Living with Death: A Single Case Experimental Study on the Effectiveness of ACT for Prolonged Grief Disorder

Okan Kılıç[1],Okan Deniz[1],Aleyna Güleryüz[2],E.Denizhan Ramakan[1],Zülal Çelik[3],Sevinç Ulusoy[2]

[1]Bakirkoy Prof. Dr. Mazhar Osman Training and Research Hospital for Psychiatry, Neurology, and Neurosurgery,[2]Association for Contextual Science and Psychotherapies,[3]Istanbul Medeniyet University

INTRODUCTION

- **Prolonged Grief Disorder (PGD)** is associated with persistent functional impairment, and symptom-focused interventions may not fully address recovery.
- **Acceptance and Commitment Therapy (ACT)** aims to increase psychological flexibility rather than eliminate grief-related thoughts and emotions, supporting re-engagement with valued living.
- Despite growing evidence for ACT in grief, daily monitoring of therapeutic processes using SCED remains limited.
- This study evaluated an individualized 8 session ACT intervention guided by the psychological flexibility model using SCED and daily assessment of grief intensity, grief-related preoccupation, experiential avoidance, and values-based behavior.

METHODS

- **Design:** Nonconcurrent multiple-baseline SCED.
- **Participant:** Adults (18–65 years) with PGD (target n = 5)
- **Measures:** PG-13, AAQ-II, ELS, and daily ratings of grief intensity, grief-related preoccupation, experiential avoidance, and values-based behavior.
- **Analysis:** Visual analysis, RCI, CSC

RESULTS

Scales	Pre-test	Post-test	RCI	Cut-off	CSC Achieved
PG-13	57	46	-2.46	45.38	No
AAQ-II	44	34	-2.01	34.57	Yes
ELS	29	32	0.70	38.87	No

Table 1. Pre-test, Post-test , Reliable Change Index (RCI) and Clinically Significant Change (CSC) Scores

- Reliable reduction in PGD
- Clinically significant improvement in psychological flexibility (AAQ-II)
- Values-based behavior increased during follow-up
- Experiential avoidance remained variable

DISCUSSION

- Psychological flexibility showed the greatest improvement.
- Daily monitoring revealed different trajectories across ACT processes.
- Daily valued-based behavior increased at follow-up, consistent with evidence of post-treatment therapeutic gains.
- Findings support ACT's emphasis on psychological flexibility rather than symptom elimination.
- Larger replicated SCEDs are needed

ACT improved psychological flexibility and reduced prolonged grief symptoms, while therapeutic processes changed at different rates.

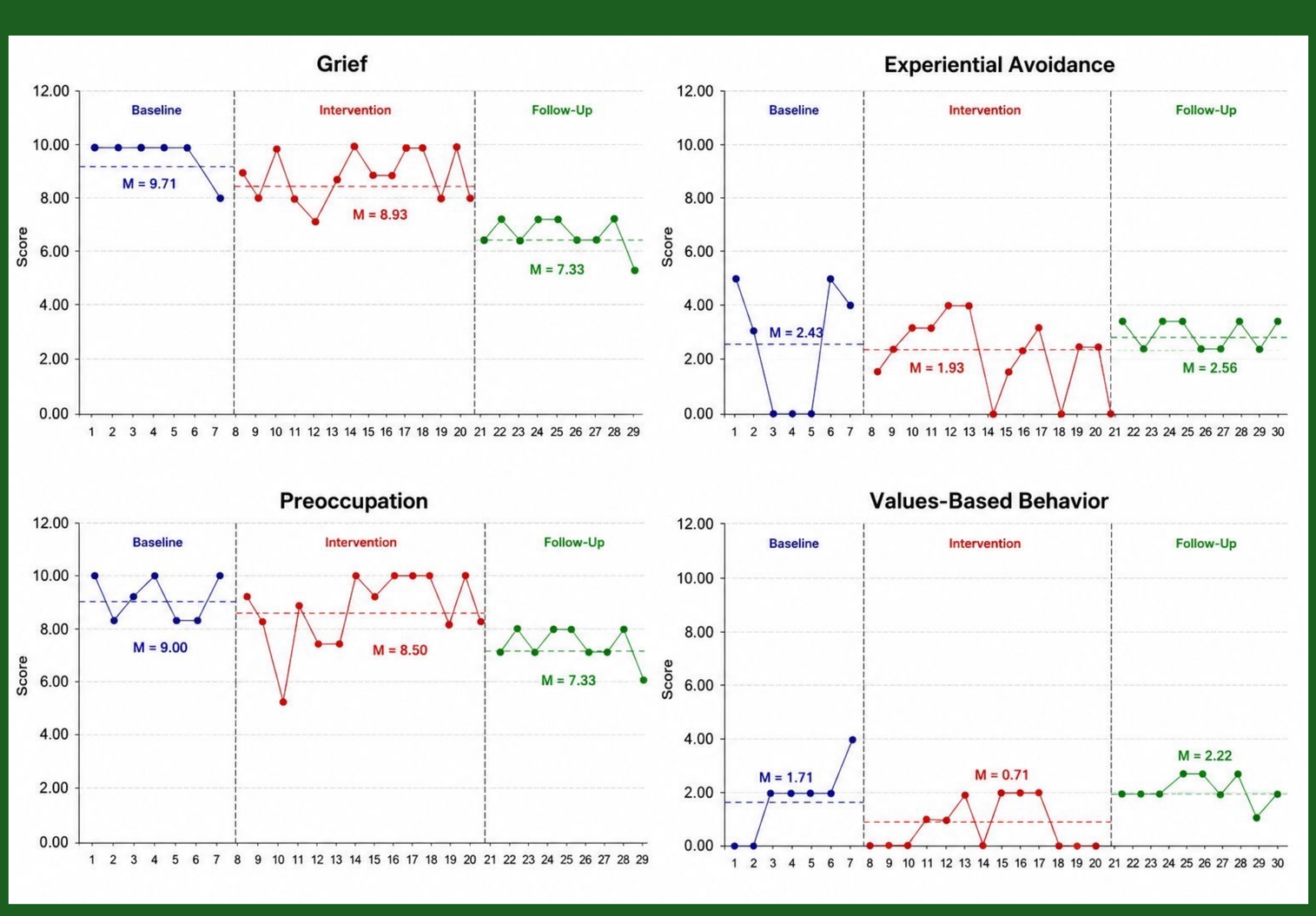

Figure 1. Visual analysis of daily process measures across the baseline, intervention, and follow-up phases.

TÜRBAD
Turkish Association for Contextual Behavioral Science

Daily Assessment Items

- **Grief:** Today, thoughts, memories, or feelings (e.g., longing, sadness, or grief) related to my niece's death were distressing to me.
- **Avoidance:** Today, I avoided reminders of my niece (e.g., photographs, belongings, places, or people associated with her).
- **Preoccupation:** Today, I was preoccupied with things related to my niece (e.g., looking at photographs, examining her belongings, or reflecting on memories).

References

- Prigerson, H. G., Horowitz, M. J., Jacobs, S. C., Parkes, C. M., Aslan, M., Goodkin, K., ... & Maciejewski, P. K. (2009). Prolonged grief disorder: Psychometric validation of criteria proposed for DSM-V and ICD-11. *PLoS Medicine*, 6(8), e1000121. https://doi.org/10.1371/journal.pmed.1000121
- Hayes, S. C., Strosahl, K. D., & Wilson, K. G. (1999). *Acceptance and commitment therapy: An experiential approach to behavior change*. Guilford Press. https://doi.org/10.1002/1097-4679(200101)57:1<117::AID-JCLP12>3.0.CO;2-4
- Kazdin, A. E. (2019). Single-case experimental designs. Evaluating interventions in research and clinical practice. *Behaviour Research and Therapy*, 117, 3-17. https://doi.org/10.1016/j.brat.2019.04.008

Contact: drzulalcelik@gmail.com