

ACT2TeenSAD: Preliminary findings from a remotely delivered ACT intervention for adolescent social anxiety



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ACT AS AN ALTERNATIVE APPROACH TO ADOLESCENT SOCIAL ANXIETY

- Social fears and social anxiety disorder (SAD) are highly prevalent and often persistent conditions during adolescence [1], with significant impacts on psychosocial functioning [2].
- ACT (Acceptance and Commitment Therapy) may serve as an engaging and effective alternative to target adolescent social anxiety, by prompting valued actions while accepting anxiety (instead of experiential or behavioral avoidance; [3]).
- ACT has been considered a promising treatment for SAD [4] but research with adolescents is still scarce and limited. No studies have considered delivering ACT remotely to make it more available and acceptable among socially anxious adolescents often reluctant to seek or engage in traditional psychological support [5].

Can a manualized 10 weekly sessions ACT intervention delivered remotely impact on adolescents' social anxiety and psychological inflexibility?

METHOD, MEASURES AND PROCEDURES

Sample

22 adolescents (19 biological females) aged 15 to 18 years old (M = 15,90, SD = 1,09) who received a clinical primary diagnosis of SAD by a trained psychologist using a structure diagnostic interview.

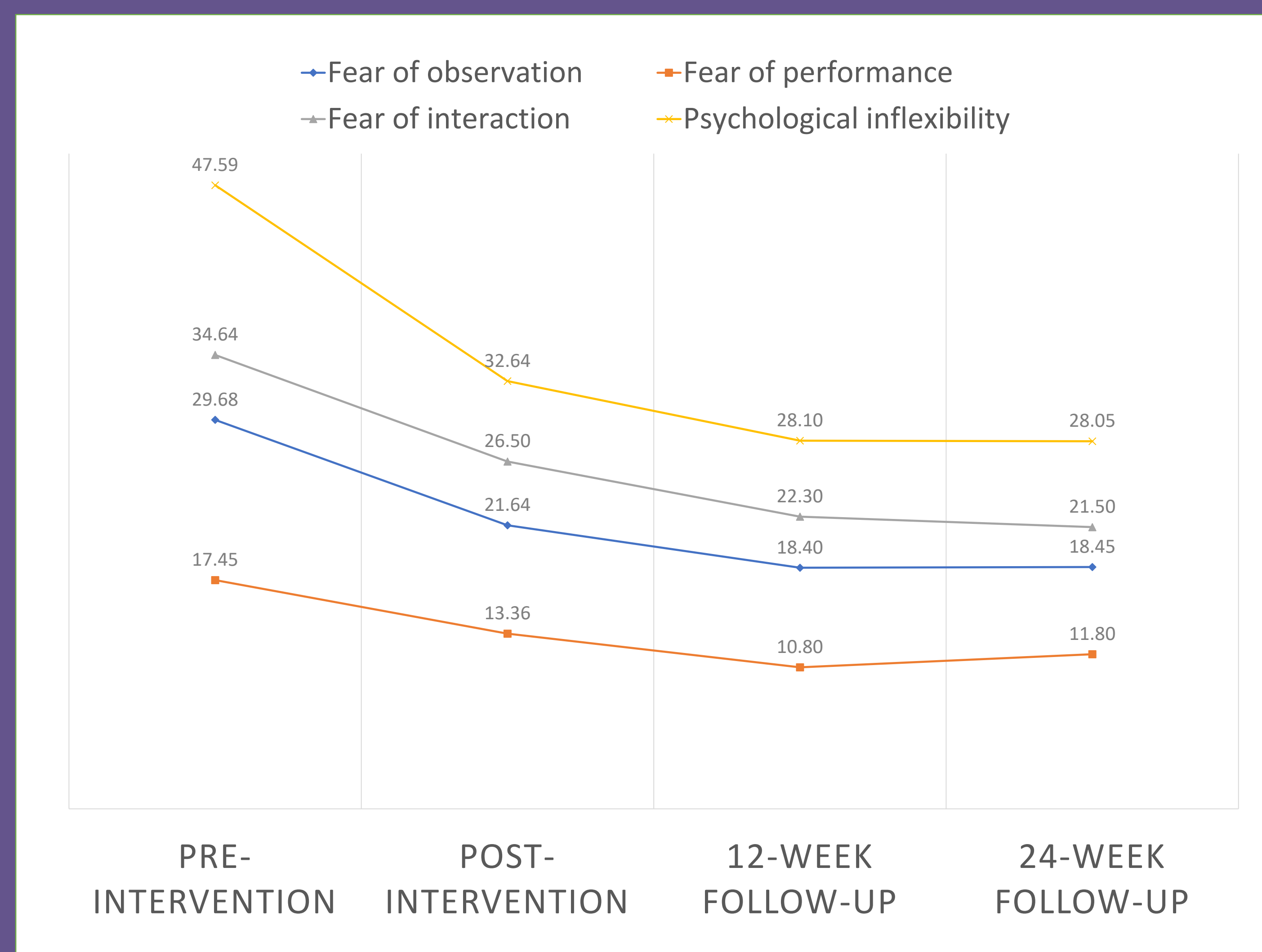
Measures

- Core Social Fears Scale [6] to assess observation ($\alpha \geq .83$), performance ($\alpha \geq .75$), and interaction ($\alpha \geq .81$) social fears.
- Avoidance and Fusion Questionnaire for Youth [7] to assess psychological inflexibility ($\alpha \geq .91$).

Procedures

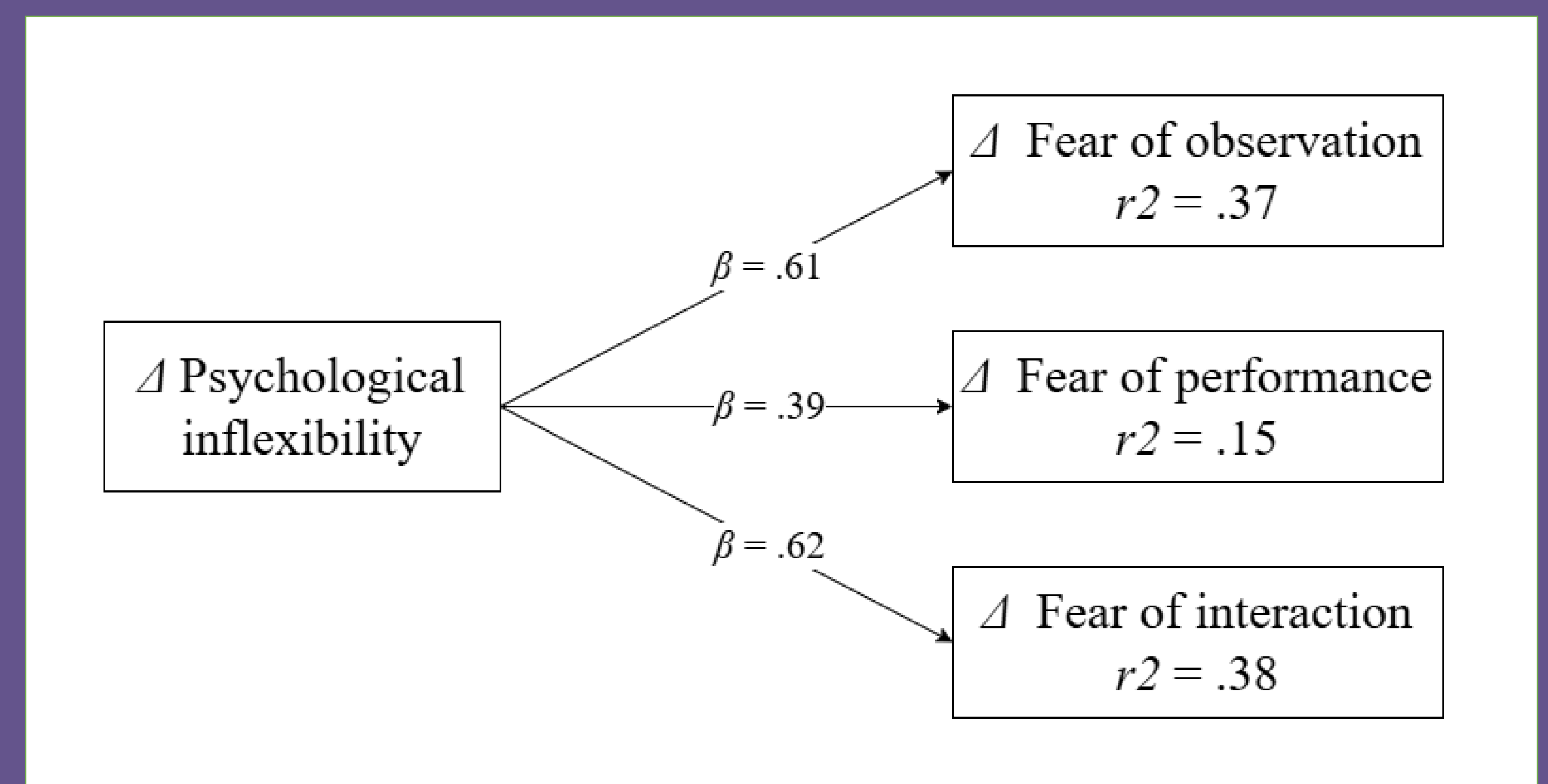
- Pre-intervention assessment;
- 10 ACT-based sessions targeting all six psychological flexibility processes (for more information see [8]);
- Post-intervention assessment;
- 2 monthly booster sessions focusing on sustainability of gains;
- Follow-up assessment at 12 and 24-weeks after intervention ended.

Core social fears and psychological inflexibility significantly decreased at post-intervention and were sustained at 12- and 14-week follow-ups



Fear of observations	$F_{(3, 57)} = 19.67, p < .001, \eta_p^2 = .51$
Fear of performance	$F_{(3, 57)} = 16.39, p < .001, \eta_p^2 = .46$
Fear of interaction	$F_{(3, 57)} = 16.18, p < .001, \eta_p^2 = .46$
Psychological inflexibility	$F_{(3, 57)} = 16.59, p < .001, \eta_p^2 = .47$

Changes in psychological flexibility from pre- to post-intervention significantly explained changes in observation and interaction core social fears from pre- to post-intervention



Fear of observations	$F_{(1, 21)} = 11.72, p = .003$
Fear of performance	$F_{(1, 21)} = 3.61, p = .07$
Fear of interaction	$F_{(1, 21)} = 12.26, p = .002$

KEY FINDINGS FOR MOVING FORWARD

- This works adds evidence to previous findings on the promising impact of ACT on social anxiety-related symptoms (for a review see [3]), while considering a manualized and remotely delivered ACT-intervention for adolescents and both symptom and process-based change.
- Following previous appraisal within a case study approach [7], the ACT@TeenSAD appears effective in changing core social fears. Such change – particularly in interaction and observation fears –, is partially driven by change in psychological inflexibility, thus confirming ACTs' assumed mechanisms of change (for a review see [9]).
- Evidence is still needed on the impact on the ACT@TeenSAD intervention, namely as superior to wait-list conditions and/or equivalent to other psychological interventions approaches.

The ACT@TeenSAD intervention successfully impacted on adolescents' social anxiety and psychological inflexibility

