neurodevelopmental conditions, including autism (44.6%#37;), attention-deficit/hyperactivity disorder (33.7%#37;), or other developmental conditions (21.7%#37;). At week 6, Pai.ACT was associated with reductions in parenting stress and anxiety/depression, alongside high completion rates (95.8%#37;) and favourable usability. The presentation will discuss these preliminary findings alongside challenges in recruitment and the scalability of AI-driven mental health ecosystems.

- *Experiential Avoidance and Emotional Competence in Adolescent Social Media Addiction*  
Sidar Turan, Baglar Necip Fazil Kisakurek Anatolian High School  
Gökçen Aydın, TED University

This study investigated the roles of experiential avoidance and social emotional learning skills in predicting social media addiction among high school students. The participants comprised 721 high school students (439 female; 282 male); and Social Media Addiction Scale for Adolescents, Avoidance and Fusion Scale-Youth, and Social Emotional Learning Scale for Adolescents were used. Hierarchical regression analyses demonstrated that experiential avoidance significantly predicted social media addiction, explaining 31% of the variance. After adding social emotional learning skills, the model explained an additional 5% of variance. In this final model, experiential avoidance remained a significant positive predictor ( $B = .49, \beta = .51, p < .01$ ) and emerged as the strongest predictor, while social emotional learning skills had a significant negative contribution ( $B = -.14, \beta = -.23, p < .01$ ). Overall, the findings revealed that experiential avoidance and social emotional learning skills collectively accounted for 36% of the variance in social media addiction. These findings highlight the importance of psychological flexibility and emotional competence as critical targets for preventive efforts addressing adolescent social media addiction.

#### Educational Objectives:

1. Explain how AI-enabled, tiered Acceptance and Commitment Therapy can be embedded within social service systems to support scalable dissemination while ensuring implementation fit and service fidelity.
2. Assess the role of VR in supporting values-based processes in ACT interventions.
3. Identify key implementation challenges for AI-assisted mental health programmes (e.g., inclusive recruitment, engagement burden, cultural/linguistic responsiveness, and scalability constraints).

**CEs Available (1.50):** [CEs for Psychologists](#)

Saturday Afternoon 15:15

### 129. ACT Like Nobody's Watching: Women Practicing Psychological Flexibility from the Inside Out

**Workshop** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Experiential exercises, Role play*

Categories: Processes of change, Social justice / equity / diversity, Women, Psychological Flexibility, Improv

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Merieux**

Miranda Morris, Ph.D., True North Therapy and Training

Shawn Costello Whooley, Psy.D., Private Practice and VA Maryland Healthcare System

Temple Morris, LCSW-C, True North Therapy & Training

Lisa W Coyne, Ph.D., Harvard Medical School; New England Center for OCD and Anxiety

Aria E Jaye, B.S., The University of Chicago Crown Family School

Knowing what we "should" do to be more psychologically flexible is one thing, but actually doing it? That's a different matter. As women therapists, we have an extra layer to navigate: all those internalized rules about how we're "supposed" to be (you know the ones we're talking about!).

This workshop is your invitation to throw away the rule book and discover ACT from the inside out through the magic of play and Improv. No more just talking about psychological flexibility – we're going to live it, breathe it, and laugh our way through it!

In this experiential playground, we'll use games and exercises to:

- Transform "I should" into "I choose" through actual practice (because our brains need more than just good intentions)
- Practice \*being\* different - with ourselves and others - through the experimental context of play and spontaneity.
- Build our psychological flexibility muscles

This workshop is about getting out of our heads and into our bodies, trying new things, and

discovering what psychological flexibility actually feels like.

Educational Objectives:

1. Engage in experiential activities to clarify personal values as female therapists and apply these insights to guide clients effectively through values clarification work.
2. Apply self-compassion and acceptance techniques to manage difficult thoughts and emotions in therapeutic work, and demonstrate how to model these processes for clients.
3. Demonstrate committed action aligned with therapeutic values, identify personal barriers, and apply this experiential understanding to support clients facing similar challenges.

**CEs Available (1.25):** CEs for Psychologists

### **130. Challenges and Opportunities with Self-Help Interventions: Findings from Research and Dissemination Efforts**

**Panel** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Didactic presentation, Literature review, Original data, Strategic planning*

Categories: Mobile or digital technology, Dissemination or global health strategies, Self-Help

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Gounot**

Michael Levin, Ph.D., Utah State University

Jonathan B Bricker, Ph.D., Fred Hutchinson Cancer Center/University of Washington

Ken Carswell, DClInPsy, World Health Organization

Yuen Yu Chong, Ph.D., The Chinese University of Hong Kong

Raimo Lappalainen, Ph.D., University of Jyväskylä

Mental health resources are critically needed to address access challenges, service gaps, and the prevalence of unmet mental health care needs. Research indicates that skills and processes targeted in therapy can be taught through self-help formats (e.g., books, apps, websites). Self-help interventions can provide widely accessible and scalable mental health resources, but there are also challenges to overcome in actually reaching and engaging individuals who might benefit. This panel of researchers with real-world research and dissemination experience evaluating self-help programs will explore the challenges and opportunities that self-help formats provide in delivering interventions including ACT. Presenters will discuss lessons learned from research and dissemination efforts in developing and deploying self-help interventions in a range of formats (e.g., guided and unguided, digital and analog) in contexts including clinical trials, systems of care, and broader public health programs. Topics include how to initiate and maintain engagement over time, strategies for dissemination and implementation of self-help that successfully reach people, the role of coach/therapist guidance, and ways to integrate self-help with other services.

Educational Objectives:

1. Describe ways that self-help can be disseminated and implemented.
2. Explain common challenges with self-help interventions.
3. Apply strategies to support engagement in self-help interventions.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **131. Addressing Black Pain: Applying Contextual Science to Race-Based Stress**

**Panel** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data*

Categories: Social justice / equity / diversity, Dissemination or global health strategies, ACT

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Barrot**

Jennifer Shepard Payne, Ph.D., LCSW-C, Kennedy Krieger Institute/ Johns Hopkins University

Alexander D Simmons, LMSW-C, Questions & Exploration Therapy, LLC  
Kia Skrine Jeffers, Ph.D., RN, UCLA

Individuals from the African diaspora have dealt with race-based and systemic barriers for decades in a variety of continents and spaces. For instance, African Americans are presently experiencing a wave of discrimination and economic disadvantage; over 400,000 Black women have lost government and corporate jobs in 2025, more job losses than any other demographic. Racism towards Black people in England is described by UN experts as structural, institutional, and systemic, with high levels of discrimination reported across education, policing, and the workplace. However, few evidence-based psychological interventions specifically address mental health outcomes associated with race-based stress. This expert panel will discuss ways in which contextual science can be applied to address the racial and systemic trauma that people from the African diaspora (those who have melanated skin tones) collectively experience. Examples of culturally tailored interventions are discussed; each presenter brings knowledge about their experiences with implementing culturally tailored interventions addressing Black pain.

Educational Objectives:

1. Identify the contexts of racial discrimination by articulating the historical and contemporary experiences of individuals from the African diaspora relating to systemic barriers and discrimination in various contexts.
2. Evaluate the Mental Health Impact of Race-Based Stress: Attendees will assess the psychological effects of race-based stress on this population and understand the gaps in current evidence-based psychological interventions.
3. Apply Contextual Science to Interventions: Participants will apply principles of contextual science to implement interventions that address the trauma and pain experienced by Black individuals and communities.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **132. The Body in ACTION: Client and Therapist Toward Embodied Flexibility**

**Symposium** • 15:15 - 16:30

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Case presentation, Literature review*

Categories: Clinical intervention development or outcomes, PTSD, Eating Disorders, Sexual Disorders

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Mouterde**

Marlène Louis, Master's, Psychologist  
Axel Bourcier, Dr., Private Practice  
Kathlyne Dupuis Maurin, M.A., Psychologist  
Anais Marmuse, Ph.D.

Contextual approaches recognize the role of emotions, bodily sensations, and physiological responses across different types of treatment. However, therapeutic change is mainly conceptualized through verbal processes, such as value clarification, defusion, or exposure in imagination or in vivo. Within this framework, the body is mainly mobilized as a source of interoceptive information, a context for emotional activation, or a target for regulation. Although the importance of bodily experience is recognized, its theoretical grounding often remains implicit and its clinical operationalization heterogeneous. As a result, the body is rarely conceptualized as an active process capable of directly modifying behavioral, emotional, and relational repertoires. This symposium aims to clarify the embodied implications of contextual and functional approaches by developing a processual and transdiagnostic framework of the body as a lever for change. Based on three clinical fields—eating disorders, PTSD, and sexual disorders—it specifies the conditions for indication, the targeted processes, and the intervention modalities that enable body-centered strategies to be articulated with existing contextual tools, in order to identify operational and transferable clinical benchmarks.

- *From Bodily Awareness to Bodily Targeting in Sexual Disorders*

Axel Bourcier, Private Practice

In contextual approaches, the body is widely engaged in clinical practice, but most often implicitly, without being conceptualized as a target of process-based intervention. It is frequently used to observe sensations or direct attention, rather than as a set of directly modifiable bodily processes involved in regulating behavior.

Taking sexual arousal as a model, the body is conceived not as a simple object of awareness, but as a dynamic process of regulation, involving rhythm, muscle tone, breathing, and movement. These processes play a central role in bottom-up regulation in the modulation of sexual arousal and can be intentionally targeted, as illustrated by the example of premature ejaculation, where the intervention aims at bodily fluidity in order to diffuse sexual arousal (Desjardins 2011, de Carufel 2006).

A simple process-based distinction between bodily awareness and bodily targeting is proposed in order to make more explicit the so-called "embodied" practices already present in contextual approaches.

- *A Process-Based Conceptualization of Body Image Disturbances in Eating Disorders*  
Kathlyne Dupuis Maurin, Hôpital Lapeyronie, CHU Montpellier

Body image disturbances are one of the central dysfunctional cognitive patterns of eating disorders (EDs). They are closely associated with the onset of the disorder and symptom severity, as well as the risk of relapse.

Despite their major role in maintaining EDs, these disturbances remain poorly understood. Their management is therefore complex, even though they are a frequent and persistent complaint throughout therapeutic follow-up.

A process-based conceptualization of body image disturbances appears to be a relevant tool for achieving a comprehensive understanding of the mechanisms involved in this issue. It also allows to propose individualized and adapted therapeutic strategies.

Based on a clinical case, we will illustrate this conceptualization as well as the assessment and treatment tools used, highlighting the psychological, individual, and interpersonal processes involved.

- *Bodily Manifestations of PTSD in Military Populations: Clinical Assessment and Intervention*  
Anais Marmuse, Ph.D, Service de Santé des Armées

The military population is particularly affected by post-traumatic stress disorder (PTSD). Data from the literature show that military personnel exhibit numerous (psycho)somatic symptoms and are particularly prone to chronic pain.

Dissociative symptoms may come into play, requiring careful observation of physical manifestations in order to promote emotional regulation. However, it is not always (only) a question of dissociation, so how can we assess and intervene more holistically on this body that suffers and expresses itself, especially when it echoes the trauma?

Through several clinical illustrations, we will present the questions and concerns that led us to observe our patients' bodily manifestations more closely. We will also illustrate how to welcome and make room for these manifestations in psychoeducation and therapeutic exercises, particularly prolonged exposure.

Educational Objectives:

1. Analyze how bodily processes and embodied experiences contribute to the development and maintenance of eating disorders, PTSD, and sexual disorders.
2. Assess bodily processes and integrate body-centered interventions with contextual tools across eating disorders, PTSD, and sexual disorders.
3. Apply targeted body-centered processes to support change across eating disorders, PTSD, and sexual disorders.

**CEs Available (1.25):** [CEs for Psychologists](#)

### **133. The Power of Language: A Clinician-Friendly Experiential Introduction to RFT**

**Workshop** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

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

Categories: RFT / RGB / language, Processes of change, RFT

Target Audience: *Beginner*

**Location: Weil**

Lou Lasprugato, MFT, Lou Lasprugato Psychotherapy & Training PLLC

This brief workshop provides a practical, clinician-friendly introduction to relational frame theory (RFT), the behavior analytic account of human language and cognition that informs acceptance and commitment therapy (ACT). While often perceived as highly academic, RFT offers powerful, actionable insights into how language influences psychological suffering and wellbeing. This workshop will attempt to demystify RFT by focusing on its core concepts and applications to psychotherapy.

Through didactics and experiential exercises, participants will gain a foundational understanding of the three basic properties of derived relational responding (DRR) - mutual entailment, combinatorial entailment, and transformation of function - and their clinical implications. Participants will experience, first-hand, how language, via DRR, can produce unhelpful rules, evoke experiential avoidance, and at the same time, render control strategies ineffective. With all its pitfalls, language is also the primary vehicle of psychotherapy. Through alterations of the verbal context with different relational frames, clinicians will experience how DRR can transform functions, including in ways that promote more flexible responding. The connections between RFT and ACT will be elucidated throughout the event.

Educational Objectives:

1. Describe the basic processes of RFT's core properties: mutual entailment, combinatorial entailment, and transformation of function.
2. Explain the role of derived relational responding in rule-governed behavior and experiential avoidance.
3. Demonstrate how to use relational frames to alter the context of private events in ways that evoke more flexible responses.

**CEs Available (1.25):** [CEs for Psychologists](#)

**134. The Space Between and Within Us: Mindfulness and Movement within FAP**  
**Workshop** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Experiential exercises*

Categories: Clinical intervention development or outcomes, Processes of change, Mindfulness, Movement, FAP

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Aristotle**

Yasmin Fulder Heyd, D.Psy., Shiluv Center Psychotherapy School  
 Tien Kuei, M.Sc., Power To Live Foundation

Mindfulness within Contextual Behavioural Science (CBS) is often framed in terms of cultivating self-awareness and Self-as-Context. However, less attention has been given to how mindfulness can be used to shape in-the-moment interpersonal behaviour, enhance social connectedness, and serve as an evocative context for clinically relevant behaviour (CRBs) in Functional Analytic Psychotherapy (FAP).

In this experiential workshop, participants will practice non-verbal, movement-based mindfulness exercises designed to be integrated directly into sessions. Drawing on traditional martial arts principles of embodied, moment-to-moment body-mind awareness, we will explore how synchronised movement and mindful posture can: (a) increase contact with present-moment interpersonal cues, (b) evoke CRBs related to intimacy, vulnerability, and boundaries, and (c) provide therapists with additional ways to shape more flexible, values-consistent social behaviour. The focus will be on translating these practices into functional, in-session interventions that deepen therapist-client connection while remaining firmly grounded in a behavioural, process-based framework

Educational Objectives:

1. Explain the functional rationale for using mindfulness and movement, including how these practices can enhance present-moment awareness for therapist and client increasing the detection of CRB1s and CRB2s in session.
2. Describe and demonstrate at least two mindfulness-movement practices that can evoke CRBs (e.g., approach, withdrawal, boundary-setting), and shift the function of that behaviour toward greater flexibility, openness, and responsiveness.

3. Apply mindfulness and movement into a FAP-consistent intervention plan, creating a felt-sense of being held, supported, and cared for, while maintaining a clear focus on functional analysis and contextual processes.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### 135. Assessing Therapist Skillfulness - Approaches to Measuring Knowledge, Fidelity and Competency

**Symposium** • 15:15 - 16:30

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Original data*

Categories: Professional development, Supervision and training, Assessment Methods

*Target Audience: Beginner, Intermediate, Advanced*

**Location: Perroux**

Chair: Katariina Keinonen, Ph.D., University of Jyväskylä

Discussant: Lance M. McCracken, Ph.D., Uppsala University; Centre for Biomedical Research in Epidemiology and Public Health (CIBERESP)

Ross G. White, Ph.D., Queen's University Belfast

Madeleine Fraser, DClPsych, MPhil, Ph.D., Australian Catholic University

Reliable assessment of therapists' professional skill level and development is crucially important for improving training and research practices in intervention science. This symposium introduces four approaches to operationalizing therapist competencies across theoretical frameworks and training contexts. These tools can benefit trainers and researchers who seek to examine effectiveness of training or the role of competence in intervention research, and clinicians interested in self-assessment of professional development. First, the Process-Based Competence Task (PBCT) operationalizes therapist skillfulness as the ability to accurately identify key characteristics of therapist behaviors in simulated therapy discussions, complemented by a self-assessment survey. Second, a situational judgment test (SJT) assesses ACT-consistent knowledge and its application in clinical decision-making, supporting self-evaluation, training evaluation, and research use. Third, the Acceptance and Commitment Therapy Fidelity Measure (ACT-FM), developed using a Delphi process and evaluated in a usability study using therapy session recordings, offers an effective measure for levels of fidelity. Finally, the symposium presents the implementation of Objective Structured Clinical Examinations (OSCEs) as a simulation-based method for assessing core competencies in graduate psychology training.

- *Development and Validation of the Process-Based Competency Task (PBCT)*

Katariina Keinonen, Ph.D., University of Jyväskylä

Simone Gorinelli, Ph.D., University of Jyväskylä

Essi Sairanen, Ph.D., University of Jyväskylä

Joseph Ciarrochi, Ph.D., Australian Catholic University

Stefan G. Hofmann, Ph.D., Philipps-Universität Marburg

Martti T. Tuomisto, Ph.D., Tampere University

Empirical research demonstrating the importance of therapist competence for successful intervention delivery remains limited. Available findings suggest that variation in competence is often not associated with variation in treatment outcomes. However, reliable evaluation of therapist competence requires carefully validated assessment methods that are sensitive to prior training, responsive to further skill development, and applicable across diverse training contexts. The PROCEED (Process-Based Competence Evaluation Method to Establish Evidence-Based Dissemination Practices) research project addresses these challenges by developing a novel competency task (PBCT) and a complementary self-assessment measure. Grounded in principles of Process-Based Therapy, the PBCT conceptualizes therapist skillfulness as the ability to accurately identify key characteristics of therapist behaviors in simulated therapy discussions spanning multiple cognitive-behavioral intervention approaches. The self-assessment survey captures therapists' perceived competence, enabling examination of convergence between perceived and performance-based competence. Developed in 2024–2025, both measures are currently undergoing validation. This paper describes the development process, presents preliminary validation findings, and discusses future directions for improving the accuracy and reliability of global competence assessment.

- *Situational Judgement Test (SJT) to Assess Applied Knowledge of ACT*

Prof. Ross G. White, Queen's University Belfast  
 Dr. Kathryn Jamison, Queen's University Belfast  
 Dr. David Curran, Queen's University Belfast  
 Victoria Samuel, Private Practice

Challenges exist with measuring practitioners' application and understanding of Acceptance and Commitment Therapy (ACT). A situational judgement test (SJT) offers a novel approach to assessing practitioners' ACT-consistent knowledge and how it can be applied in practice. Two studies were completed to develop and evaluate the utility of the first SJT for assessing clinicians' applied ACT knowledge. First, expert consensus via three iterative rounds of Delphi methodology was used to develop the 10-item ACT SJT: 13 panelists participated in round one, 12 in round two, and 10 in round three. Panelists were required to have used ACT in clinical practice and/or research for at least five years. A second study examined the utility of the developed ACT SJT, with significant pre-post changes in ACT SJT scores following ACT training. The development of the ACT SJT has potentially important implications for both clinical and research settings. It can be used by clinicians to self-evaluate their clinical application of ACT, by trainers evaluating the effectiveness of ACT introductory training, and by researchers investigating ACT-consistent knowledge.

- *ACT Fidelity Measure (ACT-FM)*

Lance M. McCracken, Uppsala University; Centre for Biomedical Research in Epidemiology and Public Health (CIBERESP)  
 Christopher D. Graham, University of Strathclyde; Psychological Services, NHS Lanarkshire

We cannot assume that a treatment is what it is just because researchers or clinicians say it is. We need to verify, whether this be in research, in clinical practice, or in training. We need to assess fidelity, whether treatment is delivered according to its own specified principles. This presentation will describe development of an ACT fidelity measure (ACT-FM). Initially, a draft item set was subjected to three rounds of Delphi survey involving 13 experienced ACT practitioners. Then a usability study was conducted employing video recordings of therapy sessions. The resulting 25-item measure reflects both ACT-consistent and ACT-inconsistent performances in "open," "aware," and "engaged" aspects of the psychological flexibility model plus therapeutic stance. A further online experiment, including 14 clinicians presented with audio content from therapy sessions with varying levels of ACT fidelity, demonstrated that the measure effectively discriminates between ACT delivered with varying levels of fidelity with moderate reliability, though reliability estimates appeared imprecise. ACT-FM appears adequate for assessing fidelity, is user-friendly, and is translated into Spanish, Portuguese, French, Turkish, Italian, Polish, Swedish.

- *Application and Evaluation of Objective Structured Clinical Examination (OSCE) to Assess Core Clinical Skills in Postgraduate Psychology Training*

Dr. Madeleine Fraser, Australian Catholic University  
 Prof. Keong Yap, Australian Catholic University

Simulation is a crucial learning activity for psychology training. Simulation can involve students role-playing the skills of a psychologist with a client-actor, improving student skill and therefore also enhancing future public safety. Objective Structured Clinical Examinations (OSCEs) involve assessment of core competencies using simulation exercises, serving a useful mechanism for student feedback and evaluation. This talk will present the implementation of OSCEs in the Master of Clinical Psychology program at Australian Catholic University (ACU, Sydney) for students prior to commencing their first clinical placement. Materials and practical tips to assist the implementation of an OSCE in educational settings will be provided (as discussed in Yap, et al., 2021). In addition, the talk will critique the novel Quality in Psychology Simulation Instrument (QPSI, Yap et al., under review). This tool is developed by the Australian Postgraduate Psychology Simulation Working Group (APPESWG) to evaluate the quality of OSCEs as both a learning and assessment opportunity. The QPSI includes nine criteria to guide best-practice integration of simulation in professional psychology training. Findings of the application of the QPSI to ACU's current OSCE practices will be presented, along with current challenges and direction for future improvements.

**Educational Objectives:**

1. Explain the importance of assessing therapist knowledge, fidelity and core competencies in the context of training and intervention research.
2. Describe key considerations in development and validation of tools used to assess and track professional skill development.
3. Implement formal assessment of therapists' skills in training and research contexts.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **136. A Balancing ACT: Using Intentional Self-Disclosure to Model Psychological Flexibility**

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Professional development, Processes of change, Self-Disclosure

*Target Audience: Intermediate*

**Location: Maldiney**

Rikke Kjølgaard, M.Sc.,

Self-disclosure can create powerful moments of connection and change. At the same time, many practitioners hesitate. Will it be too much? Too personal? Distracting?

This highly experiential workshop focuses on intentional self-disclosure as a deliberate clinical choice grounded in clarity of purpose, integrity and courage. Participants will explore how using themselves consciously in the room can model psychological flexibility in real time.

Through concrete examples, reflection and guided practice, we will work with timing, dosage and adaptation. Participants will learn how to shape and refine personal stories so they align with specific processes of psychological flexibility, strengthening their ability to share with precision, awareness and authenticity.

Participants will begin developing a personal repertoire of stories and lived examples they can draw on intentionally. The emphasis is on practice and presence over perfection.

Led by an experienced ACT trainer known for bringing self-disclosure into therapy, supervision and teaching, this session invites participants to step forward with greater confidence and care in their use of self in therapeutic interactions.

Educational Objectives:

1. Identify when therapist self-disclosure serves the therapeutic process and when it does not.
2. Demonstrate how to shape and adapt personal stories so they align with specific processes of psychological flexibility.
3. Demonstrate delivering a self-disclosure and adjust it in response to the unfolding therapeutic interaction.

**CEs Available (1.25):** CEs for Psychologists

### **137. Applying Process-Based Therapy using a Single Case Design Approach**

**Workshop** • 15:15 - 16:30

Translation: Not available

Components: *Case presentation, Didactic presentation, Original data*

Categories: Processes of change, Behavior analysis, Case Conceptualization, Treatment Planning, Outcome Evaluation

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C125**

Katerina Georgiou, Ph.D., University of Cyprus

Dafni Kyriakou, M.Sc., University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Applied Behavior Analysis (ABA) and the rising interest in Contextual Behavior Science in recent years have shifted the focus on processes of change in therapeutic settings (Hayes et al., 2020). ABA aims to identify variables that reliably influence socially significant behavior and develop a technology of behavior change that takes practical advantage of those discoveries. Process- Based Therapy (PBT; Hayes & Hofmann, 2018) was developed as an alternative and personalized approach to case conceptualization, treatment planning and outcome evaluation. The workshop will be divided into four sections and have a duration of 1.5 hours. Section one aims to introduce Single Case Design methodologies, focusing on their clinical application and discuss the applications of PBT using such methodologies. Section two aims to illustrate the applications of PBT to case conceptualization using individual network analysis exemplified via a case vignette. The third section focuses on treatment

planning based on the functional analysis conducted and linking treatment outcomes to change processes. Section four involves statistical analyses relevant to treatment planning, ongoing case conceptualization, and outcome evaluation.

Educational Objectives:

1. Define applications of PBT using a Single Case Design approach
2. Demonstrate case conceptualization, treatment planning, and outcome evaluation based on the premises of PBT.
3. Discuss statistical analyses related to PBT and Single Case Designs

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

### **138. Psychedelic-Assisted Therapy and CBS: Psychedelic and Non-Ordinary States of Consciousness SIG Sponsored**

**Symposium** • 15:15 - 16:30

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Processes of change, Psychedelics, PTSD, Cancer, Processes of Change

Target Audience: *Beginner*

**Location: C154**

Chair: Jenna LeJeune, Ph.D., Portland Institute for Psychedelic Science

Discussant: Jason Luoma, Ph.D., Portland Institute for Psychedelic Science

Alan K Davis, Ph.D., The Ohio State University

Stacey B Armstrong, Ph.D., The Ohio State University

Brian Pilecki, Ph.D., Portland Psychotherapy, Portland institute for Psychedelic Science

Ioana Ivan, MClinPsych, Babeş-Bolyai University

Growing evidence suggests psychedelic experiences may enhance psychological flexibility and related processes. This symposium presents converging evidence examining psychological flexibility as a potential mechanism of psychedelic-assisted therapy across diverse contexts and populations.

We begin with a systematic review synthesizing literature on psychedelic use and psychological flexibility outcomes. The second presentation involves pilot data from a trial of psilocybin-assisted therapy for major depressive disorder in non-small cell lung cancer patients, including examining changes in psychological flexibility. The third paper reports on the outcomes of a pilot trial examining the safety and effectiveness of psilocybin-assisted therapy (PAT) among veterans with treatment-resistant post-traumatic stress disorder and whether psychological flexibility changes were associated with PTSD outcomes. The fourth presentation presents data from a trial of MDMA-assisted therapy trial data for social anxiety disorder, examining acceptance and defusion processes. A fifth paper discusses a theoretical model of psychedelic-assisted therapy grounded in behavior analysis.

Together, these presentations offer comprehensive examination of psychological flexibility as a transdiagnostic mechanism in psychedelic-assisted therapy, spanning systematic synthesis, naturalistic observation, and controlled clinical investigation.

- *Preliminary Findings from a Proof-of-Concept Trial of Psilocybin Assisted Therapy for Major Depressive Disorder in Non-Small Cell Lung Cancer Patients*

Stacey B. Armstrong, Ph.D., The Ohio State University

Alan K. Davis, Ph.D., The Ohio State University

Nathan Sepeda, M.S., The Ohio State University

Adam W. Levin, M.D., The Ohio State University

Ted Wagener, Ph.D., The Ohio State University

Peter Shields, M.D., The Ohio State University

Barbara Andersen, Ph.D., The Ohio State University

Major depressive disorder (MDD) is highly prevalent among individuals with non-small cell lung cancer (NSCLC), contributing to poor quality of life, reduced treatment adherence, and elevated mortality.

Existing interventions demonstrate limited efficacy, and antidepressant use is further constrained by tolerability issues and interactions with oncology treatments. Psilocybin-assisted therapy (PAT) has shown rapid and sustained antidepressant effects in patients with life-threatening cancer diagnoses and in MDD

broadly. However, no trials have yet evaluated PAT specifically in NSCLC patients, who experience the highest rates of depression among all cancer groups. The DREAM LUNG study is an open-label, proof-of-concept trial assessing the safety, acceptability, and efficacy of a single 25mg dose of psilocybin with supportive psychotherapy among NSCLC patients with MDD (N&#3f10). At the time of the conference presentation, we expect to report data from our first five participants, including safety, treatment acceptability, and depression outcomes. We will also examine whether psychological flexibility (PF) changes from pre-to-post treatment and if changes in PF predict improvement in depression. Findings will guide future mechanistic aims in randomized trials of PAT.

- *Clinical Behavior Analysis in Psychedelic-Assisted Therapy: Guiding Contextualized Interventions Across a Spectrum of Approaches*

Ioana Ivan, Babeş-Bolyai University  
Eugen Secară, Babeş-Bolyai University  
Adrian Opre, Babeş-Bolyai University

This paper aims to provide a concise overview of the predominant perspectives on the role of psychotherapy within psychedelic interventions, organizing them along a continuum that reflects the varying degrees of emphasis placed on psychological processes. The authors have introduced a continuum model of psychedelic-assisted psychotherapy, defined by the varying degrees of emphasis placed on the psychotherapeutic process relative to pharmacological intervention. This spectrum ranges from biologically focused approaches, which prioritize the neurobiological mechanisms of psychedelic compounds, to more integrated psychotherapeutic approaches, such as the psycholytic and psychedelic models, where the therapist's role is central to facilitating change. Building on this model, a framework grounded in clinical behavior analysis is proposed to harness the flexibility induced by psychedelic administration. It offers a structured approach to guiding therapist-client interactions and interventions at each stage of the process through a comprehensive and interdisciplinary cohesive case formulation. While the importance of utilizing the flexibility promoting effects of psychedelic substances is well established, leveraging this understanding is essential for optimizing psychedelic-assisted psychotherapy and ensuring its safe and effective application.

- *Changes in Psychological Flexibility Predict Improvement in PTSD Symptoms and Post-Traumatic Growth Following Psilocybin Assisted Therapy among US Military Veterans*

Alan K. Davis, Ph.D., The Ohio State University  
Stacey B. Armstrong, Ph.D., The Ohio State University  
Nathan D. Sepeda, MTDA, The Ohio State University  
Adam W. Levin, M.D., The Ohio State University

We conducted a trial examining the safety and effectiveness of psilocybin-assisted therapy (PAT) among veterans with treatment-resistant post-traumatic stress disorder (TRPTSD). Twelve veterans completed 8 hours of preparation therapy, received two doses (15mg and 25mg) of synthetic psilocybin, followed by 8 hours of integration therapy. Results showed no serious adverse effects in the sample, no increase in suicidality, and a significant and meaningful improvement in PTSD symptoms from baseline through 1-, 3-, and 6-months post-dosing ( $p < .001$ ). Here we assess whether psychological flexibility (PF) changes from baseline to 1m post-dosing, and whether changes in PF are associated with PTSD symptoms and post-traumatic growth (PTG) at follow-up. Findings reveal that PF improved at 1m ( $p < .001$ ;  $\eta^2 p = .55$ ), predicted PTSD symptoms at 1m ( $r = -.42$ ), 3m ( $r = -.36$ ), and 6m ( $r = -.33$ ), and predicted improvement in PTG at 3m ( $r = -.62$ ) and to a lesser degree at 6m ( $r = -.23$ ). These findings suggest that PF may be a mechanism of PAT for veterans with TRPTSD and should be examined in future randomized controlled trials of PAT in this population.

- *MDMA-Assisted Therapy for Social Anxiety Disorder: Changes in Acceptance of Shame and Defusion from Self-Critical Thinking*

Brian Pilecki, Ph.D., Portland Institute for Psychedelic Science  
Jason Luoma, Ph.D., Portland Institute for Psychedelic Science  
Christina Chwyl, Ph.D., Portland Institute for Psychedelic Science

While MDMA-assisted therapy (MDMA-AT) has received growing attention for treating PTSD, research into other conditions, including Social Anxiety Disorder (SAD), remains nascent. Theoretical and clinical accounts suggest that MDMA-AT may facilitate key psychological flexibility processes, particularly acceptance and cognitive defusion, which are central to the maintenance and treatment of SAD (Luoma & Lear, 2021). Shame and shame-related avoidance are core features of social anxiety, as individuals develop strategies to avoid shame and protect themselves from perceived rejection and negative evaluation. Self-critical thinking is one such strategy, functioning to preempt social threat while reinforcing social withdrawal and inauthenticity. This paper presents data from a wait-list controlled randomized clinical trial of 20 participants with SAD who underwent two sessions of MDMA-AT with preparation and

integration sessions. Acceptance was measured using the Acceptance of Shame and Embarrassment Scale (ASES; Sedighimornani et al., 2019), a 17-item measure of willingness to accept interpersonal shame and embarrassment. Defusion was measured using the Fusion of Repetitive Self-critical Thoughts scale (FoReST; White et al., 2020). Results are being analyzed and will be presented.

- *Psychological Flexibility as a Mechanism of Psychedelic Change: A Systematic Review*

Alyson M. Negreira, Ph.D., Private Practice

Liliana Kennedy, B.S., The Portland Institute for Psychedelic Science

Joseph Diehl, Ph.D., New York Presbyterian; Weill Cornell Medicine

Ivan Stojcevski, M.A., M.Sc., Université de Picardie Jules Vernes; CRP-CPO lab - UR 7273

Christina Chwyl, Ph.D., The Portland Institute for Psychedelic Science

Brian Pilecki, Ph.D., The Portland Institute for Psychedelic Science

Jason Luoma, Ph.D., The Portland Institute for Psychedelic Science

Psychological flexibility (PF)—openness to internal experiences in the service of values-consistent action—is the primary hypothesized process of change in Acceptance and Commitment Therapy (ACT). Increasing evidence suggests that psychedelic experiences may influence PF and related processes (e.g., mindfulness, self-compassion), but findings have not been comprehensively synthesized. We conducted a PRISMA-guided systematic review of peer-reviewed original studies examining associations between psychedelic use and quantifiable outcomes of global PF (e.g., AAQ-2) and PF-related processes, such as mindfulness or self-compassion. Across studies, results generally indicated improvements in global PF and PF-related processes following psychedelic experiences or greater PF among those reporting psychedelic use; however, the evidence base was constrained by substantial methodological limitations, most notably reliance on cross-sectional survey designs and heterogeneous measurement and intervention approaches. Overall, the literature is consistent with PF as a plausible psychological pathway through which psychedelics may confer benefit, underscoring the need for prospective longitudinal studies and well-controlled clinical trials using validated PF measures and mechanistic designs.

#### Educational Objectives:

1. Explain how changes in psychological flexibility predict improvements in PTSD symptoms and post-traumatic growth among US military veterans receiving psilocybin-assisted therapy.
2. Identify core components of psilocybin-assisted therapy for lung cancer patients and describe how these elements support changes in psychological flexibility during the course of treatment.
3. Describe the current state of empirical evidence linking psychedelic experiences to changes in psychological flexibility and related processes (e.g., mindfulness, self-compassion).

#### CEs Available (1.25): [CEs for Psychologists](#)

### 139. Cultivating Health & Wellbeing: Single-Case Evidence for ACT in Chronic Illness and Occupational Health Contexts

**Symposium** • 15:15 - 16:30

Translation: Not available

Components: *Didactic presentation, Original data*

Categories: Health / behavioral medicine, Methods/approaches for individual variation, Cardiovascular Disease, Inflammatory Bowel Disease, Farmer Mental Health

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C225**

Chair: Joseph Lavelle, Ph.D., Dublin Business School

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

Orla Moran, Ph.D., Dundalk Institute of Technology

Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin

Whilst the effectiveness of ACT has been demonstrated across myriad intervention modalities and populations, there remains a need to adapt and tailor ACT interventions to the diverse needs of specific population groups. This symposium presents single-case evidence on tailored ACT interventions across three distinct health contexts: chronic illness and occupational mental health. Dr. Orla Moran will present findings from a SCED evaluating a tailored digitally-mediated ACT intervention for individuals living with cardiovascular disease, highlighting outcomes on psychological flexibility, disease self-management, and intervention acceptability. Dr. Alison Stapleton will describe the development and evaluation of an ACT-based training for farm advisors. Finally, Dr. Joseph Lavelle will

present research on digitally-mediated ACT interventions for individuals with inflammatory bowel disease and co-occurring mental health difficulties. Taken together, the presentations in this symposium will demonstrate how ACT-interventions can be adapted to support the needs of diverse health, mental health, and occupational health populations. Moreover, these presentations will illustrate both how SCED research can demonstrate functional relationships between psychological flexibility and a range of adaptive health behaviours and mental health outcomes.

- *Digital ACT for the Improvement of Self-Management Behaviors and Psychological Flexibility in Adults with Cardiac Disease: A Single Case Experimental Design and Qualitative Investigation*

Orla Moran, Ph.D., Dundalk Institute of Technology  
 Julie Doyle, Ph.D., Dundalk Institute of Technology  
 Louise McHugh, Ph.D., University College Dublin  
 Oonagh Giggins, Ph.D., Dundalk Institute of Technology  
 Suzanne Cullen-Smith, M.Sc., Dundalk Institute of Technology  
 Evelyn Gould, Ph.D., Little Seedlings Consulting, New England Centre for OCD and Anxiety  
 Joseph Lavelle, Ph.D., Dublin Business School

Psychological distress in those with cardiovascular disease increases the risk for poorer disease outcomes, including self-management behaviors, and mortality. Digital health platforms offer increased availability and flexibility to individuals who may not be able to access in person therapy. Acceptance and Commitment Therapy (ACT) has consistently demonstrated positive outcomes in those with chronic health conditions, however most empirical investigations conducted to date also involve in-person therapy. This research examines the efficacy of a digital ACT intervention to improve self-management behaviors and psychological flexibility in 5 cardiac patients (M=55.55yrs; SD=6.81yrs; 6 males). A mixed methods design was used. Quantitative analysis involved a randomized-multiple baseline Single Case Experimental Design (SCED). The Independent Variable for each participant is pre- post intervention phase. Dependent variables are daily self-report measures of psychological flexibility, as well as objective measures of self-management. Quantitative outcomes did not reveal any significant improvements, however a number of important contributions to supporting people with cardiac disease were identified. Implications for future research are discussed.

- *An Idiographic Examination of ACT for Farmer Mental Health: A Single-Case Experimental Design*

Greg Stynes, Ph.D., University College Dublin  
 Alison Stapleton, Ph.D., University College Dublin  
 Barbara Moore, Ph.D., University College Dublin, South East Technical University  
 Martin O'Connor, Ph.D., University College Dublin  
 Paul Nangle, M.Sc., University College Dublin  
 Tomás Russell, University College Dublin  
 Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz  
 Louise McHugh, Ph.D., University College Dublin

Farmers experience elevated levels of depression, anxiety, stress and suicidal behaviors. Financial concerns, workload, time pressures, loneliness, climate change, regulatory policies, physical health, and relationships all appear to play a role. Perceptions of the self as being self-reliant, along with distance from and cost of healthcare, may further compound distress by impeding help-seeking behaviors. Transdiagnostic, process-based therapies, such as Acceptance and Commitment Therapy, may provide a useful resource in efforts to support farmer mental health. This study outlines the evaluation of a six-session online ACT intervention, with six farmers in Ireland (39 to 69 years; self-described as five males and one female) using a randomized, multiple baseline, single case experimental design. Tau-U results from responses over 84 days suggested a significant increase in psychological flexibility (all  $p < .001$ ) for three farmers and a significant reduction in stress for one farmer ( $p < .001$ ). There was a significant between case, standardized mean difference effect size observed for psychological flexibility (0.964). Implications from the research and recommendations for future interventions are discussed.

- *Brief and Telehealth Acceptance and Commitment Therapy (ACT) Interventions for Stress in Inflammatory Bowel Disease (IBD): A Series of Single Case Experimental Design (SCED) Studies*

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

The present paper trialed two brief ACT interventions via randomized multiple baseline designs. Study 1 trialed a single-session ACT intervention (delivered face-to-face and lasting approximately two hours) targeting stress and experiential avoidance, respectively. Participants were seven people with an IBD diagnosis who presented with moderate to extremely severe stress (five females, two males; M age = 39.57, SD = 5.74). The findings of study 1 indicate that a single-session ACT intervention represented an insufficient dosage to reduce stress and experiential avoidance. Study 2 investigated a brief telehealth ACT intervention targeting stress and increased psychological flexibility. Participants (N = 12 people with an IBD diagnosis and mild-severe stress) completed baselines lasting from 21-66 days before receiving an ACT telehealth intervention supplemented by a workbook and phone consultation. Approximately half of participants experienced reduced stress, increased engagement in valued action, and increased functioning. Despite shortcomings such as missing data and the context of COVID-19, the present findings suggest that brief ACT interventions in this population may be effective and economic, though further research and replications are necessary.

#### Educational Objectives:

1. Describe how ACT-interventions can be adapted and tailored to meet the needs of diverse health and occupational health populations.
2. Evaluate the effectiveness of ACT interventions for individuals with cardiovascular disease, IBD, and in occupational settings such as agricultural advising.
3. Demonstrate how SCED-research can be used to evaluate tailored and novel interventions and examine functional relationships between psychological flexibility and a range of behavioural, health, and mental health outcomes.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

#### **140. Roll for Initiative: Facilitating Social Skills and Peer Connection via Tabletop Role-play Games**

**Workshop** • 15:15 - 16:30

Translation: Not available

Components: *Didactic presentation, Strategic planning*

Categories: Behavior analysis, Methods/approaches for individual variation, Adolescents, Adults, Social Skills, ASD, ADHD

Target Audience: *Beginner, Intermediate*

**Location: C254**

Erika Emery, M.A., BCBA, Social Skills Training Project

Tabletop role-play games (TTRPG) have been around for decades, with increased relevance in pop culture over the last ten years. With clients eager to step into these spaces but lacking the necessary skills to participate independently, practitioners can fill the gaps with facilitated social hang outs. Behavior analysts can apply established, credible, intervention methods (behavioral skills training, modeling, interdependent group reinforcement) via this modality to support skills and reduce barriers for generalization. This presentation will teach you how to set up two types of facilitated gaming sessions: 1) roleplay games to target specific situations, similar to a social story, and 2) how to run a gaming session that supports real-time social connection. We will discuss behavior analytic methods to teach and evaluate skill progress in this setting, and how to modify your program to support children, adolescents, and adults.

#### Educational Objectives:

1. Describe the pre-requisite skills for participation in a facilitated tabletop roleplay gaming session.
2. Identify skills appropriate for facilitation, and means to evaluate and measure performance.
3. Demonstrate social skills coaching by using active modeling, roleplay, and rehearsal techniques.

**CEs Available (1.25):** CEs for Psychologists BCBA CEUs

#### **141. ACT for Body Grief in Chronic Illness: "Being a Body" When Your Body Won't Let You Be**

**Workshop** • 15:15 - 16:30

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Methods/approaches for individual variation, Chronic Illness, Chronic Pain, Body Grief

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Devin Guthrie, Ph.D., Life & Death Coaching

Amy N Gorniak, Psy.D., Hearthlight Mental Health PLLC

Drawing on the personal & professional experience of two dynamically disabled psychologists, this workshop offers insight into best (& worst) practices for working with chronically ill clients. A robust body of literature indicates ACT's efficacy with chronic illness; yet, practitioners cite significant challenges. This experiential workshop will help practitioners build specific skills to address these challenges using two key recontextualizations: First, systemic contexts (e.g., cultural, economic, medical) routinely reinforce self-alienation that keeps disabled clients stuck in cycles of distress & dissociation. Participants will learn to deconstruct unhelpful narratives & interrupt these cycles by promoting body trust. Second, the workshop will explore the experience of chronic illness through the lens of body grief, which Jayne Mattingly defines as grief associated with being a body that does not function the way we want it to. Participants will learn to use the model of body grief to promote psychological flexibility & have opportunities to connect with their own experiences of body grief, a near-universal human experience with the potential to facilitate connection & efficacy for clients & practitioners.

Educational Objectives:

1. Identify and help clients defuse from common body narratives that promote psychological inflexibility around chronic illness and ineffective relating to their bodies and symptoms (e.g., perceived body betrayal, body alienation).
2. Explain the stages of body grief and help clients connect their current struggles with chronic illness to past experiences of body grief they can now relate to more flexibly.
3. Demonstrate communication strategies that validate and effectively convey your own uncomfortable internal experiences (e.g., feelings of helplessness) when working with clients with chronic illnesses.

**CEs Available (1.25):** [CEs for Psychologists](#)

Saturday Afternoon Plenary 16:45

## 142. Mental Health and Psychosocial Support in Large Scale Humanitarian Settings: Lessons Learned

Plenary • 16:45 - 17:45

Translation: AI online with your phone - audio or text

Components: *Didactic presentation*

Categories: Dissemination or global health strategies, Public Health

Target Audience: *Intermediate*

**Location: Merieux (Overflow Rooms: Weil, Aristote, Perroux)**

Mark van Ommeren, Ph.D., WHO

Introduction by: *Maria Karekla, Ph.D., University of Cyprus*



What advice can we give to decision-makers with some, but finite, resources for mental health responsible for 100,000s of people recently affected by war or disaster? Helping everybody severely distressed? Helping everybody at risk of a mental disorder? Helping everybody with a mental disorder? Helping everybody with a severe mental disorder? Helping people with certain priority conditions only, such as posttraumatic stress? Helping everybody who seeks help? Helping everybody? And what is the potential role of psychological interventions, including ACT? Must these be open access? And can these successfully be operationalized to be effective at scale? This talk discusses how WHO has considered and responds to these dilemmas.

Educational Objectives:

1. Describe dilemmas of decision-makers on how to invest and coordinate scarce responses in disaster response.
2. Select and apply meaningful, evidence-based strategies to address mental health needs of affected populations.
3. Apply population-level thinking to needs of vast populations.

**CEs Available (1.00):** [CEs for Psychologists](#)

## Program Detail • Sunday • 19 July

Sunday Morning 8:00

### Social Work SIG Gathering 2026

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Gounot**

Alexander Simmons, Private Practice

This gathering is open to all members of ACBS that are interested in learning more about the Social Work SIG, initiatives, volunteer opportunities, upcoming events, and networking. During the gathering we will engage in ice breaker activities for introductions, discussion on Social Work values, and explore new opportunities for the SIG to develop and implement. We welcome you to attend.

### Sport, Health, and Human Performance SIG Committee Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Barrot**

Manabu Yoshimoto, B.A., Deep Slow Move River  
Thomas G. Szabo, Ph.D., BCBA-D, McNeese State University

The topics involved in our SIG activities cover a wide range. This includes performance-related areas such as the unique challenges athletes face, including yips and perfectionism, as well as issues relevant to musicians and dancers. We also address themes such as leadership under severe environments and the prevention of burnout among medical students. These examples illustrate how contextual behavioral science can be applied far beyond traditional clinical settings. We hold our SIG monthly meeting every month, but your cooperation is essential for further enriching our activities. Above all, we hope this meeting will offer an opportunity to connect with people from around the world.

### Creando Comunidad Desde la Interculturalidad

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Mouterde**

Estevez Solange, Consulta Privada

Nuestra reunion tiene como objetivo darle la posibilidad a los argentinos que esten en Lyon a encontrarse y charlar sobre como seguir armando comunidad en nuestro idioma, haciendo crecer la ciencia contextual en latinoamerica respetando nuestra propia cultura

### Supervision & Consultation SIG Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Aubert**

Sarah Pegrum, Ph.D., Pegrum Therapy & Training

The Supervision and Consultation Special Interest Group (SIG) aims to enhance supervision and consultation practices by fostering a collaborative community for professionals. Our mission is to support individuals in supervisory roles by sharing knowledge, resources, and promoting ongoing education. In this meeting, we will share recent activities. We will also explore what we want to focus on moving forward, discussing ways to further reduce isolation among clinicians, clarify essential competencies, and enhance the effectiveness of supervision and consultation. The meeting is an opportunity to engage with like-minded professionals, share ideas, and contribute to the future

direction of the SIG. Whether you're already a member or new to the group, you are welcome to attend and help shape the next steps for our community.

### Children, Adolescents, and Families SIG

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: Maldiny**

Chris McCurry, Private Practice  
Duncan Gillard, Connect PSHE

Come join your friends and colleagues. Make new connections. We will catch up on one another's work with children, adolescents, and families and discuss what you would like from the CAF SIG in the coming year. All are welcome. We especially encourage members of related SIGS such as Perinatal, Education, Autism, and Neurodiversity to attend so we might learn from, and support, one another.

### Colombian Chapter Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C125**

Alexandra Ávila Alzate, Universidad de Los Andes, Private practice

All are welcome to participate in this meeting to get to know what the chapter has been doing recently and the things we would love to do in the future. Please feel free to participate and give us feedback and ideas!

### Women in ACBS SIG Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C154**

Francesca Brandolin, University of Jyväskylä  
Sanna Turakka, University of Jyväskylä  
Maira Orive, Private practice

The Women in ACBS SIG Meeting aims to bring together all women (and other genders and identities supporting our mission) to connect, meet the board members present on site, and discuss with potential candidates. The meeting is also an opportunity to welcome and integrate those who are interested in becoming more involved in the SIG and its activities, to get to know the scholarship program and those who received it, and to discuss initiatives for further fundraising and projects. Anyone, member or not, is welcome. We are excited to meet in Lyon and connect :)

### Compassion-Focused SIG Meeting and Get-Together

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C225**

Michaela B. Swee, Ph.D., ABPP, McLean Hospital/Harvard Medical School, MA, USA

Come gather as friends and colleagues who are interested in compassion-focused approaches to therapy and integrating compassion as a focus in contextual behavior science. We will hear from each other about the work we are doing or wish to do in this space and discuss how we can grow and enrich the Compassion-Focused SIG in the coming year. All are welcome!

### ACBS Poland - Chapter Meeting

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C254**

Maria Chełkowska-Zacharewicz, Ph.D., ACBS Poland, vice-president  
Bartosz Kleszcz, ACBS Poland, President

Polish ACBS meeting - we encourage all ACBS Poland members to attend, meet and talk ❤️

### La Reunión del Capítulo Argentino de la ACBS

Chapter/SIG Meeting • 8:00 - 8:50

Translation: Not available

**Location: C302**

Lic. Sol Estevez  
Lic Anel Orieta  
Lic. Veronica Piorno

Fortalecer el sentido de comunidad y pertenencia del Capítulo Argentino de la ACBS, generando un espacio de encuentro presencial que potencie los vínculos profesionales entre sus afiliados en el marco de la Conferencia Mundial 2026.

To strengthen the sense of community and belonging of the Argentine Chapter of the ACBS, generating a space for face-to-face meetings that enhances professional ties among its members within the framework of the 2026 World Conference.

Sunday Morning 9:00

### 143. Neurodivergence From the Inside Out: Understanding and Nurturing Autistic and ADHD Neurotypes: Neurodiversity-Affirming Research and Practice SIG Sponsored

Panel • 9:00 - 10:30 AM

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Didactic presentation, Literature review*

Categories: Methods/approaches for individual variation, Social justice / equity / diversity, Autism, ADHD

*Target Audience: Beginner*

**Location: Gounot**

Chair: Sarah Cassidy, Ph.D., Psychological Society of Ireland/Smithsfield Clinic  
Discussant: Jennifer Robertson Kemp, MPsych(Clinical), Adelaide Behaviour Therapy  
Alison Stapleton, B.A. (Hons.) Psych., Ph.D., Prof. Dip. CBT, Prof. Dip. Neurodiversity, C. Psychol. Ps.S.I., University College Dublin  
Amanda McGovern, Psy.D., LMHC, Smithsfield Clinic  
Anabel Amadasu, M.Sc., Trinity College Dublin  
Helen San, M.A., Private Practice

Neurodiversity-affirming approaches share a commitment to rejecting unhelpful pathologization, recognizing individual differences, and understanding function across psychological, sociocultural, and biophysiological levels of analysis. Yet, despite these overlaps with contextual behavioral science, many ACBSers have yet to incorporate neurodiversity-affirming perspectives into their research and practice.

Focusing on autism and ADHD, this panel of neurodivergent professionals explores how to integrate neurodiversity-affirming principles within contextual behavioral approaches. Panellists will discuss conceptualization frameworks, including pathology and neurotype models from lived experience and clinical perspectives; and evaluate the clinical, research, and personal utility of middle-level terms such as emotional regulation, demand avoidance, neuro-states, monotropism, and BIMS (burnout, inertia, meltdown, shutdown).

The panel will also examine current questions in neurodiversity-affirming spaces, including how to balance respect for neurodivergent identity with calls to hold labels "lightly," and how concepts such as double and triple empathy may clarify cross-neurotype, cross-role communication difficulties. Finally, Panellists will consider intersections between neurodiversity and minoritization across age, race, and gender, highlighting the need to address androcentrism, eurocentrism, and internalised ableism with curiosity, openness, and cultural humility.

Educational Objectives:

1. Describe principles of neurodiversity-affirming contextual behavioral approaches.
2. Evaluate the utility of middle-level terms across psychological, sociocultural, and biophysiological levels with reference to their role in neurodiversity-affirming practice.
3. Describe current understandings of cross-neurotype and cross-role communication issues.

**CEs Available (1.50):** [CEs for Psychologists](#)

#### **144. Measuring to Listen : Operationalizing Multi-Level Process Tracking in PBT: Branche Francophone - French-Speaking Chapter Sponsored**

**Panel** • 9:00 - 10:30 AM

Translation: Not available

Components: *Conceptual analysis, Original data*

Categories: Processes of change, Methods/approaches for individual variation, Idiographic Methods, Measurement, Clinical Implementation

*Target Audience: Intermediate, Advanced*

**Location: Barrot**

Chair: Anne-Séverine Fraignac, M.A., French ACBS  
Timothée Basson, Clinical Psychologist, French ACBS  
Margot Lemaire, M.A., French ACBS  
Naïma Boulet marcou, M.A., French ACBS

Process-Based Therapy (PBT) advances idiographic, evolution-informed care—but scalable methods for operationalizing process tracking in routine clinical practice remain underdeveloped. This advanced panel presents three complementary implementation pathways bridging technological, behavioral, and qualitative precision, supported by clinical illustrations and applied data.

First, we illustrate how group-based PBT can retain idiographic rigor using the Extended Evolutionary Meta-Model (EEMM) while integrating ecological momentary assessment (EMA) and high-density longitudinal tracking to model intra-individual process change. Applied feasibility data and visualized case examples will clarify implementation challenges.

Second, we revisit functional analysis “back to basics,” reframing diagnosis as a contextual hypothesis and targeting avoidance—including therapist avoidance—as an active mechanism of relational learning and alliance strengthening.

Third, we demonstrate how the EEMM structures disciplined clinical listening through visual mapping of process transitions and qualitative fidelity markers (linguistic shifts, temporal compression, contextual expansion).

Participants will gain practical strategies to implement multi-level process tracking and transform avoidance into intervention leverage, thereby contributing to a scalable framework that bridges process theory and implementation science in contextual behavioral practice.

Educational Objectives:

1. Describe how process-level tracking differs from symptom-level monitoring within a Process-Based Therapy framework.
2. Apply Functional Analysis to identify avoidance patterns and use them to inform intervention planning.
3. Demonstrate how to use the Extended Evolutionary Meta-Model (EEMM) to structure clinical listening and guide ongoing assessment of process change.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

#### **145. Embracing the Shift: Psychological Flexibility in Action**

**Symposium** • 9:00 - 10:30 AM

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Original data*

Categories: Processes of change, Clinical intervention development or outcomes, Psychometric Validation, ACT, Comprehensive Assessment Of ACT Scale, Benzodiazepine Withdrawal, Benzodiazepines, Eating Disorders, Experiential Avoidance, Mindfulness, A Behavioral

Intervention With Students, Depression, Anxiety, Stress, Psychological Flexibility, Gender And Sexual Minorities

*Target Audience: Beginner, Intermediate*

**Location: Mouterde**

Chair: Daniel W. M. Maitland, Ph.D., University of Missouri  
 Jessica Spencer, M.A., Private practice, Dormium (Sleep Psychology Institute)  
 Maria Koushiou, Ph.D., University of Nicosia  
 Maria S Hus, M.A., Universidad Europea de Madrid  
 Ivan Nyklíček, Ph.D., Tilburg University  
 Alan K Davis, Ph.D., The Ohio State University

Psychological flexibility has emerged as a central mechanism in promoting mental health. This session synthesizes cutting-edge research exploring how flexibility shapes well-being, from French psychometric validation of the CompACT scale to applications in eating disorders, trauma, chronic pain, psychedelic experiences, and mindfulness-based interventions. Highlights include evidence that experiential avoidance amplifies distress during assessment, mindful walking and MBSR cultivate adaptive responses, and flexibility mediates therapeutic gains in marginalized communities. Collectively, these findings illustrate that psychological flexibility is not merely a therapeutic target but a dynamic process underlying meaningful change. Attendees will gain insights into measurement tools, process-informed interventions, and practical strategies for fostering flexibility across clinical, educational, and research settings. By embracing the shift from rigid patterns to adaptive action, we can support individuals in enhancing well-being and thriving across life domains.

- *French Psychometric Validation of the Comprehensive Assessment of Acceptance and Commitment Therapy Processes Scale*

Jessica Spencer, M.A., Unidistance Suisse  
 Marie-Paule Gustin, MCU, Laboratory - Fondation Mérieux, International Center for infectology Research (CIRI)  
 Royce Anders, Ph.D., Univ Paul Valéry Montpellier 3  
 Mélinée Chapoutot, M.A., Lyon Neuroscience Research Center  
 Wendy Leslie, M.A., Xceltranslate  
 Benjamin Schoendorff, Ph.D., Institute of Contextual Psychology  
 Nima Golijani-Moghaddam, Ph. D., University of Lincoln  
 David L. Dawson, Professor, University of Lincoln  
 Laure Peter-Derex, Ph.D., Lyon Neuroscience Research Center; Lyon 1 University; Sleep Medicine and Respiratory Disease  
 Benjamin Putois, Ph.D., UniDistance Suisse; Lyon Neuroscience Research Center

While Acceptance and Commitment Therapy (ACT) effectively improves psychological flexibility, French practitioners have lacked a validated instrument to measure its core processes comprehensively. Previous tools, such as the AAQ-II, omit key variables, whereas the CompACT scale captures the full model through three dyadic processes: Openness to Experience, Behavioral Awareness, and Valued Action. Method: This study translated and validated the French CompACT with 423 participants, comparing a general population (n=154) with benzodiazepine users (n=269), the latter illustrating high experiential avoidance. Results: The French CompACT demonstrated strong psychometric properties, internal reliability, and construct validity. Conclusion: Since its validation, the scale has been integrated into diverse clinical protocols, including ACT self-help guides for menopause and treatments for harm OCD. By providing a reliable measure of psychological flexibility, the CompACT is a vital asset for French-speaking clinicians and researchers. Its broader adoption will enhance the assessment and treatment of various psychopathologies within the contextual behavioral science framework.

- *Emotion Regulation, Psychological Flexibility and Self-Compassion in Eating Disorders: A Latent Structural Analysis*

Maria Koushiou, University of Nicosia  
 Elena Constantinou, European University of Cyprus  
 Nuno Ferreira, University of Nicosia  
 Marios Adonis, University of Nicosia

Difficulties in emotion regulation, psychological inflexibility, and low self-compassion are established correlates of eating disorder risk (EDR) in young adults, often conceptualized as distinct vulnerabilities (Zhou et al., 2025; Rodrigues et al., 2024; Morton et al., 2020). Their conceptual and empirical overlap raises questions about discriminant validity and unique contributions to EDR. This study examined (a) the

latent structure of the subscales from the Difficulties in Emotion Regulation Scale-18 (DERS-18), Comprehensive Assessment of Acceptance and Commitment Therapy Scale (CompACT), Compassionate Engagement and Action Scale, and Fears of Compassion Scale (FCS), and (b) its predictive role in EDR (assessed with the Eating Attitudes Test-26) among university students (N = 591), using structural equation modeling (SEM). Confirmatory factor analyses supported subscale validity and reliability with minor modifications. The SEM model testing a three-factor latent structure (emotion regulation, psychological flexibility, compassion) indicated poor fit. A revised two-factor model fit better, distinguishing avoidance and approach processes; only avoidance (DERS, FCS, some CompACT subscales) predicted EDR. Findings highlight experiential avoidance as central to EDR and support interventions enhancing psychological flexibility.

- *Individual Differences in Research Reactivity: Experiential Avoidance and Distress During Assessment*

Daniel W. M. Maitland, Ph.D., University of Missouri - Kansas City  
Elizabeth Neilson, Ph.D., University of Missouri - Kansas City

"Institutional review boards and researchers routinely assume that completing questionnaires and laboratory tasks poses minimal risk. However, individual differences may meaningfully shape participants' emotional reactions to assessment. The present study examined experiential avoidance as a moderator of distress following completion of commonly used research procedures, including the Cyberball social exclusion task and self-report measures assessing sexual experiences, intimate partner conflict, sexual strategies, depression, personality, fear of intimacy, ADHD symptoms, substance use, and demographics. Participants completed these tasks and reported state distress. We tested whether higher experiential avoidance amplified distress responses to socially and emotionally evocative content participants had experience with. We hypothesized that individuals higher in experiential avoidance would report greater post-task distress, particularly following exclusion (Cyberball) and sensitive questionnaires (e.g., sexual experiences, conflict tactics). Findings will clarify whether assessment procedures function as affectively activating events primarily for psychologically inflexible individuals. Results have implications for ethical risk evaluation, IRB application language, informed consent language, and the design of trauma sensitive research protocols, while contributing to broader models of avoidance and emotional reactivity."

- *Step by Step: The Effect of Mindful Walking on University Students' Mental Health*

Maria S. Hus, Universidad de Europea  
Lidia Budziszewska, Universidad de Europea  
Alejandro Garcia-Pardina, Universidad de Europea  
Alberto Bellido-Esteban, Universidad de Europea

Worsening mental health among university students underscores the need for scalable, brief, and low-cost behavioral interventions that fit academic schedules. We conducted a randomized controlled trial to test whether guided mindful walking improves depression, anxiety, stress and psychological flexibility beyond walking alone. A total of 66 students were randomly assigned to a mindful-walk condition (n=34; 30-minute walks with a mindfulness audio) or a walk-as-usual control (n=32). Participants walked 30 minutes daily, five days per week, for 14 days. DASS-21 depression, anxiety, and stress, and AAQ-II were assessed at pretest, midtest (day 7), posttest (day 14), follow-up 1 (3 months), and follow-up 2 (6 months). Primary per-protocol analyses used mixed repeated-measures ANOVAs. Preliminary results through posttest showed significant Time effects with medium-to-large partial  $\omega^2$  (.056-.111): symptoms decreased and flexibility increased, with non-significant Group x Time interactions. Follow-up analyses tested maintenance and adherence effects.

- *Psychological flexibility and mindfulness skills as mediators of long-term effects of MBSR*

Ivan Nyklíček, Ph.D., Tilburg University  
Mirela Habibović, Ph.D., Tilburg University

Acceptance based interventions have been found to be effective in ameliorating emotional well-being. However, long-term follow-up data are often lacking and evidence for putative mechanisms is inconsistent. The aim was to examine psychological flexibility and several mindfulness skills as potential mechanisms of effects of Mindfulness Based Stress Reduction (MBSR) on emotional well-being over a 12-month period.

Participants of a standard MBSR intervention (77% female, age 20-74 years) completed the AAQ, FFMQ, and POMS at pre-intervention (N=3139), post-intervention and 12-month follow-up (N=378). MEMORE macro was used to test mediation effects across the 12-month period. Significant decreases in feelings of anxiety, depression and irritation and increase in vigour (all  $p < .001$ ) were sustained at 12-month follow-up. The 12-month effects were (partially) mediated by increases in various mindfulness skills from pre-to-post intervention, but not psychological flexibility.

Although psychological flexibility substantially improved across the MBSR period, it did not mediate the beneficial effects at 12 months, in contrast to several mindfulness skills. Different mechanisms seem to be relevant for different well-being outcomes.

- *Improvement in psychological flexibility partially explains why psychedelics impact mental health among LGBT people*

Alan K Davis, Ph.D., Center for Psychedelic Drug Research and Education, The Ohio State University

Psychedelics are associated with improved depression and anxiety among cisgender and heterosexual populations, with changes in psychological flexibility (PF) associated with such improvements. However, this has not yet been explored specifically among gender/sexual minorities (GSM). In a survey of naturalistic psychedelic use, we explored whether psychedelic use was associated with improvements in depression and anxiety, and whether changes in PF mediated the relationship between psychedelic effects and improvement in depression and anxiety among GSM people. Results from 346 participants showed significant reductions in depression ( $p < .001$ ;  $d = -0.76$ ) and anxiety ( $p < .001$ ;  $d = -0.86$ ) and increases in PF ( $p < .001$ ;  $d = 1.00$ ) from before-to-after psychedelic experiences. Increases in PF partially or fully mediated the relationship between acute psychedelic effects (mystical-type, insight, and challenging experiences) and decreases in depression and anxiety. These findings highlight PF as a mechanism of therapeutic change and underscore the need for clinical trials examining the safety and efficacy of psychedelic-assisted therapy for depression and anxiety among GSM populations.

Educational Objectives:

1. Explain how emotion regulation, psychological flexibility, and self-compassion, particularly avoidance processes, relate to eating disorder risk.
2. Identify how individual differences in psychological inflexibility can impact IRB risk determinations, informed consent language, and the development of trauma-sensitive research protocols.
3. Explain why psychedelic experiences are associated with improvements in depression, anxiety, and increases in psychological flexibility among gender and sexual minorities.

**CEs Available (1.50):** [CEs for Psychologists](#)

**146. Navigating the Minefields of Separated Family Work with Flexibility and Compassion**  
**Workshop** • 9:00 - 10:30 AM

Translation: AI online with your phone - audio or text

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

Categories: Processes of change, Health / behavioral medicine, Families, Children, Conflict, Divorce, Family Court

Target Audience: *Intermediate*

**Location: Weil**

Tiffany Rochester, B Psych, MAppPsych(Clin), Co-Parenting Companion & The Same Mountain

Providing 1:1 therapy to parents or children from separated families often involves intense contextual pressures, including conflicting parental consent, "loyalty bind" confidentiality traps, differing parental expectations, and constant threats of legal subpoenas. These pressures can trigger internal reactivity with the clinician, narrowing therapist behavioural repertoires toward clinician paralysis, including avoidance and rule-governed rigidity. This often results in responses that prioritise short-term litigation avoidance over long-term prosocial adaptation for the family.

This skills-focused workshop provides the opportunity to explore, and resolve these dilemmas through an applied functional-contextual framework. We will analyze behavioral functions, antecedent control, and consequence contingencies as we focus on cultivating a values-based professional stance grounded in compassionate care.

Through experiential role-plays and interactive functional analysis, participants will train skills to:  
 Tact the function of parental behaviours to prevent clinician triangulation.

Navigate dual-parent consent and feedback loops without compromising the child's therapeutic context.

Manage coercive behaviours using compassionate, perspective-taking de-escalation protocols that reduce aversive control.

Promote psychological flexibility in difficult-to-engage Parents

Use values-clarification exercises to focus parents on effective behavioral change strategies.

Educational Objectives:

1. Analyze the functional impact of parental conflict on the therapeutic process to prevent clinician triangulation and aversive control.
2. Demonstrate ACT-based communication strategies for addressing parent requests that threaten the therapeutic integrity and the child's safe, confidential space.
3. Use values-alignment and perspective taking protocols to compassionately shape high-conflict individuals to prioritize functional outcomes over rigid rule-following.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

### **147. Zooming In: Making Training and Supervision Sessions More Clinically Relevant Using Video Case Vignettes**

**Workshop** • 9:00 - 10:30 AM

Translation: AI online with your phone - audio or text

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

Categories: Supervision and training, Academics or education, Supervision, ACT, FAP, CFT, Training, Education

*Target Audience: Advanced*

**Location: Aristotle**

Francis Lemay, Ph.D., Université Laval

Ray Owen, DClInPsychol, DRO Psychology Services

Stavroula Sanida, M.Sc., Private Practice & GR CY ACBS Chapter

Efthymia Orkopoulou, M.Sc., Greece-Cyprus ACBS Chapter

Trainees and supervisees tend to appreciate video case-based material to develop their understanding and skills alongside more theoretical and conceptual guidance. Rather than relying on videos developed by others, the presence of easy-to-utilize, high quality recording equipment on most computers allows trainers and supervisors to easily create relevant and impactful material. This helps students and trainees reflect on and prepare to intervene in complex, and sometimes harder to predict, clinical situations. Neither expensive video production companies nor professional actors are needed for this. Situations covered could include a suicidal crisis, a client expressing anger towards their therapist, discussions about clients' values that would be opposed to their therapists', expressions of clear contempt in-session, or a client openly flirting with their care provider. This workshop will demonstrate how series of short pre-recorded role-played clinical vignettes can easily be created and used, both in a classroom (in-person or virtual) or in the context of supervision (virtual, physical, group, or individual format), to help hone ACT or FAP skills with beginner, as well as seasoned, clinicians.

Educational Objectives:

1. Describe how trainer-created video case vignettes can allow training and supervision to be more precisely targeted and effective.
2. Assess how efficiently students or supervisees have integrated previously studied clinical processes through the use of video-based vignettes.
3. Compile a list of clinical situations relevant to your training/supervision goals, and an action plan to create video vignettes based on them.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

### **148. Practicing ACT Through Clowning**

**Workshop** • 9:00 - 10:30 AM

Presenter(s) speaking in French

Translation: AI online with your phone - audio or text

Components: *Experiential exercises, Role play*

Categories: Professional development, Processes of change, Psychological flexibility, Reframing

*Target Audience: Beginner*

**Location: Perroux**

Jean-christophe Seznec, Ph.D., Cabinet Médical  
William Herremy, Educator, Oui théâtre

We admire acrobats, but we love clowns. Yet the clown is born from falling and from ridicule, and it is precisely this that we love. The clown practices ACT and mindfulness without appearing to do so. It offers us a path to strengthen our freedom to be, and to play with existence so as not to suffer from it.

Together, we will explore the ACT matrix through the lens of the clown, playing with context, defusing from our beliefs and thoughts, and engaging in play and self-performing antics.

By flirting with the present moment and embracing our imperfections, we will explore—through the body—another relationship to our emotions, sensations, and vulnerability, in order to play with life. Movement offers the chance to laugh, to live, and to exist.

This experiential workshop is intended for curious individuals, or those wishing to deepen their understanding of emotions, as well as those interested in clowning, theatre practices, or art therapy.

**This session is not eligible for any type of CEs.**

### **149. Lessons from Contemplative Traditions for ACT: How to Reduce the Use of Mindfulness as Experiential Escape**

**Workshop** • 9:00 - 10:30 AM

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Theory and philosophical foundations, Mindfulness

Target Audience: *Beginner, Intermediate*

**Location: Aubert**

Matthew D Skinta, Ph.D., ABPP, Roosevelt University

Mindfulness, both within and outside of ACT, is a popular therapeutic tool to increase contact with the present moment, defuse from difficult thoughts, and experience the self in new ways. As functional contextualists, however, we know that no behavior has the same automatic function across settings, and the inner context of current feelings, hopes, and patterns of mind may also change the function of a behavior. Contemplative traditions, like Buddhism, warn that meditative states can lead to the same sorts of fusion, pursuit of pleasure, or avoidance of pain that already contribute to our suffering. This workshop explores how mindfulness might be practiced in the service of experiential avoidance. The root traditions that mindfulness is drawn from, such as Theravada and Mahayana Buddhism, possess practices intended to undermine meditation as avoidance. Such practices, and how they might be introduced through an ACT frame, will be reviewed and practiced.

Educational Objectives:

1. Identify the differential functions of mindfulness practices, and how changes in context can shift mindfulness from present-moment contact toward experiential avoidance within an ACT framework.
2. List ways meditative practice can reinforce fusion, pleasure-seeking, or pain avoidance, drawing on warnings and insights from Theravada and Mahayana Buddhist traditions.
3. Apply contemplative techniques designed to undermine avoidance in ACT-consistent interventions that support psychological flexibility.

**CEs Available (1.50):** CEs for Psychologists

### **150. Politics and Perspective Taking: Can We Use Our Tools to Bridge Controversial Positions? Let's be bold and talk!**

**Workshop** • 9:00 - 10:30 AM

Translation: Not available

Components: *Experiential exercises, Role play*

Categories: Social justice / equity / diversity, Processes of change, Prosocial Cultural Development

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Maldiney**

Beate M. E. Ebert, Clinical Psychologist, Private Practice

Psychotherapeutic processes don't have to stay inside the therapy room—they already help in many places to build more vibrant and connected groups and societies.

We currently observe societies disrupted by separation, withdrawal, othering, hostility, and even hatred. When dialogue collapses, people turn away from one another instead of toward shared humanity.

Can we do it differently in ACBS?!

We come from a wide range of cultural, historical, and political contexts. Each of us carries narratives shaped by our lived experience.

Are we willing to share our narratives and listen to others, without engaging in fighting, defending, or withdrawing?

Can we stay present with discomfort and disagreement?

Is it possible to identify shared values that transcend seemingly incompatible positions?

Could painful diversity spark creativity?

Participants will apply ACT-consistent processes—perspective-taking, values clarification, and other psychological flexibility skills—to political and societal difference. This live experiment investigates how principles of ACT can strengthen dialogue, connection, and compassion—showing that the same processes that support individual wellbeing can also help create a more humane, resilient, and related world.

Educational Objectives:

1. Distinguish between content and process in political conversations, using ACT-consistent perspectives to relate more flexibly to challenging, controversial positions.
2. Identify how lived experience and cultural narratives contribute to rigidity (e.g., fusion, experiential avoidance, othering, greed), polarization, and breakdown of dialogue.
3. Identify shared and overarching values that may exist across seemingly incompatible political or cultural perspectives and foster understanding and connection.

**CEs Available (1.50):** [CEs for Psychologists](#)

**151. From Rage to Reform: Transforming Anger into Concerted and Meaningful Valued Action**

**Workshop** • 9:00 - 10:30 AM

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Behavior analysis, Anger, Emotion Regulation, Committed Action, Values, Rigid/Stuck Clients

Target Audience: *Beginner, Intermediate*

**Location: C125**

Jared M Broussard, M.A., Thumos.Life Mindfulness & Psychotherapy

In many therapeutic models, anger is viewed as a symptom to be reduced. In a contextual behavioral framework, anger can instead be data to signal that a value has been violated. This workshop challenges the pathologization of anger, proposing an approach instead that validates the emotion whilst targeting the behavioral response. We'll differentiate between "reactive aggression" (fusion/avoidance) and "constructive disruption" (values-based action). Participants will learn to utilize the energy of anger as a catalyst for Committed Action, helping clients pivot from destructive outbursts to assertive movements toward justice and personal integrity. By analyzing the function of rage rather than merely its form, clinicians can help clients harness their most volatile emotions as powerful fuel for meaningful change. This is an essential skill for working with client populations where anger is the primary presenting affect.

Educational Objectives:

1. Assess the function of a client's anger to determine if it is serving as avoidance or a values signal.

2. Contrast "reactive aggression" with "constructive disruption" within a Contextual Behavioral framework.
3. Plan interventions that redirect "rage" toward justice-oriented or values-congruent behaviors.

**CEs Available (1.50):** CEs for Psychologists

**152. Beyond Protocols, Toward Processes: PBT in Action Across Settings and Populations: Italy Chapter Sponsored**

**Symposium** • 9:00 - 10:30 AM

Translation: Not available

Components: *Case presentation, Original data*

Categories: Processes of change, Clinical intervention development or outcomes, PBT, Brief Interventions, Flexibility

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C154**

Chair: Anna Bianca Prevedini, Ph.D., Centro Interazioni Umane  
 Discussant: Annalisa Oppo, Ph.D., Sigmund Freud University  
 Giovambattista Presti, Ph.D., University of Enna Kore  
 Giuseppe Deledda, Psy.D., ACT-Italia  
 Nicola Lo Savio, Psy.D., Istituto Tolman, ACT-Italia, CBT-Italia  
 Laura Casetta, Psy.D., Scuola Di Psicoterapia Musicart  
 Maria Ierardi, Psy.D., Okinami Clinical Center  
 Teresa Cerra, Psy.D., Cenetro Clinico Presente Io, qui ed ora  
 Santina Miracolini, Psy.D., CBT-Italia

Process-Based Therapy (PBT) has repeatedly argued that effective interventions depend less on diagnosing symptoms and applying standardized protocols, and more on identifying and shifting the processes that currently organize a person's suffering and life direction. This symposium brings that claim into practice. Across five presentations, we collectively examine how a PBT-informed intervention selects and targets different change processes while maintaining a coherent functional perspective on the situation in front of us.

Rather than treating symptom reduction as the organizing principle, we show how different interventions can flexibly prioritize defusion, self-as-context, values/committed action, or other core processes depending on contextual constraints, needs, and maintaining loops.

The symposium invites participants to think together about how to operationalize "beyond protocols" work in real-world constraints, using PBT not as an abstract ideal but as a practical decision system for choosing what to target, when, and why.

- *A PBT Framework for a Case of Skin Picking*  
 Nicola Lo Savio, Istituto Tolman, Palermo, ACT-Italia, CBT-Italia

Process-Based Therapy (PBT) provides a framework for generating idiographic models of patient functioning. A PBT-informed intervention invites clinicians to perform functional analysis of processes underlying psychological suffering and map clinically relevant processes through a network. The network guides treatment planning, facilitating the selection of evidence-based strategies while accounting for the person's specific needs and values. This single-case design presents the application of a PBT network model in a case of a woman with skin picking disorder to highlight self-maintaining loops, superordinate and nested processes, and to guide intervention. The model was used to select the sequence of therapeutic strategies implemented, inspired by acceptance-enhanced behavior therapy. Pre-post assessment using process-specific and symptom-focused scales was combined with repeated measurements of excoriation and well-being. Data were analyzed within an AB quasi-experimental design using the web-based BEHAVE application.

Results show significant improvements in excoriation, well-being, and tested processes. This work demonstrates how adopting a PBT framework alongside other psychotherapeutic models supports clinicians in identifying target processes and guiding interventions through a dynamic, contextual view of patient experience.

- *ACT-VR for General Practitioners: A Single-Session Experiential Intervention to Enhance Psychological Flexibility in Primary Care*  
 Concetta Messina, Kore University of Enna

Santina Miracolini, Kore University of Enna  
 Marta Bassi, Università degli Studi di Milano  
 Lara Colombo, Università degli Studi di Torino  
 Daniela Villani, Università Cattolica del Sacro Cuore  
 Caterina Viganò, Università degli Studi di Milano  
 Giovanbattista Presti, Kore University of Enna

This exploratory study applies a process-based (PBT-aligned) lens to clinician wellbeing by targeting transdiagnostic mechanisms—especially repetitive negative thinking and psychological inflexibility—in general practitioners (GPs) at risk for chronic stress and burnout. A brief Acceptance and Commitment Therapy intervention delivered via immersive Virtual Reality (ACT-VR) was designed to activate key change processes in a single experiential session: cognitive defusion, perspective-taking/self-as-context, acceptance, values clarification, and committed action.

Four GPs (mean age  $\approx$  60) completed a  $\sim$ 2-hour, single-session protocol using a pre-post A-B design. Outcomes included distress (GHQ-12), psychological flexibility (MPFI-24), subjective distress and thought believability (VAS), self-processes (I-SEQ), and values-based action (VLQ). Baseline levels varied, but post-intervention trends were generally positive: most participants showed reduced inflexibility, lower distress and thought believability, and improved self-as-context in three of four cases, alongside reported increases in strength, distancing, and agency. Despite limitations (small sample, no control, no follow-up), results support further testing of VR-enhanced, process-focused brief interventions for scalable prevention and training in healthcare professionals.

- *Promoting Prosocial Identity in Forensic Populations: A Process-Oriented Model for Identity Change and Risk Reduction*

Teresa Cerra, AsCoC, Accademia di Scienze Cognitive Comportamentali di Calabria  
 Maria Ierardi, AsCoC, Accademia di Scienze Cognitive Comportamentali di Calabria  
 Katia Manduchi, Private Practice  
 Giovanbattista Presti, Kore University of Enna

Correctional settings are complex environments in which psychological interventions must balance security, risk management, and rehabilitation. Individuals under custodial or community sanctions often display rigid identity repertoires, experiential avoidance, and diminished self-efficacy, processes that limit psychological flexibility and hinder the development of a future-oriented prosocial identity. This study examined an Acceptance and Commitment Therapy (ACT) intervention integrating process-consistent components from Functional Analytic Psychotherapy and Compassion Focused Therapy in a sample of 40 individuals under different penal measures. Within a process-based framework, the intervention targeted committed action, values clarification, defusion, acceptance, and self-as-context. Findings indicate that this approach may promote shifts from externally driven compliance to internally regulated responsibility grounded in values and psychological flexibility. Participants showed patterns consistent with increased agency, reduced defensive responding, and greater coherence between behavior and long-term goals. Conceptually, recidivism is reframed as a restriction in values-guided behavioral variability. Results support the feasibility and clinical relevance of ACT-informed interventions for fostering adaptive identity change and potentially reducing reoffending risk in forensic populations.

- *The Effect of Cognitive Fusion on Mental Health and Occupational Burnout Among Health Care Workers During the SARS CoV-2 Outbreak*

Giuseppe Deledda, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Sara Poli, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Giovanna Fantoni, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia  
 Keim Roland, Psy.D., General Hospital Bressanone, Azienda Sanitaria dell'Alto Adige  
 Alida Di Gangi, Psy.D., General Hospital Bressanone, Azienda Sanitaria dell'Alto Adige  
 Eleonora Geccherle, Psy.D., IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella; ACT-Italia

Patrizia Dorangricchia, Istituto Europeo di Oncologia (IEO)  
 Anna Scaglione, Psy.D., CFU- Italia ODV (Fybromyalgia Association)  
 Jennifer Faietti, Psy.D., Salus Hospital GVM Care & Research, Reggio Emilia 42123  
 Andrea Angheben, IRCCS Sacro Cuore Don Calabria Hospital, Negrar di Valpolicella

During the SARS-CoV-2 pandemic, healthcare workers (HCWs) were exposed to high levels of psychological distress and increased risk of burnout. Within the Acceptance and Commitment Therapy (ACT) framework, cognitive fusion is considered a key process associated with emotional suffering. This study examined the role of cognitive fusion in the relationship between psychological distress and occupational burnout.

A multicenter observational study was conducted in six Italian hospitals during the lockdown (April 2020). A total of 1,405 HCWs completed the Professional Quality of Life Scale (ProQOL), the Depression Anxiety Stress Scales (DASS-21), the Impact of Event Scale-Revised (IES-R), and the Cognitive Fusion

Questionnaire (CFQ-7). A moderated mediation analysis (PROCESS Model 14) tested the indirect effects of depression, anxiety, and stress on burnout through cognitive fusion, with years of work experience as a moderator.

Cognitive fusion significantly mediated the association between psychological distress and burnout. The indirect effect was stronger among professionals with greater work experience. Despite moderate distress levels, compassion satisfaction was high.

These findings suggest that cognitive fusion represents a risk factor for burnout, particularly among more experienced professionals. Interventions aimed at enhancing psychological flexibility may help prevent adverse mental health outcomes in HCWs.

- *From Threat to Perspective: Evoking Awe through art and music to Support Self-as-Context in End-of-Life Care*

Laura Casetta, MusicArt School of Psychotherapy, Ass. Centro di Psicologia e Psicoterapia Funzionale, ACT-Italia

Luca Rizzi, MusicArt School of Psychotherapy, Ass. Centro di Psicologia e Psicoterapia Funzionale, ACT-Italia, FIAP

Michele Bargigia, Ass. Centro di Psicologia e Psicoterapia Funzionale, ACT-Italia, Sony Music

In end-of-life care, patients and caregivers may be dominated by alarm and fear. When this happens, purely verbal or cognitively driven interventions may have limited impact: high arousal narrows attention, constrains behavioral repertoires, and reduces the capacity to generate new associations. In these moments, the primary task is to down-regulate threat and reopen perspective, creating the conditions for new learning and flexible responding. From this standpoint, we propose affect as the entry point: by first shifting the affective state, clinicians can create access to deeper work on acceptance, defusion, and the self (including loosening the conceptualized self and strengthening self-as-context). We therefore chose to intentionally evoke awe through music and art as the starting point of our intervention. In the literature, awe is commonly described as an emotion elicited by perceived vastness that exceeds current frames of reference and triggers a need for cognitive accommodation—a reorganization of meaning structures to integrate what is encountered. Awe is also linked to a "small self" and a broader perspective, which can reduce self-focused preoccupation and support reorientation toward what matters. Clinically, introducing beauty through music and artistic expression provided a memorable experiential context within a complex life moment, facilitating perspective expansion and indirectly loosening fusion, softening avoidance, and reopening values-based direction. These observations highlight the value of a theoretical framework such as PBT, which can help clinicians identify the most accessible "entry point" to psychological flexibility—selecting targets that the patient is most ready to engage with and that are most useful in that specific context.

**Educational Objectives:**

1. Describe how a Process-Based Therapy (PBT) case formulation translates into moment-to-moment clinical decision-making that goes beyond symptom-led protocols across diverse settings (forensic, primary care, compulsive disorders, healthcare burnout, end-
2. Select and justify an appropriate process "entry point" (e.g., acceptance, defusion, self-as-context, values/committed action, cognitive fusion, affect) based on contextual constraints, maintaining loops, and patient readiness in interventions.
3. Apply a PBT-informed process map to design interventions that targets a prioritized mechanism of change and specifies expected downstream effects on psychological flexibility and values-guided action.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**153. Making ACT Work: Co-Production, Mechanisms, and Implementation in Educational, Clinical, and Occupational Settings: Women in ACBS SIG Sponsored**

**Symposium** • 9:00 - 10:30 AM

Translation: Not available

Components: *Original data*

Categories: Clinical intervention development or outcomes, Organizational / Industrial psychology, Occupational and Educational Settings

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C225**

Chair: Arianna Prudenzi, Ph.D., The University of Sheffield

Discussant: Maria Karekla, Ph.D., University of Cyprus

Tetta Hämäläinen, Ph.D., University of Jyväskylä  
 Francesca Brandolin, Ph.D., University of Jyväskylä  
 Natasha Hughes, MRes, Young Epilepsy

Acceptance and Commitment Training (ACT) programmes are well-suited to settings where interpersonal dynamics shape well-being and performance. This symposium brings together four ACT-based programmes across educational, clinical, and workplace contexts in the UK and Finland, focusing on co-production, mechanisms of change, and implementation. Presentation 1 will introduce the ACT-based Youth Compass intervention for adolescents (N = 157) and present findings on factors associated with engagement and intervention experiences. Presentation 2 will report on a co-produced online ACT feasibility study for young people with epilepsy (N = 60), demonstrating acceptability and perceived efficacy, alongside improvements in ACT skills and social functioning. Presentation 3 will outline qualitative work alongside pilot RCT findings (N = 80) from an ACT protocol for international students and university staff. Presentation 4 will present evidence from two feasibility trials (MENTOR 1.0 and MENTOR 2.0; total N = 63) and NIHR-funded MENTOR 3.0 follow-on work evaluating a joint employee–manager intervention to support distressed employees in remaining at work and strengthening psychological flexibility, engagement, and interpersonal relationships. Feasibility and implementation lessons will be discussed.

- *Usage Activity, Perceived Usefulness, and Satisfaction in a Web-Based Acceptance and Commitment Therapy Program among Finnish Ninth-Grade Adolescents*

Tetta Hämäläinen, Ph.D., University of Jyväskylä  
 Kirsikka Kaipainen, Ph.D., Tampere University  
 Päivi Lappalainen, Ph.D., University of Jyväskylä  
 Anne Puolakanaho, Ph.D., University of Jyväskylä  
 Katariina Keinonen, Ph.D., University of Jyväskylä  
 Raimo Lappalainen, Ph.D., University of Jyväskylä  
 Noona Kiuru, Ph.D., University of Jyväskylä

This paper examined the usage activity, perceived usefulness, and program satisfaction among 157 Finnish ninth-grade adolescents (M age = 15.26 years; girls 50.3%, boys 49.7%) who participated in an ACT-based five-week internet intervention called the Youth Compass. First, we examined individual and environmental antecedents of usage activity and intervention experiences. We found that girls, and adolescents with high self-regulation, were more active program users and reported more positive experiences. Second, we identified four subgroups of adolescents, which were distinguished by differences in usage activity, perceived usefulness, and intervention satisfaction. Subgroup membership was associated with factors related to both the individual and their growth environment, namely gender, academic achievement, experienced closeness to mother and teacher, and experienced conflict with teacher. In general, most of the adolescents used the program at least moderately and perceived it to be moderately or highly useful and satisfactory. Implications for the further development of ACT-based internet interventions for adolescents will be discussed.

Reference: Hämäläinen, T., Kaipainen, K., Lappalainen, P., Puolakanaho, A., Keinonen, K., Lappalainen, R., & Kiuru, N. (2021). Usage activity, perceived usefulness, and satisfaction in a web-based acceptance and commitment therapy program among Finnish ninth-grade adolescents. *Internet Interventions*, 25, 100421. <https://doi.org/10.1016/j.invent.2021.100421>

- *Group-Acceptance and Commitment Therapy for Young People with Epilepsy: A Feasibility and Acceptability Study*

Natasha Hughes, University Hospitals Bristol and Weston NHS Trust  
 Emily Rhidian, Ph.D., University Hospitals Bristol and Weston NHS Trust  
 Lara Carr, Ph.D., Young Voice  
 Alexander Marsh, Ph.D., University Hospitals Bristol and Weston NHS Trust  
 Ingram Wright, Ph.D., University Hospitals Bristol and Weston NHS Trust

Epilepsy poses significant psychological and social challenges for young people, including managing uncertainty, stigma, and emotional distress. Despite these impacts, tailored psychological interventions are limited. This project investigates the feasibility and acceptability of online Acceptance and Commitment Therapy (ACT) groups for young people with epilepsy (N = 60). The groups were co-produced to ensure relevance to lived experience and use an adapted ACT protocol that aims to enhance psychological flexibility and well-being through a combination of evidence-based skills and developmentally appropriate psychoeducation. Additional content developed with lived-experience experts includes self-care in the context of epilepsy and peer support. The groups aim to empower participants with practical skills to manage uncertainty and distress, and to provide the knowledge and resources they need to thrive. The intervention was highly acceptable and perceived as beneficial, with preliminary

quantitative findings suggesting improvements in core ACT skills acquisition and social functioning among young people with epilepsy. This presentation will cover the co-production, development, pilot, and evaluation of the intervention.

Reference to preregistration: Hughes, N., Carr, L., Rhidian, E., Marsh, A., Wright, I. ACT Group Intervention for Adolescents with Epilepsy: A Feasibility and Acceptability Study. <https://osf.io/yve3d>

- *[InterACT] - International University Students and University Staff in Central Finland: Exploring Experiences, Adaptation Strategies, and Perception of Integration through an ACT-based Intervention.*

Francesca Brandolin, Ph.D., University of Jyväskylä  
Päivi Lappalainen, Ph.D., University of Jyväskylä  
Raimo Lappalainen, Ph.D., University of Jyväskylä

This study presents a qualitative follow-up to a low-barrier ACT group workshop aimed at reducing distress among international students (n = 101). Previous research highlights the need for multiculturally adapted interventions in academic contexts. This latest adaptation was informed by focus group discussions and online questionnaires. Thematic analysis highlighted challenges and opportunities, experiences of racism/discrimination, and culturally shaped values - factors that influence adaptation and well-being in multicultural academic environments. These insights informed a multiculturally adapted ACT-based skills training for university students and staff, which will be evaluated in a feasibility RCT of a group intervention (target n = 80). Preliminary results from the first phase of the trial will be presented. The research has been well received and has generated interest among colleagues and several universities in Finland and abroad.

Reference

Brandolin, F., Lappalainen, P., Gorinelli, S., Muotka, J., & Lappalainen, R. (2023). Examining the effectiveness and acceptability of a group-based ACT intervention delivered by videoconference to international university students during the COVID-19 pandemic. *Counselling Psychology Quarterly*, 37(4), 517–541. <https://doi.org/10.1080/09515070.2023.2254726>

- *MENTOR: A Co-Produced Employee-Manager-Liaison Intervention to Support Sustainable Employment for Employees Experiencing Distress at Work*

Arianna Prudenzi, Ph.D., The University of Sheffield  
Olivia Hastings, University of Birmingham  
Libby Grey, University of Birmingham  
Naomi Jonhston, Mind charity  
Jonathan Stuart, Mind charity  
Steven Marwaha, University of Birmingham

Employees with mental health conditions often struggle to sustain employment, yet workplace interventions typically target individuals rather than the relational and organisational context. We developed MENTOR (Prudenzi et al., 2023), a co-produced joint employee-manager intervention delivered by an Employment Liaison Worker to improve engagement, workplace relationships, and psychological flexibility. In a feasibility randomised controlled trial (Prudenzi et al., 2024), 40 employee-manager pairs were randomised. The intervention was largely feasible and acceptable. Initial findings suggest potential benefits for employee productivity and mental health, and for managers' mental health knowledge, although logistical barriers (e.g., COVID-19) affected implementation. Building on these findings, we adapted MENTOR 2.0 into a streamlined format (four individual sessions plus one joint session). In a single-arm feasibility study (Prudenzi et al., in press; 23 employees, 19 managers), delivery and acceptability were high (94% of sessions delivered; mean duration 65 days; 87% retention), with preliminary signals of reduced distress and improved productivity, psychological flexibility, engagement, and interpersonal functioning. Lessons learned from these feasibility studies and the ongoing MENTOR 3.0 study will be discussed. References: Prudenzi, A., Hastings, O., Grey, L., Johnston N., Stuart, J., Marwaha, S. (in press). Feasibility and acceptability of a joint employee-manager workplace intervention to support mental health and job retention (MENTOR 1.0) and MENTOR 2.0). *BMC Public Health*. Prudenzi, A., Gill, K., MacArthur, M., Hastings, O., Moukhtarian, T., Jadhakhan, F., ... & Marwaha, S. (2024). Supporting employers and their employees with mental hEalth conditions to remain eNged and productIve at wORK (MENTOR): A feasibility randomised controlled trial. *Journal of Contextual Behavioral Science*, 31, 100720. Prudenzi, A., Jadhakhan, F., Gill, K., MacArthur, M., Patel, K., Moukhtarian, T., ... & Marwaha, S. (2023). Supporting employers and their employees with Mental hEalth problems to remain eNged and productIve at wORK (MENTOR): A feasibility randomised controlled trial protocol. *Plos one*, 18(4), e0283598.

#### Educational Objectives:

1. Explain how co-production can be used to adapt ACT for educational, clinical, and workplace contexts, and design and run feasibility and acceptability trials in these settings.

2. Identify and discuss key implementation considerations for ACT-based online interventions across educational, clinical, and workplace settings.
3. Describe how qualitative lived-experience insights can inform culturally responsive and developmentally appropriate adaptations of ACT across diverse populations and life contexts.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

#### **154. Beyond Talent and Labels: RFT Perspectives on Behavior**

**Symposium** • 9:00 - 10:30 AM

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Experiential exercises, Literature review, Original data*

Categories: RFT / RGB / language, Theory and philosophical foundations, Music Education, Arts, Conversation Analysis, Experience Of Self And Verbal Relations, Verbal Behavior Development, RFT, Avoidance, Single-Case Experimental Design, IRAP, MDS

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C254**

Chair: Chauncey R. Parker IV, Ph.D., University of Washington  
 Maria E. Chełkowska-Zacharewicz, Ph.D., Strefa Harmonii  
 Rémy H Brunet, Master's, Vinatier  
 So Sugita, M.A., Waseda University Graduate School of Human Science  
 Breanna Lee, M.S., Ulster University

Human behavior is shaped by complex relational networks that govern how we interpret experiences, evaluate ourselves, and act in the world. Rigid beliefs, evaluative labels, and entrenched relational patterns can constrain engagement, limit flexibility, and amplify suffering, while awareness of relational processes can expand behavioral repertoires and support adaptive action.

This symposium explores how Relational Frame Theory (RFT) illuminates the mechanisms underlying cognition, language, and behavior across diverse contexts, including self-concept, performance, communication, and decision-making. Presentations highlight how relational networks can both restrict and enable human action, demonstrating strategies for identifying cognitive barriers, predicting relationally governed responses, and designing interventions that foster flexibility and value-consistent behavior.

Attendees will gain insight into the power of relational frames to shape thought, emotion, and behavior, as well as practical approaches for applying RFT principles in educational, clinical, and applied settings. This work underscores the potential of RFT to guide research, assessment, and intervention beyond traditional labels and assumptions, promoting more adaptive and engaged behavior across domains.

- *When "Talent" Becomes a Trap: A Relational Frame Theory Analysis of Cognitive Barriers to Musical Engagement*  
 Maria Chełkowska-Zacharewicz, Ph.D., Strefa Harmonii

Commonly held beliefs regarding musical talent, often defined as an innate, immutable trait, shape individuals' readiness to engage in musical activity. From the perspective of Relational Frame Theory (RFT), "talent" functions as a rigid, hierarchical cognitive frame with direct behavioural implications. This often leads to over-identification with labels like "unmusical," narrowing behavioural repertoires and fostering the withdrawal from music education and artistic activity (Ruddock & Leong, 2005). These beliefs, reinforced by teachers and parents, may influence individual development (Shouldice, 2019, 2021) and lead to systemic cultural participation in (or withdrawal from) musical activities.

Developing psychological flexibility provides tools to notice internal narratives and reduce the restrictions from musical engagement by distancing individuals from rigid evaluative thoughts (Hayes et al., 2006). This enables the expansion of the behavioural repertoire and the pursuit of actions aligned with personal values, regardless of evaluative thoughts or social classifications. This framework offers key applications for music education and therapeutic interventions, promoting accessible engagement based on authentic choice. Ultimately, it supports building communities more open to diversity, togetherness, and cultural development.

- *From Turns to Relational Frames: Exploring Methodological Dialogue Between Conversation Analysis and RFT*

Rémy H. Brunet, Vintaier

This oral presentation proposes a dialogue between Matthieu Vilatte's Mastering Clinical Conversation and Emanuel A. Schegloff's A Primer in Conversation Analysis. Whereas Relational Frame Theory (RFT) conceptualizes psychotherapeutic intervention primarily as the deployment of multiple forms of "framing" (e.g., deictic, hierarchical, analogical...), We hypothesize that the effectiveness and efficiency of such framings can be systematically examined using the descriptive and analytic resources of Conversation Analysis (CA). More specifically, CA offers a well-established taxonomy for describing how turns-at-talk are organized sequentially in interaction, and thus provides tools to assess how a given framing is taken up, transformed, or resisted in situ. Drawing on concepts and principles such as turn-taking organization, adjacency pairs, relevance rules, nextness, contiguity, progressivity, sequence expansion, and repair, we outline an interactional framework for evaluating clinical framings not only for their theoretical coherence but also for their observable consequences in the unfolding of therapeutic talk.

- *Strategies to Fix Low Self-Esteem; Experience of Self: Verbal Relations, Stimulus Control, and Cognitive Defusion.*

Chauncey R. Parker IV, University of Washington

According to Kohlenberg and Tsai (1995), in the process of learning language, "I", the "self", emerges as a verbal functional unit. The environment within which this experience of self emerges can affect whether the individual has predominantly "private", i.e., within the skin stimulus control or do they look to public stimuli to discern experience of self. Furthermore, that experience of self can acquire stimulus functions of "I am X", where "X" is good, bad, doctor, carpenter, husband, etc. But what happens when the husband is divorced or the carpenter loses the ability to work? There is a story about the Dali Lama being asked, "how do your people deal with low self-esteem?". The Dali Lama and his consultants, all with excellent English skills, were baffled by the question. This story reveals a very different experience of self. I will discuss the verbal phenomena that underlies experience of self and describe strategies for working with problematic experiences of self that foster suffering, isolation, and missed opportunities.

- *Is a painting still appetitive when the artist is Hitler?: Asking the IRAP and MDS*

Breanna Lee, M.S., Ulster University  
 Dermot Barnes-Holmes, Ph.D., Ulster University  
 Julian C. Leslie, Ph.D., Ulster University  
 Dana Paliliunas, Ph.D., Ball State University  
 Jordan Belisle, Ph.D., Entiva Behavioral Health  
 Colin Harte, Ph.D., Universidade Federal de São Carlos

Psychological assessment and treatment has historically been dominated by a medical model, despite limitations in its clinical utility (First et al., 2018; Maj, 2018). These limitations may be addressed through a process-based approach using concepts from Relational Frame Theory (RFT) for predicting and influencing aspects of arbitrarily applicable relational responding (AARR) involved in clinically-relevant behavior (Barnes-Holmes et al., 2020). The current project employed multiple exposures to the Implicit Relational Assessment Procedure (IRAP) and a multidimensional scaling procedure (MDS) to observe AARR over time for individual adult participants. Stimuli for both procedures included images of landscape paintings (positive valence) and graphic injuries (negative valence). Using an ABA reversal design, a brief intervention was used for attempting to transform the appetitive properties of the landscape paintings to instead be aversive. This involved revealing the artist of the paintings: Bob Ross (A phases) and Adolf Hitler (B phase). Results will be discussed in terms of the patterns of AARR captured by each procedure over time and their potential use in analyzing clinically-relevant behavior.

- *Exploring the Variables Controlling the Competing Transformations of Stimulus Function*

So Sugita, Graduate School of Human Sciences, Waseda University  
 Tomu Ohtsuki, Faculty of Human Sciences, Waseda University

Advances in Relational Frame Theory suggest that the transformation of stimulus function underlies many complex forms of human suffering. While prior research has extensively examined transformations of single functions, the arbitrary and complex nature of relational responding suggests that multiple, potentially incompatible transformations may occur simultaneously within a relational network, such as those eliciting approach and avoidance. Across three experiments, we examined whether (1) reinforcement history of relational responding and (2) contextual control influences the outcome of discriminative functions transferred across coordination relations and predict the probability of approach versus avoidance responses. These variables were manipulated to evaluate their influence on response allocation under competing transformations. The findings offer insights into contingencies that may shape dominance of avoidance over approach, as well as conditions under which such patterns may be reversed. We conclude by discussing how this analytic framework may contribute to the identification of precise target relational responses to shift clinically meaningful behavioral outcomes.

Educational Objectives:

1. Describe how verbal relations, mindfulness, and cognitive defusion play a role in psychotherapy for problems with self-esteem.
2. Analyze patterns of IRAP and MDS performances across multiple exposures through a single-case experimental design.
3. Describe how language and cultural narratives function as rigid relational frames that can limit musical engagement and reinforce "talentless" identities through the lens of Relational Frame Theory (RFT).

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**155. Strength in Uncertainty: ACT and Process-Based Approaches for Cancer Patients**

**Symposium** • 9:00 - 10:30 AM

Translation: Not available

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

Categories: Health / behavioral medicine, Processes of change, Cancer, Mindfulness, Fear Of Cancer Recurrence, Psycho-Oncology, Acceptance And Commitment Therapy, Group Therapy, Psychological Flexibility, Quality Of Life, HRV, Heart Rate Variability, Stress, Anxiety, Depression, Emotion Dysregulation, Breast Cancer

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Chair: Christina Sauer, PD Dr., Universitätsklinikum Frankfurt  
 Marion Barrault-Couchouron, Ph.D., Institut Bergonié  
 Chun Tao, Ph.D., ABPP, Mayo Clinic Arizona  
 Ela Ari, Ph.D., Istanbul Medipol University  
 Ioanna Kazalaki, Ph.D. (C), University of Cyprus  
 Sevinç Ulusoy, M.D., Private Practice

A cancer diagnosis introduces profound uncertainty, emotional distress, and disruptions to daily life and meaning. Finding strength in such uncertainty calls for cultivating psychological flexibility, resilience, and adaptive emotion regulation.

This symposium highlights research on group-based ACT and process-informed interventions designed to help patients navigate uncertainty and sustain well-being. Across diverse cancer populations, evidence shows that enhancing awareness and values-guided action supports reductions in anxiety, depression, and experiential avoidance, while fostering resilience, self-compassion, and meaningful engagement. Findings also illustrate how emotion regulation interacts with physiological stress responses, underscoring the value of targeting both psychological and somatic processes.

Together, these studies demonstrate how mechanism-focused, process-based approaches can be integrated into oncology care to empower patients to respond flexibly to uncertainty. Attendees will gain practical insights for translating these interventions into real-world clinical settings, bridging evidence-based processes with patient-centered care.

- *Real-World Evaluation of An Acceptance and Commitment Therapy-Based Group for Adults with Diverse Cancer*

Chun Tao, Ph.D., Mayo Clinic Arizona  
 Lisa A. Howell, Ph.D., Mayo Clinic Arizona  
 Katie A. Lespron, M.S.W., Mayo Clinic Arizona  
 Devin Lincenberg, Psy.D., Mayo Clinic Arizona  
 Kelly D. Gemmill, M.S.W., Mayo Clinic Arizona  
 Melody A. Griffith, M.S.W., Mayo Clinic Arizona  
 Cynthia Stonnington, M.D., Mayo Clinic Arizona  
 Diane S. Wheeler, Mayo Clinic Arizona  
 Anne Roche, Ph.D., Mayo Clinic Arizona  
 Cynthia Stonnington, M.D., Mayo Clinic Arizona

Acceptance and Commitment Therapy (ACT) has demonstrated effectiveness in improving psychological flexibility and quality of life for adults with cancer, yet less is known about its real-world implementation across diverse diagnoses and stages. This study evaluated the feasibility and acceptability

of "Live Fully with Cancer," a six-session, manualized, group-based ACT intervention delivered at a comprehensive cancer center in the Southwestern United States.

In 2024–2025, licensed psychologists led 22 cohorts for 160 patients, with 76% attending 3+ sessions. Eighty-eight consenting participants completed measures of psychological flexibility (COMPACT-15), quality of life (PROMIS-29), and meaning in life at pre group, post group, and one-month follow up.

Mixed-effects linear regression models showed significant increases in behavioral awareness, valued action, and meaning in life, and reductions in depression and anxiety from pre-group to post-group (all  $p < .005$ ). All improvements persisted at one month except anxiety. Participants reported high satisfaction and likelihood of recommending the group.

Findings indicate that group-based ACT is feasible, acceptable, and promising for enhancing psychological well-being and expanding access to evidence-based care across diverse cancer populations.

- *Psychological Flexibility as a Mediator Between Resilience and Psychological Outcomes in Patients with Cancer*

Christina Sauer, Ph.D., University Cancer Center Frankfurt (UCT), University Hospital, Goethe University

Talha Sajjad, M.Sc., University Cancer Center Frankfurt (UCT), University Hospital, Goethe University

Louise Zinndorf, M.Sc., University Cancer Center Frankfurt (UCT), University Hospital, Goethe University

University

Gregor Weißflog, University of Leipzig

Resilience and psychological flexibility play a central role in coping with biopsychosocial distress in patients with cancer. The aim of this study was to examine the mediating role of psychological flexibility and its core processes in the association between resilience and psychological outcomes in cancer patients. A total of  $N = 219$  patients completed an online survey assessing resilience (RS-11), psychological (in)flexibility (AAQ-2), distress (NCCN distress thermometer), depression (PHQ-8), anxiety (GAD-7), and mental health-related quality of life (SF-12). Across all bootstrapped mediation models, psychological flexibility fully mediated the relationship between resilience and all psychological outcomes. In further models, we investigated the mediating roles of acceptance (assessed with the PEACE-G) and value-based living (assessed with the VQ-G), revealing full mediation with distinct patterns of association for these core processes. The findings of our analyses underscore the pivotal role of psychological flexibility in the association between resilience and psychological outcomes in cancer patients. These results suggest that interventions targeting psychological flexibility, such as ACT, may strengthen resilience and improve mental health outcomes in this population.

- *Enhancing Psychological Flexibility and Self-Compassion in Oncology: A Process-Based Group Perspective*

Marion Barrault-Couchouron, Ph.D., Institut Bergonié et Université de Bordeaux

Fear of cancer recurrence (FCR) refers to the persistent worry or preoccupation that cancer may return or progress. While common after treatment, elevated FCR is associated with rumination, hypervigilance to bodily sensations, reassurance-seeking behaviors, and functional impairment. Clinically significant FCR frequently co-occurs with anxiety, depressive symptoms, and trauma-related vulnerabilities.

This presentation examines two group interventions delivered in a comprehensive cancer center since several years: Mindfulness-Based Stress Reduction (MBSR) and Group Cognitive-Behavioral Therapy for FCR. Drawing from a process-based and Acceptance and Commitment Therapy (ACT) framework, we explore how both interventions cultivate psychological flexibility and self-compassion while addressing different clinical presentations.

MBSR primarily supports patients with broader distress and elevated experiential avoidance, fostering present-moment awareness and compassionate responding. The FCR program more directly targets high-intensity recurrence fears through exposure, cognitive restructuring, and uncertainty tolerance.

We will conclude by proposing an integrative, trauma-informed stepped-care model embedded in oncology care pathways, in which group allocation is guided by FCR severity, baseline experiential avoidance, and post-treatment fatigue and cognitive fog.

- *Brief ACT-Based Group Therapy for Resilience in Breast Cancer: A Randomized Trial*

Ela Ari, Istanbul Medipol University

Sevinç Ulusoy,

Gizem Cesur Soysal, Istanbul Medipol University

Şevval Keleş, Kanserli Çocuklara Umut Vakfı

Ceren Esgibağ,

Beyza Kömürçü,

Vahit Özmen, Grup Florence Nightingale

Resilience is a critical psychological capacity that can be developed, particularly among women coping with breast cancer. Despite its widely acknowledged importance, empirical studies evaluating the

effectiveness of brief Acceptance and Commitment Therapy (ACT) based group interventions is limited relative to the broader psychosocial intervention literature. This randomized controlled trial examined the effects of a 3-week ACT-based group intervention on resilience in women diagnosed with breast cancer. Sixty participants were randomized to either an ACT group (n = 32) or a psychological support condition (n = 28), with assessments conducted at baseline and post-intervention.

The intervention targeted resilience through experiential exercises, including the ACT Matrix, mindfulness, cognitive defusion, acceptance, values clarification, committed action, and self-as-context. A mixed-design ANOVA revealed a significant time × group interaction for resilience,  $F(1,58) = 7.96$ ,  $p = .007$ , partial  $\eta^2 = .12$ , indicating greater improvements in the ACT group. Significant main effects of time were also observed for self-compassion, psychological flexibility, and depressive symptoms. These findings suggest that brief ACT-based interventions may enhance resilience by supporting adaptation.

- *Bridging Mind and Heart: Links Between Psychological Distress, Emotion Regulation and HRV in Breast Cancer*

Ioanna Kazalaki, Ph.D. (C), University of Cyprus

Maria Karekla, Ph.D., University of Cyprus

Anastasia Constantinidou, Ph.D., Medical School University of Cyprus; Bank of Cyprus Oncology Center

Georgia Panayiotou, Ph.D., University of Cyprus

Psychological distress and autonomic dysregulation are common in breast cancer (BC), yet the interplay between subjective emotion regulation and physiological stress responses prior to treatment remains unclear. We examined 73 women scheduled for radiotherapy and/or chemotherapy, assessing distress (DASS-21), emotion regulation difficulties (DERS), and heart rate variability (HRV). Hierarchical regression showed that demographic and medical factors did not predict distress, whereas difficulties in emotional clarity robustly predicted higher distress ( $\beta = .67$ ,  $p < .001$ ). Emotional awareness showed a non-significant trend toward lower distress, and treatment type had no effect on distress, emotion regulation, or HRV. Moderated mediation analyses indicated that distress predicted difficulties in emotional clarity, but these did not mediate the distress-HRV relationship. Notably, emotional awareness moderated the link between distress and HRV, suggesting autonomic responses vary with awareness. These results highlight the critical role of emotional clarity and awareness in pre-treatment BC distress. Integrating targeted emotion regulation training with HRV-focused interventions may bolster both psychological and physiological flexibility, underscoring the value of addressing the mind-body interface to optimize pre-treatment care in BC.

#### Educational Objectives:

1. Describe the protocol to apply acceptance commitment therapy-based group intervention to real-world psycho-oncology practices
2. Describe the relationships between psychological distress and emotion regulation in women with breast cancer prior to treatment, highlighting the roles of emotional clarity and awareness.
3. Assess the feasibility and acceptability of "Living Fully with Cancer" for adults across diverse cancer diagnoses and stages.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

Sunday Morning 10:45

### 156. Finding Consensus: What Counts as CBS Supervision?

Panel • 10:45 - 12:15 PM

Translation: AI online with your phone - audio or text

Components:

Categories: Supervision and training, Academics or education, Supervision

Target Audience: *Intermediate, Advanced*

**Location: Gounot**

Chair: Hubert Czupala, M.A., Akademia ACT

Discussant: Sarah Pegrum, Ph.D., Pegrum Therapy & Training

Eric Morris, Ph.D., La Trobe University

Katia Manduchi, Dr., Independent Practice

Jim Lucas, PG Dip CBT, Openforwards

Sally Bradley, DClinPsy, Ahead Psychology Ltd.

Supervision is a central component in the development, maintenance, and ethical governance of clinical practice within Contextual Behavioral Science (CBS). Despite its importance, within the ACBS community there is no single, shared definition of what constitutes “CBS supervision,” as well as consensus regarding its core functions, processes, and minimal competencies.

This panel brings together multiple perspectives that are central to ACBS: (1) scientific and research-based perspectives, including empirical evaluation and the use of validated measurement tools to assess supervisory and therapeutic competencies (e.g., ACT- and FAP-related skills); (2) community and standards-based perspectives, including the work of Peer-Reviewed Trainer-related committees and the Special Interest Group for Supervision and Consultation; (3) applied and relational process perspectives, including FAP-informed supervision; and (4) training-system perspectives, including formal supervisor training pathways and pilot programs for training CBS supervisors.

Panelists will respond to shared guiding questions about what counts as CBS supervision, how context shapes supervisory practice, and where points of convergence and productive divergence emerge. The session will include time for interaction among panelists and active engagement with the audience.

**Educational Objectives:**

1. Identify at least three different perspectives on CBS supervision represented in the panel (scientific/ research based, community/ standards based, applied/ relational process, training-system perspectives).
2. Describe the current state of consensus and divergence regarding the core definitions, functions, and minimal competencies of CBS supervision.
3. Evaluate how different CBS supervision approaches address core supervisory functions within their specific clinical, training, and cultural contexts.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**157. Access and Action: A Panel Discussion: Brief Interventions SIG Sponsored**

**Panel** • 10:45 - 12:15 PM

Translation: Not available

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

Categories: Health / behavioral medicine, Access, FACT, Brief Interventions

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Barrot**

Chair: Jill Holtz, Ph.D., Presbyterian Hospital

Erica Rutledge, Ph.D., Wellness In Actions, LLC

Metua Daniel-Atutolu, MHSc, MN, National Hauora Coalition

Patricia J Robinson, Ph.D., Mountainview Consulting Group, LLC

Hendrik W Crispiniano Garcia, B.Sc., M.Sc., Pernambucan Faculty of Health (Faculdade Pernambucana de Saúde - FPS)

This panel discussion will explore challenges that shape access to contextual behavioral science (CBS) services. Many factors influence an individual’s ability to connect with a person trained to provide CBS services, such as ACT or Brief ACT. The five panelists represent three countries and multiple cultures, each bringing unique experiences from their efforts to improve access in their communities. Panelists include a health improvement practitioner trainer working in general practice in New Zealand, a primary care behavioral health psychologist in New Mexico, a psychologist specializing in burnout and caregiver support in Missouri, a graduate student in Brazil who teaches CBS to medical students, and a psychologist with longstanding expertise in access issues. To ground the discussion, the chairperson will present video clips dramatizing barriers to access (e.g., insufficient information, distrust, distance, neighborhood safety, cost, limited awareness of CBS provider qualifications, workforce challenges, burnout, understaffing, undersupply). Following these dramatizations, panelists will discuss their experiences, share research findings and evaluation tools, and respond to questions and comments. A tool for action planning will be shared with attendees.

**Educational Objectives:**

1. Apply insights from dramatized access scenarios to identify opportunities for system- or practice-level change.
2. Describe key structural, cultural, and workforce barriers influencing access to ACT and Brief ACT across diverse global and community contexts.
3. Create a feasible, role-relevant action plan to address an access barrier using the FACT Can-Do Plan.

**CEs Available (1.50):** [CEs for Psychologists](#)

### 158. Advancing RNT-Focused ACT: Efficacy, Processes of Change, and Novel Applications

**Symposium** • 10:45 - 12:15 PM

Translation: AI online with your phone - audio or text

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

Categories: Clinical intervention development or outcomes, RFT / RGB / language, ACT, RFT, Repetitive Negative Thinking, Depression, Anxiety

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Mouterde**

Chair: Miguel Rodríguez-Valverde, Ph.D., Universidad de Jaén

Discussant: Bárbara Gil-Luciano, Ph.D., Madrid Institute of Contextual Psychology

Francisco J. Ruiz, Ph.D., Fundación Universitaria Konrad Lorenz

Andreas Larsson, Ph.D., Mid Sweden University

Repetitive negative thinking (RNT) has been identified as a core transdiagnostic process maintaining emotional disorders and psychological distress. RNT-focused acceptance and commitment therapy (ACT), grounded in relational frame theory, directly targets RNT patterns and has accumulated promising evidence across clinical populations. This symposium presents four studies that extend RNT-focused ACT research in scope and methodology. The first paper examines a brief process-based ACT intervention targeting impostor feelings, RNT, and psychological flexibility using multimodal assessments in a repeated-measures design. The second paper presents an idiographic comparison of 8-session standard ACT versus RNT-focused ACT protocols for adults with major depressive disorder and/or generalized anxiety disorder. The third paper explores a novel application of RNT-focused ACT to dependent personality disorder using a concurrent multiple-baseline design. The fourth paper describes an ongoing idiographic randomized controlled trial comparing RNT-focused ACT and the Brief Behavioral Activation Treatment for Depression in 60 adults with depression and/or generalized anxiety disorder. Together, these studies advance understanding of RNT-focused ACT efficacy, change processes, and clinical applicability.

- *A Process-Based ACT Intervention Targeting Impostor Feelings and Repetitive Negative Thinking: Multimodal Outcomes from a Repeated-Measures Study*  
 Andreas B. Larsson, Mid Sweden University  
 Caroline Leão de Moraes, Mid Sweden University  
 Carl-Johan Moss, Mid Sweden University  
 Tina Shahmalekpour, Mid Sweden University  
 Angelika Forsnacke, Mid Sweden University  
 Maria Lalos, Mid Sweden University

This study investigated the effects of a brief process-based Acceptance and Commitment Therapy (ACT) intervention targeting impostor feelings, repetitive negative thinking (RNT), and psychological flexibility. Using a within-subject repeated-measures design (T1–T5), participants received individualized mapping followed by three structured group sessions focused on defusion, values, self-compassion, and hierarchical framing of RNT. Measures included CIPS, PTQ, MPFI, and PBAT, capturing both trait-level and moment-to-moment behavioral processes. Results revealed consistent reductions in impostor feelings, RNT, and fusion, alongside increases in psychological flexibility and values-driven action. PBAT indicators showed shifts toward greater behavioral adaptability and alignment with personal values. Qualitative interviews emphasized normalization, decreased shame, and strengthened self-compassion, highlighting defusion with dominant evaluative thoughts as especially impactful. Together, these findings demonstrate that a brief ACT protocol can produce meaningful changes across cognitive, emotional, and behavioral levels, offering support for process-based, multimodal interventions targeting impostor-related distress.

- *Efficacy and Change Processes of ACT and RNT-focused ACT in Depression and Generalized Anxiety Disorder: A Preliminary, Idiographic Comparison*

Diego M. Otálora, Universidad El Bosque  
 Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz  
 Bryan A. Oyarzún, Private Practice  
 Estefany López-Palomo, Fundación Universitaria Konrad Lorenz  
 Derly Toquica-Orjuela, Fundación Universitaria Konrad Lorenz  
 Mónica Rozo-Neuta, Fundación Universitaria Konrad Lorenz  
 Xiomara Hernández-Bernal, Private practice  
 Augusto Méndez, Universidad Latina de Panamá  
 Andrés Peña-Vargas, Fundación Universitaria Konrad Lorenz  
 Koryn N. Bernal, Fundación Universitaria Konrad Lorenz

Major depressive disorder (MDD) and generalized anxiety disorder (GAD) frequently co-occur and are maintained by transdiagnostic processes such as repetitive negative thinking (RNT). Acceptance and commitment therapy (ACT) has proven effective for these conditions, although effect sizes and rates of clinically meaningful change could be improved. RNT-focused ACT, a model grounded in relational frame theory (RFT), targets RNT more directly and has shown promising results. This study conducted a preliminary idiographic comparison of an 8-session standard ACT protocol with an 8-session RNT-focused ACT protocol in adults with primary MDD and/or GAD. Twenty-nine participants were randomly assigned to one of the two conditions within a concurrent multiple-baseline design. Both interventions produced significant improvements, but RNT-focused ACT consistently yielded larger and faster reductions in emotional symptoms, anxiety, depression, and RNT. Effect sizes were notably larger in the RNT-focused ACT group ( $d = -2.00$  vs.  $-1.24$  for overall emotional symptoms). Mediation analyses showed that reductions in RNT accounted for most treatment effects, particularly in RNT-focused ACT.

- *Feasibility and Preliminary Efficacy of an RNT-focused ACT Intervention in Dependent Personality Disorder*

Laura M. Ramírez, Fundación Universitaria Konrad Lorenz  
 Carlos E. González-Cifuentes, Universidad San Buenaventura  
 Sofía V. Silva-Medina, Fundación Universitaria Konrad Lorenz  
 Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz

Dependent personality disorder (DPD) is characterized by pervasive patterns of submissive and clinging behavior and an excessive need for care that produce significant functional impairment. Although DPD is one of the most prevalent personality disorders, research on effective psychological interventions is scarce. Acceptance and commitment therapy (ACT) has accumulated evidence for treating a broad range of psychological difficulties, and RNT-focused ACT has obtained promising results for emotional disorders. Notwithstanding, its application to personality disorders has not been explored. This study conducted an idiographic evaluation of an 8-session RNT-focused ACT protocol for adults diagnosed with DPD using a concurrent multiple-baseline design across six participants. The primary outcome was dependent behavior toward others. Results showed significant reductions in dependent behavior across participants, with large effect sizes. Additionally, diagnostic criteria were no longer met in practically all participants at the end of the intervention. Overall, these findings suggest that brief RNT-focused ACT protocols might be effective for treating DPD, warranting conducting further controlled research.

- *Comparative Efficacy of RNT-Focused ACT Versus BATD for Depression and Generalized Anxiety Disorder: An Idiographic Randomized Controlled Trial Protocol*

Francisco J. Ruiz, Fundación Universitaria Konrad Lorenz  
 Javier M. Bianchi, Fundación Universitaria Konrad Lorenz

Major depressive disorder (MDD) and generalized anxiety disorder (GAD) frequently co-occur and are maintained by transdiagnostic processes. Acceptance and commitment therapy focused on repetitive negative thinking (RNT-focused ACT) and the Brief Behavioral Activation Treatment for Depression (BATD) have independently accumulated promising evidence for treating these conditions, although no study has directly compared their efficacy. This study ongoing idiographic comparison of an 8-session RNT-focused ACT protocol with an 8-session BATD protocol in 60 adults with primary MDD and/or GAD. Participants will be randomly assigned to one of the two conditions within a multiple-baseline design across three cohorts. The primary outcome will be overall emotional symptoms assessed through weekly assessments, with secondary outcomes including depression, anxiety, and psychological well-being. Bayesian hierarchical linear models, design-comparable effect sizes, and multilevel mediation and moderation analyses will be applied. This study will contribute to identifying the differential short- and long-term efficacy of these interventions, their idiographic processes of change, and the participant characteristics that moderate treatment outcomes.

Educational Objectives:

1. Describe how RNT-focused ACT protocols produce changes across cognitive, emotional, and behavioral levels as captured by multimodal assessment strategies.
2. Identify the differential efficacy of RNT-focused ACT compared to standard ACT and behavioral activation for treating emotional disorders.
3. Discuss the extension of RNT-focused ACT to novel clinical populations and describe the idiographic methodologies employed to evaluate treatment outcomes at the individual level.

**CEs Available (1.50):** [CEs for Psychologists](#) [BCBA CEUs](#)

**159. Five Powerful DNA-V Exercises for Helping Young People who are Avoidant of School**  
**Workshop** • 10:45 - 12:15 PM

Translation: AI online with your phone - audio or text

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

Categories: Academics or education, Behavior analysis, Emotional Based School Avoidance (EBSA)

Target Audience: *Beginner, Intermediate, Advanced*

**Location: Weil**

Nic Hooper, Ph.D., Connect Curriculum  
Duncan Gillard, D.Ed.Psy, Enable Trust  
Owen Cogan, DEdPsy, Enable Inclusion Trust  
Freddy Jackson Brown, DClInPsy, Contextual Behavioural Solutions

This experiential workshop shares practice-based learning from applying the DNA-V model with young people presenting with emotional based school avoidance (EBSA). Drawing on our work within Enable Inclusion Trust, we will guide participants through the five most powerful approaches we have found over several years of direct intervention. The session integrates quantitative outcomes and qualitative reflections from students, families, and practitioners to illustrate how psychological flexibility processes can support re-engagement with education. Attendees will actively experience key exercises, metaphors, and conversational strategies that promote values-led action, emotional openness, and behavioural experimentation in school-avoidant youth. We will highlight practical adaptations for complex systems, including collaboration with schools and caregivers. The workshop emphasises hands-on learning, reflective discussion, and translation to participants' own settings. By the end, attendees will leave with concrete tools, a clearer conceptual understanding of DNA-V in EBSA contexts, and increased confidence in delivering flexible, compassionate, and evidence-informed support.

Educational Objectives:

1. Describe the core components of the DNA-V model and explain how they relate to emotional based school avoidance (EBSA) in young people.
2. Demonstrate at least two experiential exercises used in the workshop and apply them to a case example involving a school-avoidant student.
3. Analyze quantitative and qualitative indicators of progress in EBSA interventions and assess how these data can inform practice in participants' own educational or clinical settings.

**CEs Available (1.50):** [CEs for Psychologists](#)

**160. "I'll Do It Later": A Process-Based ACT Approach to Procrastination**  
**Workshop** • 10:45 - 12:15 PM

Translation: AI online with your phone - audio or text

Components: *Conceptual analysis, Experiential exercises*

Categories: Clinical intervention development or outcomes, Processes of change, Procrastination, Experiential Avoidance, Psychological Flexibility, Values, Self-Regulation

Target Audience: *Beginner, Intermediate*

**Location: Aristote**

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

Procrastination is often mischaracterized as a time-management problem, yet research defines it as the voluntary delay of intended tasks despite anticipating negative consequences (Steel, 2007). Rather than laziness, it reflects a self-regulatory process in which short-term mood repair overrides long-term valued action. From a process-based ACT perspective, procrastination is maintained by experiential avoidance, cognitive fusion with self-critical or perfectionistic thoughts, rule-governed rigidity, and disconnection from personally chosen values ((Dionne et al., 2020). These interacting processes narrow behavioral repertoires and reinforce avoidance over time. Empirical evidence suggests that ACT-based interventions reduce procrastination by targeting these mechanisms and increasing psychological flexibility (Wang et al., 2015). This workshop presents a coherent process-based ACT framework applicable across academic, professional, and personal domains. Maintaining mechanisms will be examined through functional analysis and case examples, and participants will engage in experiential exercises designed to increase willingness, promote cognitive defusion, clarify values, and implement small, behaviorally anchored commitments. Practical intervention strategies and prevention principles for educators and supervisors will also be discussed.

Educational Objectives:

1. Describe procrastination as a process of experiential avoidance within a process-based ACT framework.
2. Conduct a functional analysis of procrastination by identifying rule-governed behavior, cognitive fusion, and values disconnection
3. Demonstrate experiential ACT-based interventions that increase willingness and promote values-guided behavioral engagement.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

### **161. Polyvagal-informed Acceptance and Commitment Therapy (PIACT) for Autonomically Attuned Psychological Flexibility**

**Workshop** • 10:45 - 12:15 PM

Translation: AI online with your phone - audio or text

Components: *Didactic presentation, Experiential exercises*

Categories: Professional development, Clinical intervention development or outcomes, Polyvagal Theory

Target Audience: *Beginner, Intermediate*

**Location: Perroux**

Aisling Leonard-Curtin, M.Sc., C. Psychol., Ps.S.I., ADHD Ireland

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

**This session is not eligible for any type of CEs.**

### **162. Healing in Context: Adapting ACT for Persistent Trauma in Marginalized Communities**

**Workshop** • 10:45 - 12:15 PM

Translation: Not available

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

Categories: Dissemination or global health strategies, Clinical intervention development or outcomes, Trauma

Target Audience: *Beginner, Intermediate*

**Location: Aubert**

Laurie Gallo, Ph.D., Montefiore Medical Center/Albert Einstein College of Medicine  
Sneha Shankar, Ph.D., Montefiore Medical Center

Acceptance and Commitment Therapy (ACT) is an evidence-based treatment for trauma-related distress (Meyer et al., 2018; Wharton et al., 2019). However, standard ACT for trauma interventions often do not adequately address the pervasive and persistent stressors associated with racial and economic marginalization. While adapted ACT protocols have shown promise in highly stressed populations, including displaced refugees (Tol et al., 2020), few ACT interventions explicitly address social determinants of health (Bhambhani et al., 2025). In this workshop we will present a culturally tailored, ACT for trauma intervention designed to address the contextual realities of marginalized communities. Drawing on Polyvagal-informed practices (Dana), frameworks of generational trauma (Buqué), and prior work addressing social determinants of health (Bhambhani et al., 2025), participants will learn modified ACT skills that enhance present-moment awareness, personal empowerment, deepen understanding of systemic and generational trauma, and increase access to generational sources of healing and wisdom. Through a combination of didactic instruction, clinical vignettes, and experiential exercises, participants will develop practical, trauma-focused psychological flexibility skills to support individuals to heal in their personal context.

Educational Objectives:

1. Demonstrate increased awareness and understanding of the importance of modifying ACT for Trauma interventions when working with communities experiencing pervasive and persistent interpersonal and systemic trauma (e.g., racism, poverty).
2. Demonstrate understanding of the use of Polyvagal-informed strategies to enhance present-moment awareness and support client empowerment.
3. Analyze the impact of systemic and generational trauma on clinical presentation and identify pathways of healing.

**CEs Available (1.50):** CEs for Psychologists

### **163. Connection Over Perfection: Parenting Around Sex, Bodies, and Identity Using ACT: Gender and Sexual Diversity SIG Sponsored**

**Workshop** • 10:45 - 12:15 PM

Translation: Not available

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

Categories: Methods/approaches for individual variation, Processes of change, Parenting

Target Audience: *Beginner, Intermediate*

**Location: Maldiney**

Molly England, LMSW, Willow of Wellness / Private Practice

Talking with children and adolescents about sex, bodies, consent, and identity is a core—but often avoided—developmental and parenting challenge that clinicians, social workers, and caregivers face. This workshop, grounded in Acceptance and Commitment Therapy (ACT) and contextual behavioral science (CBS), reframes these barriers as workable internal experiences rather than signs of failure. Participants will explore how experiential avoidance, fusion, and values confusion interfere with meaningful conversations, and how openness, curiosity, and self-compassion support connection over perfection.

Designed for social workers, clinicians, parents, and caregivers at a beginner ACT/CBS level, this interactive session integrates values clarification, experiential exercises, and practical communication strategies across developmental stages. Attendees will practice age-appropriate language, consent-based frameworks, and values-guided approaches that foster trust, bodily autonomy, and psychological flexibility. Through discussion prompts, case-based activities, and hands-on exercises, participants will leave with concrete tools and confidence to engage in ongoing, values-aligned

conversations that elevate the voices of gender-, sexual-, and relationally diverse individuals. Brief supporting research contextualizes the strategies presented.

Educational Objectives:

1. Describe how personal learning histories, values, and internal experiences influence communication with children and adolescents about sex, bodies, and identity.
2. Identify common ACT processes (e.g., experiential avoidance, fusion, shame-based narratives) that affect openness in conversations about sexuality and consent.
3. Demonstrate age-appropriate, values-guided communication strategies and ACT processes (acceptance, defusion, values clarification) to engage effectively in challenging conversations while respecting ethical/cultural considerations.

**CEs Available (1.50):** [CEs for Psychologists](#)

### **164. Exposure Therapy for Eating Disorders: A Process-Based, ACT-Informed Approach**

**Workshop** • 10:45 - 12:15 PM

Translation: Not available

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

Categories: Clinical intervention development or outcomes, Exposure, Eating Disorders, Body Image

Target Audience: *Intermediate, Advanced*

**Location: C125**

Danielle C DeVille, Ph.D., Harney & Associates

Eating disorders are complex conditions associated with significant medical risk, enduring chronicity, and lack of effective treatments. Eating disorders are often rooted in fear and maintained by rigid avoidance of aversive internal experiences; thus, exposure therapy has been increasingly applied in eating disorders treatment (e.g., Butler & Heimberg, 2020). In this workshop, participants will receive didactic and experiential instruction on the application of ACT-informed exposure therapy to address fears related to food, eating, and body image. Using eating disorder case examples, presenters will demonstrate the application of exposure not as a standardized protocol, but as a flexible, process-based tool for increasing psychological flexibility in the presence of fear (e.g., Thompson, Pilecki, & Chan, 2023). Particular attention will be given to the use of values-aligned, justice-based exposures (e.g., Pinicotti et al., 2024) to increase client empowerment and to enable clinicians to work effectively with weight stigma and other contextual sources of harm. The integration of ACT elements, including creative hopelessness, willingness, acceptance, and values-based action will be explored.

Educational Objectives:

1. Apply exposure as a process-based intervention for increasing psychological flexibility among individuals with eating disorders.
2. Design exposures that effectively target fears related to food, body size, and appearance.
3. Demonstrate the integration of ACT-based experiential approaches into theoretically-sound exposure practice.

**CEs Available (1.50):** [CEs for Psychologists](#)

### **165. Exploring Acceptance Through a Clinical Behavioral Analysis Lens: Easy as Pie**

**Workshop** • 10:45 - 12:15 PM

Translation: Not available

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

Categories: Behavior analysis, Clinical intervention development or outcomes, Acceptance, Clinical Behavior Analysis

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C154**

Paulo Bozza Jr., NB Contextual: Contextual Behavioral Psychotherapies  
Daniel Granados-Salazar, Ms.C., Asociación Contextual de Terapia

Practitioners often feel uncertain when translating the hexaflex processes into behavioral terms. While mid-level terms support clinical communication, developing a more precise understanding of the behavioral processes underlying therapeutic work allows clinicians to intervene with greater flexibility and sensitivity to subtle, in-session changes. This workshop will help participants grasp these processes through experiential exercises designed to increase precision and accuracy in the room. By learning to notice and respond to small behavioral shifts as they occur, clinicians can draw more effectively on techniques from different therapeutic models, guided by an understanding of why those techniques work and aligned with a pragmatic stance. The workshop also trains clinicians to define acceptance in behavioral terms, evoke it intentionally, and reinforce it during sessions. Presenters will demonstrate these skills through live real plays, followed by opportunities for participants to practice in their own role or real-play exercises. Ultimately, the aim is to increase the likelihood that acceptance will emerge and strengthen within the therapeutic context.

#### Educational Objectives:

1. Define acceptance in clear behavioral terms, in ways that complement and enrich the hexaflex model.
2. Identify and evoke acceptance processes in session, using moment-to-moment clinical interactions.
3. Apply precise, flexible, and context-sensitive interventions to reinforce and strengthen clients' acceptance behaviors.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

### 166. ACT and RFT Approaches to Sport Performance: What's Behind the Wisdom of Lindsey Vonn and Simone Biles?: Sport, Health, and Human Performance SIG Sponsored

**Symposium** • 10:45 - 12:15 PM

Translation: Not available

Components: *Case presentation, Literature review, Strategic planning*

Categories: Sports or performance-enhancing, Processes of change, ACT, RFT, Functional Analysis, Case Study, Scoping Review, Yips, and Choking

Target Audience: *Intermediate, Advanced*

**Location: C225**

Discussant: Thomas G Szabo, Ph.D., McNeese State University

Kazuya Inoue, Ph.D., Doshisha University

Manabu Yoshimoto, B.A., DEEP SLOW MOVE RIVER

Tanuj Kohli, Loughborough University

Athletes may flourish and experience intense anxiety, sadness, and pain (Gouttebauge et al., 2019). During performance, athletes may choke and later find themselves unable to explain the gap between training and competition performance. Functional analytic approaches to the assessment and treatment of performance involves the evaluation of relational framing in the moment and over time, an acknowledgement and openness to experiences of all kinds, and the commitment to effort during all phases of training and performance (Henriksen et al., 2020). In this symposium, Tanuj Kohli will present data pulled from a scoping review of studies that assess relational framing in athletic contexts, Kazuya Inoue will present data from an intervention focused on pitching in a baseball context, and Manabu Yoshimoto will present data from an intervention conducted with a 20-year black belt karate master. Tom Szabo will discuss similarities, points of divergence, and directions for future research.

- *From Symptoms to Processes: Integrating Performance Research with Relational Frame Theory*  
Tanuj Kohli, Loughborough University  
Karl Steptoe, Loughborough University  
Jamie Barker, Loughborough University  
Denise Hill, Swansea University

Performance psychology has traditionally examined peak performance through the lens of optimal psychological traits that an athlete possesses. From a functional contextual perspective, however, such states are not optimal traits or symptoms of an underlying problem. Instead, they are seen as behavioral processes that govern performance (Zhang & Su, 2020). Functional contextual approaches have demonstrated intervention efficacy in clinical domains (Gutman et al., 2025), yet their integration into

performance science remains limited. To address this gap, we conducted a scoping review of 79 studies examining competitive performance through the lens of Relational Frame Theory (RFT), a theory grounded in functional contextualism. We identified four central themes: processes of change, theoretical integration, applied gaps, and methodological alignment. Findings suggest that performance research would benefit from greater dimensional measurement to capture parallel processes across performance trajectories, integrated examination of performance and well-being, systematic attention to contextual covariates, and analysis of behavior across antecedent–consequence continua. Practically, our review indicates that interventions should target the functional context of performance rather than focusing solely on presenting symptoms.

- *Joy and Loathing in Baseball: A Case Study of Acceptance and Commitment Therapy for Throwing Yips*

Kazuya Inoue, Ph.D., Faculty of Psychology, Doshisha University

This presentation reports a case study of Acceptance and Commitment Therapy (ACT) and examines processes of change relevant to performance enhancement in clinical practice (Inoue, 2025). The client was a working adult baseball player in his forties experiencing throwing yips who participated in five online ACT sessions. From a functional analytic perspective, it was essential for both therapist and client to identify behavioral chains associated with both successful and disrupted performance (Szabo et al., 2019). The intervention focused on enhancing psychological flexibility while reducing psychological inflexibility, as well as fostering defusion from rules associated with both inflexible and flexible behavior patterns. Rather than organizing performance around the avoidance of aversive outcomes, increasing awareness of and commitment to appetitive functions (Barnes-Holmes et al., 2020)—approaching what is meaningful or positively reinforcing—was central to improvement. Additionally, recognizing the shared nature of performance-related struggles (common humanity; Neff, 2003), cultivating a defused stance toward internal experiences, and developing awareness of the present moment further supported performance enhancement.

- *Focus on Practical Kumite: Psychological Flexibility in High-Intensity Karate?*

Manabu Yoshimoto, Private Practice Psychologist

This planned case study examines distress, avoidance, and ACT processes during high-intensity karate training, informed by contextual behavioral science (Gutman, Villatte, & Zhang, 2023). We investigate the way psychological flexibility processes function under sustained physical load, pain, and performance pressure during karate training. Specifically, we examine experiential avoidance, cognitive fusion, and values-based action unfolding in real time during martial arts training. Data include interviews, observations, and behavioral indicators such as dumbbell load, repetitions, and, where feasible, front- and back-hand punch force, reflecting the embodied and combinational nature of karate practice. By integrating qualitative and behavioral data, we illuminate the way ACT processes support or hinder adaptive responding during intense training (Shortway et al., 2018; Watson et al., 2024). We offer insights relevant to applied sport psychology and the broader CBS community, thereby contributing to ongoing discussions about process-based approaches in both competitive and long-term martial arts training settings.

Educational Objectives:

1. Describe, interpret, and evaluate key processes of change relevant to sport performance drawing on empirical findings and clinical data.
2. Design and apply ACT- and RFT-informed case formulations and intervention plans using appropriate process and outcome measures in sport performance contexts.
3. Analyze contextual and cultural factors influencing athletes' behavior and performance, and plan functionally grounded interventions.

**CEs Available (1.50):** CEs for Psychologists BCBA CEUs

**167. Psychological Flexibility as a Bridge to Relational Harmony**

**Symposium** • 10:45 - 12:15 PM

Translation: Not available

Components: *Case presentation, Conceptual analysis, Didactic presentation, Literature review, Original data, Strategic planning*

Categories: Theory and philosophical foundations, Methods/approaches for individual variation, Psychological Flexibility, Functional Contextualism And Self-Reflection, Research Methods, Addiction, Mindfulness, Meaning, Acceptance, Meditation, Coping, Mental Health, Behavioural Health, Isolation, Confinement, Loneliness

*Target Audience: Beginner, Intermediate, Advanced*

**Location: C254**

Chair: Emily Darnett, B.A. (PsychSci), GDip (PsychSci), M.A./Ph.D. (ClinPsych), Black Dog Institute, University of New South Wales  
 Anton Sevilla-Liu, Ph.D., Kyushu University  
 Georgia Panayiotou, Ph.D., University of Cyprus  
 Catherine Sevilla-Liu, M.A., Kyushu University  
 Embla Frydenlund, Universidad Europea de Madrid

Emerging evidence demonstrates that psychological flexibility underlies adaptive co-parenting, insight without rumination, and constructive engagement with personal challenges. Broader applications include relationally contextualized models of Indigenous social and emotional wellbeing, pathways for adaptive coping with gambling-related distress, and mechanisms supporting mental health during periods of isolation, such as the COVID-19 pandemic. Across these diverse domains, psychological flexibility consistently mediates outcomes related to stress, emotion regulation, relational harmony, and life satisfaction.

Attendees will gain an integrated understanding of how flexibility processes can be assessed, analyzed, and cultivated across populations and settings. Emphasis will be placed on translating process-based research into interventions that enhance resilience, reduce experiential avoidance, and foster adaptive, value-driven living.

- *Rethinking Self-Reflection: The Functional Role of Psychological Flexibility*

Embla Frydenlund, Universidad Europea de Madrid  
 Lidia Budziszewska, Universidad Europea de Madrid  
 Alejandro Garcia-Pardina, Universidad Europea de Madrid  
 Alberto Bellido-Esteban, Universidad Europea de Madrid

Self-reflection is commonly assumed to increase insight, yet self-focused attention can also become ruminative. From a functional contextual perspective, psychological flexibility may differentiate between these outcomes. English-speaking adults completed the Self-Reflection and Insight Scale, the Rumination-Reflection Questionnaire, and the Acceptance and Action Questionnaire-II (AAQ-II) in a cross-sectional online survey (N=108; ages ranging from 18 to 39). We estimated a path model with mean-centered self-reflection, AAQ-II, and their interaction predicting insight and rumination. Psychological inflexibility showed large main effects: higher AAQ-II (higher inflexibility) predicted lower insight ( $\beta = -.59$ ) and higher rumination ( $\beta = .62$ ). Self-reflection showed smaller positive associations with insight ( $\beta = .14$ ) and rumination ( $\beta = .24$ ). Interaction terms were non-significant ( $\Delta R^2 \approx .01$ ), providing no evidence that flexibility moderates the effects of self-reflection. The model explained substantial variance ( $R^2 = .39$  for insight;  $R^2 = .45$  for rumination) overall. Findings suggest that flexibility processes relate strongly to adaptive and maladaptive self-focus regardless of reflective tendency, supporting interventions that target flexibility rather than reflection per se.

- *How to Examine Psychological Flexibility via Functional-Descriptive Narrative Analysis*

Anton Sevilla-Liu, Kyushu University  
 Catherine Sevilla-Liu, Kyushu University

Jando and Dionne (JCBS 2024) have recently called for the use of qualitative methods in CBS. A. Sevilla-Liu (2023) suggested the concept behind how to use qualitative research, particularly narrative analysis, in a manner that bridges functional and descriptive contextualism. Clients often tell us stories of their struggles. Narrative analysis is particularly compatible to understanding the "act-in-context" because stories are a form of natural language that are fundamentally concerned with agents acting within certain situations with certain motivations. This paper examines the data from 5 subjects (n = 1 to 6 is standard in qualitative research; Willig 2008). They answered both Multidimensional Psychological Flexibility Inventory (MPFI) and gave six stories about their struggles and other processes (cognitive, affective, motivational, attentional, selfing) surrounding their problem, with the use of guided imagery and prompts. This paper will show the actual method of analyzing stories in narrative analysis: plot analysis, motivational themes and rules, characters. The clinical significance of this will be articulated via psychological flexibility (as seen in MPFI), and elaborated via Clinical RFT (Villatte et al., 2016).

- *Indigenous Social and Emotional Wellbeing as a Contextual Model of Psychological Flexibility*

Emily Darnett, Ph.D., Black Dog Institute, University of New South Wales

Psychological flexibility is the central process of Acceptance and Commitment Therapy (ACT), yet its operationalisation remains largely intrapersonal. This presentation advances a theoretical extension: Social and Emotional Wellbeing (SEWB) can be understood as a contextual, relational expansion of psychological flexibility rather than an alternative cultural model. Drawing on empirical literature, Aboriginal-led SEWB frameworks, and practice-based examples from community settings, I will demonstrate how flexibility operates across collective, cultural, and systemic domains.

Together, we will explore how processes analogous to acceptance, values-guided action, and committed behaviour manifest at relational (e.g., kinship obligations, collective identity), cultural (e.g., connection to Country, Lore, and Elders), and systems levels (e.g., service governance, consent practices). This reframing positions flexibility as a multi-level process shaped by historical, structural, and ecological contingencies. Attendees will leave with a theoretically grounded, clinically applicable framework for conceptualising psychological flexibility beyond the individual, supporting ACT practice, research, and training in culturally responsive and systemically informed contexts.

- *Gambling and Escape from Emotions: A Multidimensional Study in Cyprus*

Klavdia Neophytou, Ph.D., University of Cyprus  
 Marios Theodorou, Ph.D., University of Cyprus  
 Tonia Flery Artemi, Ph.D., University of Cyprus  
 Georgia Panayiotou, Ph.D., University of Cyprus

Recent evidence identifies escape and emotion management motives as drivers of problem gambling, beyond excitement and reward seeking. Using a survey of regular gamblers in Cyprus, we report findings across studies examining the role of distress and emotion regulation in gambling harm. Study 1 (N=3412) showed co-occurrence of gambling and substance use (SUDs). Emotion regulation difficulties correlated with gambling severity for both gambling-only and gambling plus SUDs participants, especially emotional nonacceptance and low awareness. Study 2 (N=31347) documented gender differences in gambling patterns, however emotional coping motives strongly predicted gambling severity for both men and women. Study 3 (N=3350) showed depression-related emotional distress predicted gambling while emotion regulation difficulties in the form of nonacceptance mediated the distress-gambling pathway for men but not women. Results highlight that emotion regulation, especially involving not accepting and not being in contact with emotions drives the use of gambling as maladaptive coping. This suggests a malleable intervention target, via improvement of adaptive coping with distress through acceptance and non-avoidance of emotions.

Educational Objectives:

1. Apply multi-level psychological flexibility framework to a clinical, research, or training scenario by designing one modification that incorporates relational, cultural, or systemic variables into assessment, formulation, or intervention planning.
2. Analyze how psychological flexibility influences the outcomes of self-reflection, distinguishing between adaptive insight and maladaptive rumination.
3. Discuss the importance of psychological flexibility to parenting.

**CEs Available (1.50):** [CEs for Psychologists](#)

**168. Navigating Chronic Pain in Psychotherapy: Stepped Care, Integrated Primary Care, and Third-Wave Interventions**

**Symposium** • 10:45 - 12:15 PM

Translation: Not available

Components: *Case presentation, Conceptual analysis, Literature review*

Categories: [Health / behavioral medicine](#), [Chronic Pain](#)

Target Audience: *Beginner, Intermediate, Advanced*

**Location: C302**

Discussant: Alexandros Maragakis, Ph.D., The Chicago School  
 Caroline A Lucy, M.A., Eastern Michigan University  
 Zoe K Lapham, M.S., Eastern Michigan University  
 Efthymia Orkopoulou, M.Sc., Greece-Cyprus ACBS Chapter

Global estimates suggest that about 20% of adults, totaling 1.5 billion people, experience chronic pain. The experiences of chronic pain pose unique challenges to patients, providers, and the healthcare system more broadly. Individuals with chronic pain have often tried numerous treatments for managing pain, but with limited or short-term benefit. In the absence of satisfactory medical care,

patients may engage in behaviors that function to avoid further pain, fear, and health-related stress, resulting in increasingly restricted lives, decreased engagement in values-consistent behavior, and an overall reduced quality of life. Thus, it is essential to consider novel ways to incorporate best-practices for mental health treatment into chronic pain management to meet the needs of this population. This symposium aims to provide clinicians with a coherent, process-based, and trauma-informed framework for understanding and treating chronic pain in outpatient psychotherapy. In discussing stepped care, integrated primary care, and third-wave interventions for chronic pain, this symposium will highlight how contextual behavior science can be used to improve chronic pain treatment at multiple levels.

- *Getting in Step: Utilizing Stepped Care to Individualize Chronic Pain Treatment Within Contextual Behavior Science*

Caroline Lucy, Eastern Michigan University

Across individuals with chronic pain, there can be tremendous variation in terms of the pain source, history, severity, functional impact, coping, and experiences with prior multimodal pain treatments. Thus, there is no one-size-fits-all approach to treating chronic pain, and treatment, including psychotherapy interventions, need to be tailored to the individual. Stepped care provides a framework for organizing and offering a variety of treatment options (e.g., self-guided, group, individual, or more intensive interventions) based on an individual's needs, symptoms, severity, and preferences. In this model, progress is closely monitored and treatment can be stepped up or down to a more or less intense intervention based on an individual's response to an initial treatment. This presentation will discuss a stepped-care approach to chronic pain, including considerations for tailoring treatment, monitoring progress, and deciding when to step interventions up or down. In addition to reviewing the literature on stepped care approaches for chronic pain, this presentation will highlight how such an approach can be optimized using contextual behavior science.

- *Getting to Integrated: How Integrated Primary Care Systems can Show-up for the Challenges Patients with Chronic Pain Experience in Healthcare*

Zoe Lapham, Eastern Michigan University

Patients with chronic pain experience a unique intersection of physical and behavioral health concerns. Both the physiological and psychosocial sequelae of chronic pain pose unique challenges for the healthcare system's ability to provide a positive, holistic care experience and prevent harm related to medical trauma and health-related traumatic stress. This presentation describes how integrated primary care, a novel approach to healthcare, may be able to better meet the needs of patients with chronic pain. A review of the literature is presented on the benefits of integrated primary care for this population, as well as the barriers and facilitators to implementing this innovation in healthcare. Relevant trauma-informed care practices are also explored and discussed to suggest a mechanism for preventing harm in care related to medical trauma and addressing health-related traumatic stress.

- *Creating an Acceptance Shield: An Overview of Third-Wave Interventions in Psychotherapy for Chronic Pain*

Efthymia Orkopoulou, Private Practice

From a contextual behavioral science perspective, psychological treatment of chronic pain requires a shift in therapeutic goals and lens. Rather than focusing solely on symptom reduction, the emphasis is on cultivating the ability to flexibly and effectively navigate a life worth living despite pain and ongoing physical symptoms. Third-wave behavior therapies, including Acceptance and Commitment Therapy (ACT) and Dialectical Behavior Therapy (DBT), offer a process-based framework well suited to this population. Clients are taught to respond to pain and other physical and environmental cues that evoke anxiety, sadness, and other painful psychological experiences mindfully, effectively, and with self-compassion. This presentation will provide an overview of the third-wave psychotherapeutic interventions that may be considered as first-line treatment approaches when supporting individuals experiencing chronic pain and/or who are currently facing challenges navigating the healthcare system. A case presentation will be offered as an example of using a process-based framework with a client with chronic pain and related life challenges, highlighting case conceptualization informed by the ACT hexaflex.

#### Educational Objectives:

1. Explain the multi-dimensional experiences of patients with chronic pain.
2. Identify multi-level approaches to intervention for chronic pain.
3. Integrate trauma-informed approaches in management for patients with chronic pain

**Thursday, 16 July (Morning)**

		8:00 - 8:50	9:00 - 10:15	10:15 - 10:45	10:45 - 12:00	12:00 - 13:15
ROOM			PLENARY		SESSIONS	
<b>Merieux</b>	Level: 0		<input checked="" type="checkbox"/> 1. The Place of Poetics in Contextual Behavioral Science - K. Wilson ( <i>Int. Merwin</i> ) (Plenary)		<input checked="" type="checkbox"/> 2. The Art of ACT - Jo. Forsyth*, Ja. Forsyth (Workshop)	L U N C H
<b>Gounot</b>		Psychedelic SIG Meeting - T. Morris			<input checked="" type="checkbox"/> 3. Enhancing Psychological Flexibility: Integrating Psychotherapy and Psychedelics - Pilecki, T. Morris, Yi, Luoma, Secară, Armstrong (Panel)	
<b>Barrot</b>	On Becoming a Peer Reviewed Trainer - Lucas & Steinkopff			4. Meeting the challenge of training ACT/CBS interventions to competency at scale worldwide - S. Wright, Walser, Tani, Lasprugato, Manzione (Panel)		
<b>Mouterde</b>	German Speaking Chapter Meeting (DGKV) - Bertacco & Nebel			<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> 5. Mourning a loss &amp; rebuilding a future: Using the Dual Process Model alongside CBS therapy with grief &amp; other losses - Lemay, Owen* (Workshop)</li> </ul>		
<b>Weil</b>	Level: 1		Plenary Overflow Room	T E A	<input checked="" type="checkbox"/> 6. How to ADHD Compassionately: Authentically Integrating ACT and CFT with ADHD Adolescents - C. Fraser, Cassidy* (Workshop)	
<b>Aristote</b>			Plenary Overflow Room		<input checked="" type="checkbox"/> 7. Less Talk, More ACT: Bringing A Deliberate Practice Method into Supervision - Pegrum*, Lucas*, Bradley (Workshop)	
<b>Perroux</b>			Plenary Overflow Room		<input checked="" type="checkbox"/> 8. Leveraging Digital Technology to Improve Population Health: Developing and Beta-Testing Interventions - Merwin, Kelly, Bricker, Levin (Symposium)	
<b>Aubert</b>		Applying ACT to Addictions SIG Meet and Greet - Waters & England			9. Values-Based Interpersonal Skills in Prison: An ACT-Informed Experiential Protocol - Petridou, Christodoulou (Workshop)	
<b>Maldiney</b>		GSRD SIG - Levinson		C O F F E E	10. Getting into the Body to Get Out of the Mind: Embodied Presence and Safety as a Pre-Introduction to Acceptance - Vogel, Saban Bernauer (Workshop)	
<b>C125</b>		Romanian Chapter Meeting / Întâlnirea filialei românești - Nicolescu			<input checked="" type="checkbox"/> 11. ACTive Compass Crafting: Navigating Core Values through Emotions and Embodied Awareness - Theau (Workshop)	
<b>C154</b>		Türkiye Chapter Meeting - Celik & Terzioğlu			12. Neuro-ACT: Adapting ACT for Neurorehabilitation - Ladwig, Patchwood, Bogosian (Symposium)	
<b>C225</b>	Level: 2	Climate Justice and Action SIG - Meet the SIG! - Villanueva, Guthrie, Ramel		T E A	13. From Classroom to Career: Building Resilient Learners - Asikainen, Gorinelli, Kämper, Budziszewska (Symposium)	
<b>C254</b>		Greece - Cyprus Chapter: A new Mission - Sanida & Vasiliou			14. Understanding and Treating Appearance Related Distress: Mechanistic and Applied Perspectives From CBS - Vasiliou, Kyriakou, M. Wilson, Thompson (Symposium)	
<b>C302</b>	Level: 3	ACBS Brazil Chapter Meeting - de Azevedo Nasser			15. When Being Nice Isn't Enough: Deliberate Practice of Challenging Interventions - Domurat, Steinkopff* (Workshop)	

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**Thursday, 16 July (Afternoon)**

		13:15 - 14:45	14:45 - 15:15	15:15 - 16:30	16:30 - 16:45	16:45 - 17:45
ROOM		SESSIONS		SESSIONS		Plenary
<b>Merieux</b>	Level: 0	☑ 16. Mastering Creative Hopelessness: From Concept to Compassionate Clinical Skill - Kjelgaard*, Walser* (Workshop)	C O F F E E  T E A	☑ 30. Trauma, the Therapeutic Relationship, and the Bridge between Psychoanalytic and Contextual Behavioral Traditions - S. Hayes, Walser, Fonagy, Turrell (Panel)	B R E A K	☑ 43. Epistemic trust and trauma: Pernicious impact and therapeutic solutions, a mentalization based treatment approach - Fonagy (Int. S. Hayes) (Plenary)
<b>Gounot</b>		☑ 17. Advancing Personalised Care in Chronic Health Conditions: Idionomic process-based clinical Research Applications - Vasiliou, Merwin, McCracken (Symposium)		☑ 31. Self and Identity in Context: Advances in ACT and RFT on the Construction, Function, and Transformation of the Self - McHugh, K. Wilson, Ebert, Robb, Stapleton (Panel)		
<b>Barrot</b>		18. Stop Averaging Us Away: When Neurodivergent "Noise" Is the Signal - Lawson, Cassidy, Stapleton, Swadling, Levin (Panel)		32. ACT in Practice: Clinical Creativity and Contextual Adaptation - Fraignac, Hubert, Sez nec, D'Hostingue, Bouladou (Panel)		
<b>Mouterde</b>		☑ 19. Applications of CBS in Education - Hooper, Gillard, L. Hayes, Atkins, Cogan (Symposium)		• ☑ 33. The Self in All Its States - Leurent, Stinus, Pellerin, Ducasse (Symposium)		
<b>Weil</b>		☑ 20. The Relational Matrix – A Relationship Journey Through the Four Quadrants - Baran (Workshop)		☑ 34. Measuring Psychological Flexibility in High Conflict Parents to Inform Treatment Decisions - Rochester (Workshop)		
<b>Aristote</b>	Level: 1	☑ 21. <b>PART 1:</b> FAP: Creating Intense and Curative Therapeutic Relationships - Tsai, Parker, Kuei*, Steinkopff*, Secară (Workshop)		☑ 21. <b>PART 2:</b> FAP: Creating Intense and Curative Therapeutic Relationships - Tsai, Parker, Kuei*, Steinkopff*, Secară (Workshop)		Plenary Overflow Room
<b>Perroux</b>		• ☑ 22. Who Accepts, Who Acts? Self-Processes in ACT for Suicidality and Borderline Personality Disorder - Ducasse (Invited)		☑ 35. Navigating the Masculinity Hexaflex: Shaping Flexibility Among Polarized Masculinities - Sisti*, Pilecki, Manetti-Cusa (Workshop)		Plenary Overflow Room
<b>Aubert</b>		23. Contextual Functional Analysis: Functional Analysis More Adequate to the Challenge of Human Condition - Kleszcz (Workshop)		36. Advancing Process-Based Intervention Science Through AI, Virtual Reality, and Digital Therapeutics - Rasanen, Tempchin, Hernández-López, Sairanen, Lamprou, Karekla (Symposium)		B R E A K
<b>Maldiney</b>		24. Close Isn't Good Enough: Precision Matching Your Metaphors to Hexaflex Targets - Szabo*, Jowett Hirst (Workshop)		37. Responding to Nihilism: A CBS Pathway - Dewar (Workshop)		
<b>C125</b>		25. Clinically addressing Emotional Dysregulation in adolescents in times of global polycrisis from ACT and DBT - Principi, Silva, Piorno (Workshop)		38. Mapping Behavioral Change. Applying ACT4life: A Visual, Embodied Approach to Process-Based Case Formulation - Samsen (Workshop)		
<b>C154</b>		26. Maps for Difficult Journeys: ACT and Non-Conventional Interventions Across Loss, Institutions, and Creativity - Presti, Miselli, Deledda, Casetta, Napolitano, Prevedini, Lo Savio (Symposium)	39. From Laboratory to Clinic: Experimental and Translational Studies on Metaphor Processes in ACT - Kovac, Galli, Ruiz, Törneke (Symposium)			
<b>C225</b>	Level: 2	27. New Perspectives on Anxiety in ACT and Process-Based Therapy - Jo. Forsyth, Tulbure, Ribeyron, Fernandes, Karadere, Kahyaoglu, Xin (Symposium)	40. Flex for the Planet! - Ramel, Nalbant, Delemere, Neuroth, Alonso Valdivia (Symposium)			
<b>C254</b>		28. Addressing the Global Mental Health Burden of Dementia Caregiving: International Advances in ACT - Kishita, Atefi, Fauth, Gallego-Alberto (Symposium)	41. Helping Neurodivergent Clients Explore the Value of Connection Within Romantic and Sexual Relationships - Farrell (Workshop)			
<b>C302</b>	Level: 3	29. How to Be (Un)Happy: Rigid Flexibility and Other Paradoxes of ACT - Domurat, Hyla-Zajac (Workshop)	42. Menopause as Transition: A Practical ACT and Compassion-Focused Approach - Kempe, Leboeuf (Workshop)			

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**Friday, 17 July (Morning)**

	8:00 - 9:00	9:00 - 10:15	10:15 - 10:45	10:45 - 12:00	12:00 - 13:15	
ROOM		SESSIONS		SESSIONS		
<b>Merieux</b>	Level: 0	<input checked="" type="checkbox"/> 44. Progressing Research on PBT: Discussing Challenges and Lessons Learned - Levin, S. Hayes, Gloster, McCracken, Arch (Panel)	C O F F E  T E A	<input checked="" type="checkbox"/> 58. Punishment as Process in Clinical Work: A Functional Contextual Approach in ACT - O'Connell*, Walser* (Workshop)	L U N C H	
<b>Gounot</b>		<input checked="" type="checkbox"/> 45. At the Heart of Pain: Therapist Psychological Flexibility in Psycho-Oncology Practice - Ulusoy, Ari (Workshop)		<input checked="" type="checkbox"/> 59. Let's See Where It Takes Us: Artist and Therapist Journeys as Unfolding Interactions of the Interbehavioral Field - Parrott Hayes, K. Wilson, Waite, Fryling (Panel)		
<b>Barrot</b>		46. CBS as a Design Framework for Artificial Intelligence - Johansson, Kemani (Panel)		60. From Struggle to Vitality: How ACT Can Help People with Cancer - Martin, Arch, Bricker, Gregg, Zacharia, Karekla (Panel)		
<b>Mouterde</b>		<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> 47. Agency &amp; Mental Health: Enactive Perspectives, Sensory Devices, and Mindfulness - Trousselard, Strub, Nohales, Adrien, Moissonnier (Symposium)</li> </ul>		<input checked="" type="checkbox"/> 61. Advances in RFT Research: Relational Training, Hierarchical Framing, and Rule-Governed Behavior - Ruiz, Villarreal, Rodríguez-Valverde, Stapleton, Hernández-López (Symposium)		
<b>Weil</b>		<input checked="" type="checkbox"/> 48. Self-as-Context: From a Head-Scratching Concept to Confident Clinical Practice - Ebert* (Workshop)		<input checked="" type="checkbox"/> 62. Interoception: One Process to Rule Them All? - Kemp (Workshop)		
<b>Aristote</b>		<input checked="" type="checkbox"/> 49. The Matrix with Teens - Pressman, M. Morris*, Jaye (Workshop)		<input checked="" type="checkbox"/> 63. Implementing exposure for OCD and anxiety disorders from a psychological flexibility model - Twohig*, E. Lee (Workshop)		
<b>Perroux</b>		<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> 50. ACT in Nature - Stevenson (Workshop)</li> </ul>		<input checked="" type="checkbox"/> 64. ACT based psychological interventions for global use: key lessons from the work of the World Health Organization - Carswell (Invited)		
<b>Aubert</b>		51. The dog ate my homework!: Taking a FAP-informed approach to DBT accountability strategies - Fox, Trevenen (Workshop)		65. Breaking the Fourth Wall: Increasing Precision in ACT with Bidirectional Functional Analysis - Lasprugato*, Lucas* (Workshop)		
<b>Maldiney</b>		52. It's EPPC! Introducing an ACT-informed Model of Therapeutic Change in Psychedelic-Assisted Therapy - Pilecki, T. Morris, Luoma* (Workshop)		66. Enhancing Team Working: Using ProSocial to increase team effectiveness in Learning Disability and support services - Jackson Brown, Oliver, Blaauwbroek (Workshop)		
<b>C125</b>		53. Cultivating Psychological Flexibility in Behavioral Addictions: An ACT-Informed Approach - Patterson (Workshop)		67. Brief ACT for Deep Work: Building Provider Resilience Through Focused Acceptance and Commitment Strategies - Rutledge, Holtz (Workshop)		
<b>C154</b>		54. When Life Is Rough: How Psychological Processes Shape Stress Responses, Valued Behavior, and Mental Health - Schmid, Gonçalves, Brogna, Corbisiero, Presti (Symposium)		68. ACT Together with Persons with Disabilities - Miselli, Napolitano, Lo Savio, Zonza, Tani (Symposium)		
<b>C225</b>		Level: 2		55. Equity and Inclusion in Context: CBS Applications Across Diverse Communities - Farrell, Bhullar, Stapleton, Lawson, McHugh (Symposium)		69. What's Happening in the Room? From Microanalytic to Multiscale Analyses of In-Session Change - Pereira, Andres-Lopez, Ivan, Gevorkian, Callaghan (Symposium)
<b>C254</b>				56. Co-Creating the Future of ACBS - O'Connell*, Robinson*, Merwin* (Workshop)		70. Growing Minds, Flexible Futures: Process-Based Approaches to Youth Development - Gadaire, Jacques, Aydın, Langenskiöld, Alves (Symposium)
<b>C302</b>		Level: 3		57. Rethinking Personalization: From Group Averages to Idiographic Processes in Psychological Intervention - Gulamoydeen, Larsson, Borner (Symposium)		71. Exposure with Purpose: Implementing ACT-informed Exposure for Trauma-related Distress - Mundy*, Gallo (Workshop)

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**Friday, 17 July (Afternoon)**

		13:15 - 14:45	14:45 - 15:15	15:15 - 16:30	16:30 - 16:45	16:45 - 17:45
ROOM		SESSIONS		SESSIONS		Plenary
<b>Merieux</b>	Level: 0	☑ 72. <b>PART 1:</b> From Processes to Precision: Live Case Conceptualization Using PBT and Mindgrapher Diagnostics - Jansen, S. Hayes* (Workshop)	C O F F E E	☑ 72. <b>PART 2:</b> From Processes to Precision: Live Case Conceptualization Using PBT and Mindgrapher Diagnostics - Jansen, S. Hayes* (Workshop)	B R E A K	☑ 99. ACT Across Contexts: Insights from 20 Years of Anxiety and Cancer Intervention Research - Arch (Int. Levin) (Plenary)
<b>Gounot</b>		☑ 73. The client and therapist's behaviors as a context of change: The how, the direction, and the processes involved - Luciano, Rodriguez-Valverde, K. Wilson, Coyne, Presti, Törneke (Panel)		☑ 86. Power, Harm, and the Dehumanization of Women: What Contextual Behavioral Science Can Do - Walsler, Coyne, Orsini Marcondes, M. Morris, T. Morris, Costello Whooley (Panel)		
<b>Barrot</b>	Level: 1	74. Bridging to Innovate: Advancing Science and Practice with the ACBS Scientific Strategic Council - Fung, Arch, Gaudiano, Chong, Pistorello, Martin, Payne, Ruiz, Bricker (Panel)	T E A	87. Focused, Flexible, Brief: Processes of Change Across Contexts and Populations - Rutledge, Holtz, Tempchin, Weber, Barry, Brandolin, Velasquez, Donovan (Panel)	B R E A K	Plenary Overflow Room
<b>Mouterde</b>		☑ 75. Relational Responding in Silico: AI and CBS - Jackson Brown, Raemaekers, Szabo, O'Sullivan, Duran (Symposium)		☑ 88. Planting a Digital Garden: Lessons Learned on Tending and Scaling ACT Digital Interventions in the Real-World - Dalrymple, Levin, Bricker, Kingston (Symposium)		Plenary Overflow Room
<b>Weil</b>		☑ 76. Conversing, Connecting, & Living Values with Others: An Interpersonal Behavior Therapy Framework for Relating - Callaghan (Workshop)		☑ 89. Using ACT to Help Parents Stay Open, Aware, and Engaged - Pressman, Martin* (Workshop)		Plenary Overflow Room
<b>Aristote</b>		☑ 77. Compassion Focused ACT in the context of Terminal Illness: Impact on self and associated challenges for therapists - Gregg*, Brock* (Workshop)		☑ 90. Metaphors, Fire, and Other Dangerous Things: Embodied Experience in the Therapy Room - Secară, Skinta*, Ivan (Workshop)		Plenary Overflow Room
<b>Perroux</b>		• ☑ 78. Enaction, Multisensory Stimulation, and Military Health: Toward an Integrated Understanding of Human Adaptation - Trousselard (Invited)		☑ 91. ACT Across the Cancer Continuum: Feasibility, Outcomes, and Mechanisms - Dudek, Merwin, Arch, Yusuf, Karekla (Symposium)		Plenary Overflow Room
<b>Aubert</b>		79. Process-Based Pathways From Rejection Sensitivity to Authentic Connections - Kemp (Workshop)		92. Resistance, Avoidance, Frustration! Responding to Problems In-session with FAP Principles - Callaghan, Pereira (Workshop)		B R E A K
<b>Maldiney</b>		80. Yes, and: Enhancing your ACT with Improv - M. Morris*, Howard, Jaye, Hulser-Morris (Workshop)		93. Meaning in Music: Experiential Listening and Reflection for Psychological Flexibility - D.J. Moran*, J. Wright* (Workshop)		
<b>C125</b>	81. We Literally Told Them: What's Going Wrong in Gen Z Communication in Higher Education (and How to Fix It) - Ehrnstrom, Gonzalez-Cunningham (Workshop)	94. Learning into reflexive practice - Using process based Reflexive practice in Supervision - Lindsay (Workshop)				
<b>C154</b>	82. Performing Under Pressure: Supporting Wellbeing in Demanding Roles - Borges, Musanje, Rosenrauch, Radu, Secară (Symposium)	95. Applied RFT for Generative Relational Language Training - Stapleton, Kirsten, Sivaraman, Gondat (Symposium)				
<b>C225</b>	83. Ignite 1 - Meason, Sankaran, Simmons, Abbey, Sheppard, Gajiev, McGovern, Piorno, Patton, Donovan, Barbosa, Barry, Giordani, Broussard, E. Morris (Ignite)	96. Understanding Autism Across Roles: Individuals, Siblings, and Caregivers - Lawson, Nguena, Bonfim, Gadaire (Symposium)				
<b>C254</b>	Level: 2	84. The Health Mosaic: Behavioral Processes for Wellbeing - Mellen, Palmer, Budziszewska, Feldin, Ari, Skajius Ruiz (Symposium)	T E A	97. Beyond the Headset: ACT-Informed VR Exposure for Enhancing Psychological Flexibility in Specific Phobias - Neofotistou, Tzola (Workshop)	B R E A K	
<b>C302</b>		85. The Art and Science of Supervision - S. Wright, Czupala, Whitfield, Canpolat, Templin, Darnett (Symposium)		98. Working with Acceptance in Couples Therapy: Process-Based Interventions in Interpersonal Contexts - Nalbant, Yavuz* (Workshop)		

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**Saturday, 18 July (Morning)**

		8:00 - 8:50	9:00 - 10:15	10:15 - 10:45	10:45 - 12:00	12:00 - 13:15
ROOM			PLENARY		SESSIONS	
<b>Merieux</b>	Level: 0		☑ 100. Embodied Flexibility: How the Body Expands the Horizon of CBS - O'Connell ( <i>Int. Walser</i> ) (Plenary)		☑ 101. When All the Books are Gone: Poetics in Human Behavior Change - Coyne*, K. Wilson* (Workshop)	
<b>Gounot</b>	Level: 1	Bijeenkomst voor Vlaamse en Nederlandse ACT/RFT/enz enthousiastelingen - A-Tjak & Hohmann	Plenary Overflow Room	C O F F E  T E A	☑ 102. Artificial Intelligence in Contextual Behavioral Mental Health Interventions: Clinical and Research Priorities - Bricker, Johansson, Kemani, Lappalainen, van Kolfsoorten, Chong, Carswell, Martin (Panel)	L U N C H
<b>Barrot</b>					103. ACT and Psychosis Recovery: International Perspectives on Translating Research to Practice in Clinical Settings - Lapidos, Gaudiano, E. Morris, Corthouts, Terzioğlu (Panel)	
<b>Mouterde</b>		Brief Interventions SIG Meeting - Holtz & Rutledge			☑ 104. From Symptoms to Processes: Current Research on PBT - Presti, Oppo, Minutola, Gloster, Georgiou, Larsson (Symposium)	
<b>Weil</b>					☑ 105. ACT Applied Inward: Therapist Processes in High-Impact Clinical Work - Wong, Walser* (Workshop)	
<b>Aristote</b>					☑ 106. Teaching Adolescents to Break the Rules and Build Healthy Relationships - Turrell*, Rossi* (Workshop)	
<b>Perroux</b>					☑ 107. "Even if I am with the nicest person; I am on my guard": Using CBS to Enhance Interpersonal Safety and Trust - Kingston (Invited)	
<b>Aubert</b>		UK & ROI ACBS Chapter Meeting - McHugh, Oliver, Lavelle			108. Beyond Technique: Therapist Sensibility and Psychological Flexibility as a Relational Process - Lucas*, O'Connell* (Workshop)	
<b>Maldiney</b>	Trauma SIG - Gallo & Neal	C O F F E  T E A	109. Harnessing Your Clinical Interventions by Targeting Hierarchical Framing - Ruiz, Gil-Luciano (Workshop)	L U N C H		
<b>C125</b>	Australia & New Zealand Meet-Up - ANZACBS Chapter - E. Morris		110. RFT in Clinical Supervision: Training Case Conceptualization Skills - Charlton, N. Lam (Workshop)			
<b>C154</b>	Psychosis SIG - Lapidos		111. Compassionate Care in the Perinatal Period - Berrett, Xavier, Astefanei, Tortell Milhano, Waters, Kang (Symposium)			
<b>C225</b>	Level: 2		Latin-American Culture and CBS SIG Meeting - Alzate & Granados		112. From Isolation to Connection: Group-Based Pathways to Resilience - Guy, Ari, Arslantaş, Swee, C.Y. Lam, Sankaran, Narayan (Symposium)	
<b>C254</b>	ACBS New England Chapter: Nurturing a Community with Heart - Coyne & White		113. Ignite 2 - Broussard, Amadasu, Gevorkian, Kyriakou, García-García, Wilczynski, Leithuisser, Gomez, Guthrie, Rodriguez, Hagerman, McGuire, Kaplan (Ignite)			
<b>C302</b>	Level: 3		FAP SIG Meeting - Maitland		114. Understanding Shame, Perfectionism, and Catastrophic Performance Failure Through CBS - Jones, Kohli, Turakka, Aguilar (Symposium)	

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**Saturday, 18 July (Afternoon)**

		13:15 - 14:45	14:45 - 15:15	15:15 - 16:30	16:30 - 16:45	16:45 - 17:45					
ROOM		SESSIONS		SESSIONS		Plenary					
<b>Merieux</b>	Level: 0	<input checked="" type="checkbox"/> 115. Body-related shame and the transformative power of perspective taking - LeJeune*, Pegrum* (Workshop)	C O F F E  T E A	<input checked="" type="checkbox"/> 129. ACT Like Nobody's Watching: Women Practicing Psychological Flexibility from the Inside Out - M. Morris*, Costello Whooley*, T. Morris, Coyne*, Jaye (Workshop)	B R E A K	<input checked="" type="checkbox"/> 142. Mental Health and Psychosocial Support in Large Scale Humanitarian Settings: Lessons Learned - van Ommeren (Int. Karekla) (Plenary)					
<b>Gounot</b>	<input checked="" type="checkbox"/> 116. Changemakers beyond capitalism: How to engage in the public square toward what matters now - Chi, Atkins, L. Hayes, McKinnis, Prudenzi, Ramel (Panel)	<input checked="" type="checkbox"/> 130. Challenges and opportunities with self-help interventions: Findings from research and dissemination efforts - Levin, Bricker, Carswell, Chong, Lappalainen (Panel)		B R E A K							
<b>Barrot</b>	117. Making Sense and Making Choices: Integrating ACT and Existential Practice - Lucas, Martsyniak-Dorosh, Gregg, Owen, Walsler (Panel)	131. Addressing Black Pain: Applying Contextual Science to Race-Based Stress - Payne, Simmons, Skrine Jeffers (Panel)				B R E A K					
<b>Mouterde</b>	<input checked="" type="checkbox"/> 118. Relationships in Therapy and in Life - Fryling, Maitland, Kohlenberg, Parrott Hayes, Truitt (Symposium)	<input checked="" type="checkbox"/> 132. The Body in ACTION: Client and Therapist Toward Embodied Flexibility - Louis, Bourcier, Dupuis Maurin, Marmuse (Symposium)					B R E A K				
<b>Weil</b>	<input checked="" type="checkbox"/> 119. Thriving Parent, Thriving Child: Creating Contexts for children to Flourish with Psychologically Flexible Parenting - Gillard, Coyne* (Workshop)	<input checked="" type="checkbox"/> 133. The Power of Language: A Clinician-Friendly Experiential Introduction to RFT - Lasprugato* (Workshop)						Plenary Overflow Room			
<b>Aristote</b>	<input checked="" type="checkbox"/> 120. Bringing FAP to the General Public: Societal Change through the Awareness, Courage & Love Global Project - Tsai, Funke, Assaloni, Sousa-Filho, Ivan, Silveira (Workshop)	<input checked="" type="checkbox"/> 134. The Space Between and Within Us: Mindfulness and Movement within FAP - Fulder Heyd, Kuei* (Workshop)						Plenary Overflow Room			
<b>Perroux</b>	<input checked="" type="checkbox"/> 121. Regenerative IMP'ACT: Inner Resources Development for Outer Transformations, Toward Bienvivance - Gendron (Invited)	<input checked="" type="checkbox"/> 135. Assessing therapist skillfulness - approaches to measuring knowledge, fidelity and competency - Keinonen, White, McCracken, M. Fraser (Symposium)						Plenary Overflow Room			
<b>Aubert</b>	122. <b>PART 1:</b> Using Metaphor in Contextual Therapies - Törneke* (Workshop)	122. <b>PART 2:</b> Using Metaphor in Contextual Therapies - Törneke* (Workshop)						B R E A K			
<b>Maldiney</b>	123. Hierarchical Framing and Psychological Flexibility: Neurophysiological, Experimental, and Clinical Process Evidence - Ruiz, Larsson, Presti, Rodríguez-Valverde, Luciano, Gil-Luciano (Symposium)	136. A Balancing ACT: Using Intentional Self-Disclosure to Model Psychological Flexibility - Kjelgaard* (Workshop)							B R E A K		
<b>C125</b>	124. Staying Present in the Presence of Suicide: An ACT Approach to High-Risk Clinical Work - İlkay, Büyükkösz, Kayaalp Pehlivan (Workshop)	137. Applying Process-Based Therapy using a Single Case Design Approach - Georgiou, Kyriakou, Karekla* (Workshop)								B R E A K	
<b>C154</b>	125. From threat to safeness: Trauma Sensitive Yoga and compassion-focused therapy to cultivate flexibility and presence - Swee, Gallo (Workshop)	138. Psychedelic-Assisted Therapy and CBS - Luoma, Davis, Armstrong, Pilecki, Ivan, LeJeune (Symposium)	B R E A K								
<b>C225</b>	126. Psychological Flexibility and Social Processes in Paranoia & Psychosis: CBS Perspectives - E. Morris, Kingston, Radeka, Tierney-Sutton, Murros (Symposium)	139. Cultivating Health & Wellbeing: Single-Case Evidence for ACT in Chronic Illness and Occupational Health Contexts - Lavelle, O. Moran, Stapleton, Farrell (Symposium)		B R E A K							
<b>C254</b>	127. Ignite 3 - Joshi, Sauve, Simonetta, Eickleberry, Payne, Tobe, da Silva, Güneri, Freymann, Salyer, Farrar, Uphoff, Geda (Ignite)	140. Roll for Initiative: Facilitating Social Skills and Peer Connection via Tabletop Role-play Games - Emery (Workshop)			B R E A K						
<b>C302</b>	128. Reimagining Care: AI, VR, and the Digital Future of ACT - Chong, Yau, Liu, Carvalho, Christodoulou, Chan, Aydin (Symposium)	141. ACT for Body Grief in Chronic Illness: "Being a Body" When Your Body Won't Let You Be - Guthrie, Gorniak (Workshop)				B R E A K					

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 \* = Peer Reviewed ACT Trainer

## Sunday, 19 July (Morning)

	8:00 - 8:50	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15
ROOM	SESSIONS			SESSIONS
<b>Gounot</b>	Social Work SIG Gathering 2026 - Simmons	☑ 143. Neurodivergence From the Inside Out: Understanding and Nurturing Autistic and ADHD Neurotypes - Cassidy, Stapleton, McGovern, Amadasu, San, Kemp (Panel)	C O F F E  T E A  C O F F E  T E A	☑ 156. Finding consensus: what counts as CBS supervision? - Czupala, E. Morris, Manduchi, Lucas, Bradley, Pegrum (Panel)
<b>Barrot</b>	Sport, Health, and Human Performance SIG Committee Meeting - Yoshimoto & Szabo	144. Measuring to Listen: Operationalizing Multi-Level Process Tracking in Process-Based Therapy - Fraignac, Basson, Lemaire, Boulet marcou (Panel)		157. Access and Action: A Panel Discussion - Holtz, Rutledge, Daniel-Atutolu, Robinson, Crispiniano Garcia (Panel)
<b>Mouterde</b>	Creando Comunidad Desde la Interculturalidad - Solange	☑ 145. Embracing the Shift: Psychological Flexibility in Action - Maitland, Spencer, Koushiou, Hus, Nyklíček, Davis (Symposium)		☑ 158. Advancing RNT-Focused ACT: Efficacy, Processes of Change, and Novel Applications - Ruiz, Larsson, Rodríguez-Valverde, Gil-Luciano (Symposium)
<b>Weil</b>		☑ 146. Navigating the Minefields of Separated Family Work with Flexibility and Compassion - Rochester (Workshop)		☑ 159. Five Powerful DNA-V Exercises for Helping Young People who are Avoidant of School - Hooper, Gillard, Cogan, Jackson Brown (Workshop)
<b>Aristote</b>		☑ 147. Zooming in: making training and supervision sessions more clinically relevant using video case vignettes - Lemay, Owen*, Sanida, Orkopoulou (Workshop)		☑ 160. "I'll Do It Later": A Process-Based ACT Approach to Procrastination - Dionne* (Workshop)
<b>Perroux</b>		• ☑ 148. Practicing ACT Through Clowning - Seznec, Herremy (Workshop)		☑ 161. Polyvagal-informed Acceptance and Commitment Therapy (PIACT) for Autonomically Attuned Psychological Flexibility - Leonard-Curtin* (Workshop)
<b>Aubert</b>	Supervision & Consultation SIG Meeting - Pegrum	149. Lessons from Contemplative Traditions for ACT: How to Reduce the Use of Mindfulness as Experiential Escape - Skinta* (Workshop)		162. Healing in Context: Adapting ACT for Persistent Trauma in Marginalized Communities - Gallo, Shankar (Workshop)
<b>Maldiney</b>	Children, Adolescents, and Families SIG - McCurry & Gillard	150. Politics and Perspective Taking: Can We Use Our Tools to Bridge Controversial Positions? Let's be bold and talk! - Ebert* (Workshop)		163. Connection Over Perfection: Parenting Around Sex, Bodies, and Identity Using ACT - England (Workshop)
<b>C125</b>	Colombian Chapter Meeting - Alzate	151. From Rage to Reform: Transforming Anger into Concerted and Meaningful Valued Action - Broussard (Workshop)		164. Exposure Therapy for Eating Disorders: A Process-Based, ACT-Informed Approach - DeVille (Workshop)
<b>C154</b>	Women in ACBS SIG - Brandolin, Turakka, Orive	152. Beyond Protocols, Toward Processes: PBT in Action Across Settings and Populations - Oppo, Prevedini, Presti, Deledda, Lo Savio, Casetta, Ierardi, Cerra, Miracolini (Symposium)		165. Exploring Acceptance Through a Clinical Behavioral Analysis Lens: Easy as Pie - Bozza*, Granados-Salazar (Workshop)
<b>C225</b>	Compassion-Focused SIG Meeting and Get-Together - Swee	153. Making ACT Work: Co-Production, Mechanisms, and Implementation in Educational, Clinical, and Occupational Settings - Prudenzi, Hämäläinen, Brandolin, Hughes, Karekla (Symposium)	166. ACT and RFT Approaches to Sport Performance: What's Behind the Wisdom of Lindsey Vonn and Simone Biles? - Inoue, Yoshimoto, Kohli, Szabo (Symposium)	
<b>C254</b>	ACBS Poland - Chapter Meeting - Chełkowska-Zacharewicz & Kleszcz	154. Beyond Talent and Labels: RFT Perspectives on Behavior - Parker, Chełkowska-Zacharewicz, Brunet, Sugita, B. Lee (Symposium)	167. Psychological Flexibility as a Bridge to Relational Harmony - Darnett, Budziszewska, A. Sevilla-Liu, Panayiotou, C. Sevilla-Liu (Symposium)	
<b>C302</b>	La Reunión del Capítulo Argentino de la ACBS - Estevez, Orieta, Piorno	155. Strength in Uncertainty: ACT and Process-Based Approaches for Cancer Patients - Sauer, Tao, Barrault-Couchouron, Ari, Kazalaki, Ulsuoy (Symposium)	168. Navigating chronic pain in psychotherapy: Stepped care, integrated primary care, and third-wave interventions - Lucy, Maragakis, Lapham, Orkopoulou (Symposium)	

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