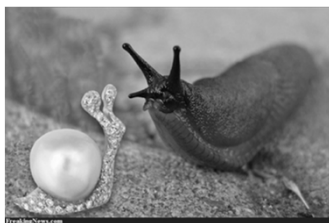


We are all less flexible
when we are afraid



People with 'hard life syndrome'
'not broken' ~~but~~ and



In the aftermath of
trauma ...
weird stuff can
happen

A graded approach to dissociation

For example, addressing dissociation triggered by anger:

Practicing mindfulness and acceptance in neutral and positive situations first. Then practicing in safe ways staying present with low levels of the emotion or trigger situation.



"I said nothing while I was inside the store even though the woman was rude to me. I walked out, I held my friend's hand and said : 'I felt irritated and that's OK isn't it?'"



Aftermath of (early) trauma

Brain 'wired for danger'

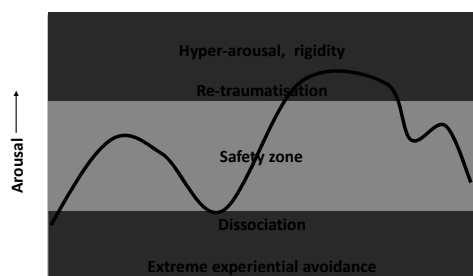
Less learning via empathic attunement??

- traumatic memory
 - flashbacks
 - lack of chronology
 - separate sensory 'tracks'
 - intense emotions & urges
 - fight/flight, freeze/flop
- over-alert for danger
- under-alert for positive, neutral
- dissociation – brief/ longer, deeper/shallower, more/less elaborated ('personalities') more/less involuntary
- learned helplessness
- abuser/abused relationships
 - "it feels so right"
- 'identification with aggressor', 'flipping'



Re-traumatisation

Pacing in the treatment of trauma



Adapted from van der Hart, Nijenhuis & Steele, 2000

Map and manage triggers



ACT view of 'Hard life syndrome' (1)

- difficult feelings [and difficult thoughts]
 - intense and fluctuating negative emotions
 - strong action impulses (sometimes including fears triggered by abandonment related stimuli)
 - and/or limited awareness of body sensations/emotions
 - intense negative thoughts, negative 'self-as-content'
- problematic behaviour, problematic relationships
 - impulsive acts, unwise choices
 - angry outbursts
 - acting in potentially self-damaging ways on impulse
 - deliberate self-harm
 - clingy or changeable ways of relating to others

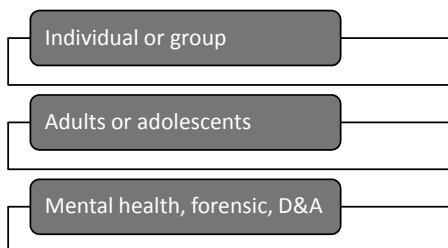


ACT view of 'Hard life syndrome' (2)

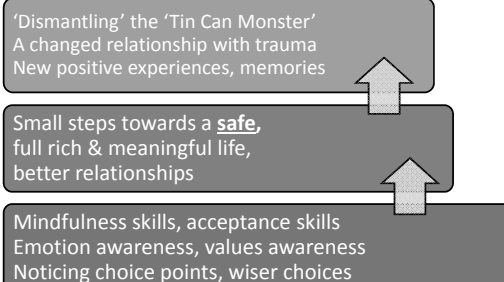
- Limited acceptance, mindfulness, present moment
 - 'emptiness' (limited present moment awareness ?)
 - 'fragile self' (limited present moment awareness ?)
 - 'unstable self-image' ([alternating] self-as-content?)
 - rigidity - including difficulty with perspective shifting, 'black and white' thinking (limited 'mentalization'?)
 - problems with empathy (avoidance of 'mirrored' affect?)
 - dissociation, flashbacks, and other transient trauma-related symptoms
 - psychosis-like trauma-related symptoms



Wise Choices ACT for people with 'hard life syndrome'



A graded treatment approach



Wise Choices groups



1. Introduction
2. My life – how do I go off track and where do I want to go?
3. Struggling with the monster
4. No need to be bossed around by difficult thoughts
5. Being present with feelings of pleasure
- 6-7. Emotions, sensations and urges
8. A small step in a valued direction
9. Choice points and obstacles to taking action on values
10. Review and celebration



Session 1: Accept Choose Take action

Introduction to ACT and mindfulness

Acceptance & Commitment Therapy

Acept your feelings & thoughts and be present

Choose action that is in line with your values

Take action

Remember, it's what you do that counts!



A graded approach to mindfulness and present moment awareness

Brief mindfulness emphasising
one aspect of mindfulness each session

Mindfulness and present moment awareness

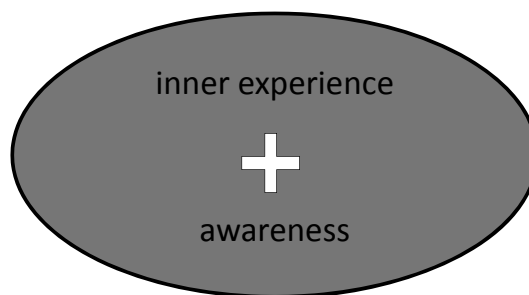
Vital prerequisites for trauma work:


- ability to come into the present moment
- ability to focus attention on one thing at a time
- ability to gently return wandering attention
- ability to 'just notice' without judging or getting 'hooked'



Mindfulness ('self')

Fully present. Aware of experience rather than
'empty', dissociated, acting impulsively





- Start in the session (not at home)
- Start with conversational style - 'just noticing' (not a formal exercise)
- Start with low anxiety focus:
 - External focus may be easier than internal (eg sound, an object)
 - Body awareness, breath awareness may be difficult
 - 'Hard body' may be easier than 'soft body'
- Many will not do formal practice




Mindfully focus on ... just one thing!

One important part of mindfulness is focusing your full attention on just one thing in the present moment.


Our minds, however, are not used to focusing on just one thing. They tend to be like puppies – easily distracted and happily chasing after everything.

Practising mindfulness is a lot like training a puppy to sit. When you become aware your attention is wandering, see if you can bring your awareness back as gently and patiently as if you were training a puppy.

Try observing your thoughts and feelings and the outside world like a gentle, curious scientist

- a gentle curious awareness
- 'beginner's mind'
- focussed on the chosen object 'just as it is in this moment'
- allowing judgements to be there in the background



Be like water ...

When a big stone is thrown into water there are big ripples.

When a small stone is thrown into water there are small ripples.

Between stones, the water returns to a state of stillness.

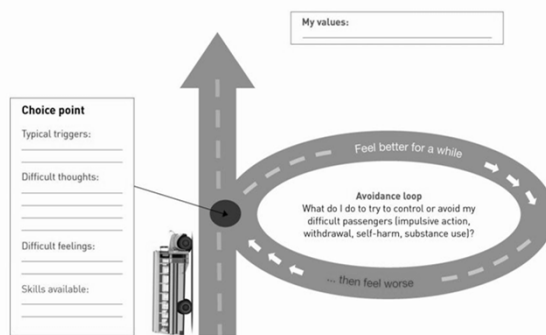
It doesn't tense up waiting for the next stone



Session 2: My life – how do I go off track and where do I want to go?

Introduction to the avoidance loop and values

My avoidance loop



Values are like lighthouses in the distance ...



... they guide us through emotional storms.

What are values?

Values are our heart's deepest desires for the way we want to interact with and relate to the world, other people and ourselves. They can guide us and motivate us as we move through life. Values put into action make our hearts glad.

Are values and goals the same?

Values are not the same as goals. Values are directions we keep moving in, whereas goals are the small steps we want to achieve along the way. Goals can be achieved or 'crossed off', whereas values are directions we travel in for our whole lives and can live in small ways every day.

Are values like shoulds?

As we grow up, we collect a lot of 'shoulds' from others that can feel like a pressure or a burden. Acting on these doesn't make our hearts glad in the same way acting on our own values does. 'Shoulds' are about what others think of us. Ask yourself, 'Would I feel good about doing this even if no-one else ever knew?'



What do I value in others?


Description of someone I like or admire:

Description of someone I don't like or approve of:

What do these descriptions tell you about what you would like your life to be about?


Eliciting values via negative examples →

Can also use anger ('fighting spirit') sadness/loss ('flip side of love/value') to provide clues.





Values awareness

- Usually 'directions' work better than 'destinations'
- Sometimes 'goals' also work – even unrealistic goals: "I want to be an astronaut"
- Go with the energy – anything large or small that gets the person moving in a helpful direction
- Use noticing feelings and choices to learn more



Address shame about not acting on values

- How are you already living this value?
- Ask about living this value in small ways every day (small steps in a valued direction).
- 'Just notice' difficult thoughts and 'make space for' difficult feelings about values.

Session 3: Struggling with the monster

The unworkability of control strategies, introduction to acceptance

Wise Choices

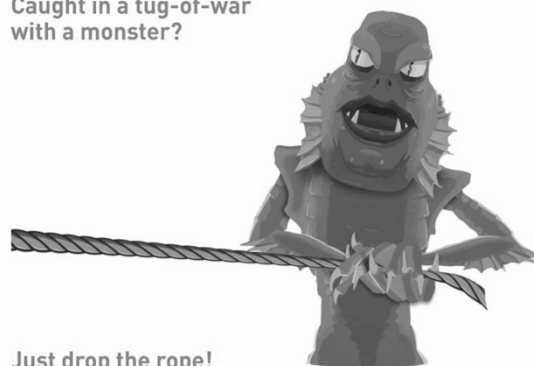
Change the things
you can change

Accept the things
you can't change

Practise being
fully present so
you gradually
learn to know
the difference



Caught in a tug-of-war
with a monster?



Just drop the rope!

Baby avoidance tiger ...

If you keep feeding the baby avoidance tiger bits and pieces
of your life to keep him quiet ... **he will just get bigger and
hungrier!**



Session 4: No need to be bossed around
by difficult thoughts

Mindfulness of thoughts, defusion

Mindfulness of thoughts (defusion) - a graded approach

- Start in the session (not at home)
- Start in a natural conversational style:
 - “That sounds like a very difficult thought”
 - “What thoughts did you have?”
 - “Did you notice a thought just then?”
 - “Sounds like there’s some judging and blaming going on in your head at the moment.”
- ‘Leaves on a stream’ is a good introduction to ‘just noticing’ – and ‘self-as-context’

“I notice I’m having a thought that ...”



Looking at your glasses.
Looking through your glasses.

‘Hooked’ and ‘unhooked’



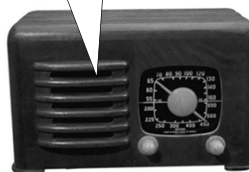
Hooked

Awareness of thoughts
(unhooking)

Totally
unhooked

Blah. Blah. Blah.

That's bad. You're bad. It's a catastrophe! No one will like you if you do that. It's not worth it. Give up now. Be careful. Stop it!



Let bad news radio
be on in the
background
without trying to
ignore it, or fight it.
*And get on with
your life.*

Noticing judgements...

"How are your judgements working for you?"

Exercise: Good cup?
Bad cup?



Who is more powerful – you or your thoughts?



Think:
"I can't raise my arm,
I can't raise my arm" as
hard as you can [pause]
and now do this
[demonstrate raising arm].

Struggling against memories doesn't work

Exercise:
Forget how
you came here



Will giving this thought my full attention help me
live a full, rich and meaningful life?

Are true thoughts always useful?
And get on with your life.



After paying attention
to the thought "I'm so
fat" do you:

- (a) Go to the gym?
- (b) Eat a block of
chocolate?



Session 5: Being present

Mindfulness and acceptance of feelings of pleasure



Mindfulness of pleasurable tastes, smells, sights, sounds, sensations
May require practice.

In a hazardous context we develop the habit of maximising attention to danger and minimising attention to neutral and positive stimuli.



Sessions 6 & 7: Emotions, sensations and urges

Emotion awareness and acceptance,
take action based on values, not emotions
the option to do nothing

Emotions pass like a wave ...



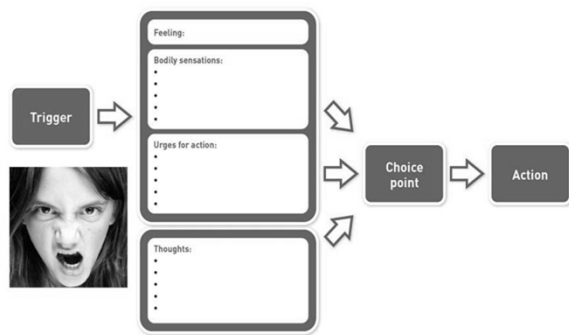
... unless I get hooked by difficult thoughts



... or act on urges against my values



The anatomy of anger



Noticing the choice point – difficult sensations

Hold your breath for as long as you can.

Notice the thoughts, emotions, sensations and urges you have.

Take particular note of the ones occurring right before you choose to breathe.



Session 8: A small step in a valued direction

Taking action on values – even when emotions are strong
Living values every day

Committed action:

Choose a value you would like to act on more and take a small step.



eg. Express gratitude to a friend

- Look
- Smile
- Say or do something positive, however small, as long as it's genuine.
- If the other person knocks your gesture back, there's no need to take it personally.



My values in action

What is a small step I can choose to take to act on my values this week?

What difficult thoughts, feelings or sensations might I experience?

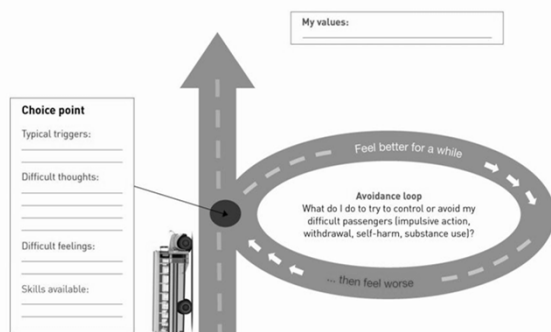
Which of these am I willing to experience to act in line with my values?



Session 9: Choice points and obstacles

Difficult thoughts and feelings that arise
when taking action on values
and making wise choices

My avoidance loop



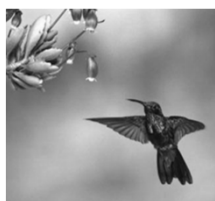
Take action

guided by values
not feelings

Confidence =
self-fidelity

Hovering at the choice point

1. Hover at the choice point in imagination and notice your thoughts and feelings.
2. Imagine making the choice that's in line with your values and notice your thoughts and feelings.



Adapted from: Batten. (2007).
ACT Conference Wollongong

Wise Choices: The treatment manual for a successful randomised control trial

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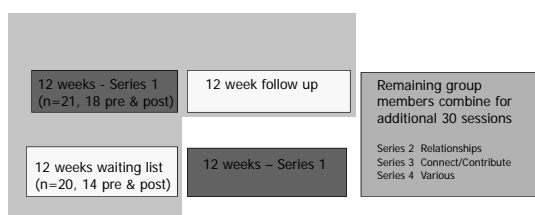
Acceptance and Commitment Therapy Group Treatment for Symptoms of Borderline Personality Disorder: A Public Sector Pilot Study

June Morton
Steven Newderson
Michelle Graydon
Elise Gossamer

Spectrum - the Personality Disorder Service for Victoria

1 A pilot study of a brief group-based Acceptance and Commitment Therapy (ACT) intervention (12 two-hour sessions) was conducted with clients of public mental health services meeting pre-specified criteria for borderline personality disorder (BPD). Participants were randomly assigned to receive the ACT group intervention in addition to their current treatment (ACT + TAU) (n=21) or to continue with treatment as usual alone (TAU) (n=20). There was significantly more improvement from baseline for the ACT+TAU condition than the TAU condition on the primary outcome measure of BPD symptoms. The ACT+TAU group also made clinically and statistically significant improvements on the secondary outcome measures of psychological flexibility, emotion regulation, and fear of emotion. For all but anxiety, the improvements for the ACT+TAU condition were significant, while the TAU condition had no significant changes on any measure. Follow-up measures for only a small number of participants. The improvements gained by the ACT+TAU participants were maintained except for fear of emotion. Anxiety continued to improve, becoming significantly different from baseline at follow-up. A limitation of this study is that the psychological flexibility, emotion regulation skills and confidence, but not the fear of emotion, mediated BPD symptoms. Psychological flexibility and emotion regulation skills also mediated hopelessness. There is a need for a larger trial, for comparison with other established treatments for BPD, and for conducting a trial of a longer intervention. Nonetheless, this pilot study suggests that a brief group-based ACT intervention may be a valuable addition to TAU for people with BPD symptoms in the public sector.

The research design



Change over 12 sessions

Mixed model analyses of pre and post scores
ACT + TAU (n=21) compared with TAU (n=20)

- Less BPD symptoms (BEST composite) ($p=.028$)*
 - Less anxious (DASS) ($p=.025$)*
 - Less hopeless (Beck Hopelessness Scale) ($p=.006$) **
-
- More psychological flexibility (AAQ2) ($p=.010$)**
 - More able to handle difficult emotions (DERS) ($p=.008$)**
 - More mindfulness skills (FFMQ) ($p=.028$) *
 - Less fear of emotion (ACS) ($p=.002$) **

Mediation analysis

Improved BPD symptoms (Borderline Evaluation of Severity over Time)

- mediated by emotion skills (Disorders of Emotional Regulation Scale)
particularly reduced 'impulse dyscontrol'

Reduced hopelessness (Beck Hopelessness Scale)

- mediated by emotion skills (Disorders of Emotional Regulation Scale)
particularly increased 'confidence in emotion strategies'



Series 3 and 4 and beyond Trauma work

The protective function of
negative self-as-content
and harshness towards self and others

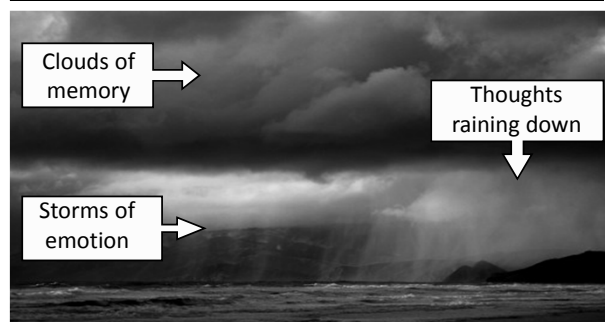
Leaves on a stream

Imagine yourself on
the banks of a fast
flowing stream. As
each thought feeling
or sensation comes,
put it on a leaf and let
it go.



Self-as-context work is particularly important for people who feel they have
been irreparably damaged by trauma.

No matter what the weather or how often it changes ...
the sky remains the same ... unchanged, unharmed.



Negative self-as-content - a protective function



Making friends with my monster



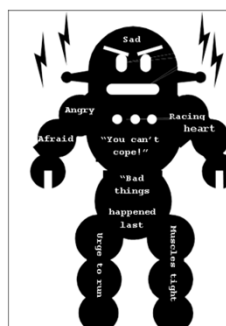
Find the feeling. Where is it in your body?
 If the sensation had a colour..., a shape
 Put it outside you. Look into it's eyes.
 What does it want? What does it need?
 Give it what it needs.
 Bring it back inside"

Compassion for my younger self

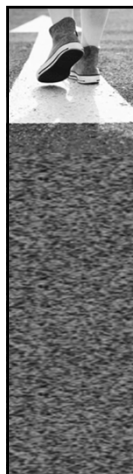


Stay with a difficult feeling. Go back through the filing cabinet of memory to find a time when you were young and you felt like this.
 What does your younger self want? Need?
 How do you feel in relation to your younger self?
 Give your younger self what s/he needs.
 [May need help eg. Therapist comes back in time, foster parents ...

Taking apart the Tin Can Monster



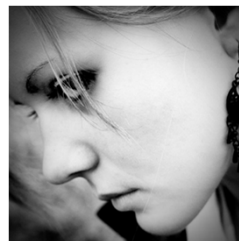
Thoughts	Use <i>mindfulness</i> techniques to just notice each thought, one at a time. "Leaves on a stream", "I'm noticing that I'm having a thought that..." "Bad news Radio" "Sing the thought" "Write the thought", "Thank you mind"
Feelings, sensations	Use <i>body awareness</i> techniques to move towards acceptance of each sensation. "If it had a colour, what colour would it be..Shape?... Size?... Texture?...". "Breathing with", "Breathing into" "Making space for" and "Working the edge"
Images	Use <i>image defusion</i> techniques to move towards acceptance of each image. These techniques include: "Changing the image – larger, smaller, colour, black & white" "Changing the movie style– Simpsons, Bollywood, melodrama", "Walking around the TV"



Problem behaviours/
avoidance loops/
coping strategies

**The most extreme behaviour of the
borderline client is iatrogenic.**

Dawson and Macmillan 1993



Self-harm – look at the function and the context



**“You say to me that
self-harm is the problem...
I say to you that
self-harm is the solution.”**

Mary Graham (1999) Spectrum consumer consultant



**“...in working with
chronically suicidal
individuals, there
will be times when
reasonably high
short term risks
must be taken to
produce long term
benefits.”**

Linehan (1993)

There are no low risk options

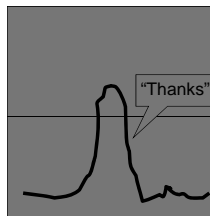
Balance short and long term risk



- Considering only short-term risk can dramatically increase the risk of eventual death or disability.
- Compulsion and lengthy hospitalisations often have profound negative effects.

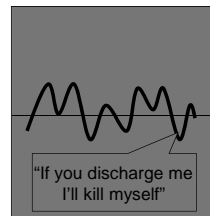
Acute versus chronic suicidality

Acute = short-term



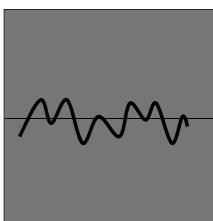
Acute
rare in BPD

Chronic = long-term

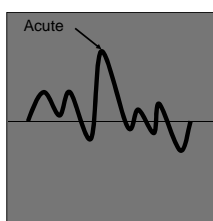


Chronic
common in BPD

Acute on chronic suicidality



Chronic pattern



Acute episode -
temporary change in
chronic pattern



Not one size fits all.

A functional analysis and treatment plan
for each pattern of self-harm
– these will be different for different people.
Short term and long term risk must be
repeatedly reassessed as the context changes.

Doing what works

'Just noticing' and making space for our own thoughts feelings and action urges



Don't just do something – sit there!
Accept what you can't change

Successful treatment

- Focus on values based action at least as much as problem behaviour
- Assist with noticing choice points
- Gradually build capacity for mindfulness and acceptance of difficult thoughts and feelings
- Do not require self-harm for access to services. Give attention to distress. Do not accept self-harm as interpersonal 'currency'.



Sitting with fear of the Coroners Court 'Duty of care' - case law

- ✓ not to do harm (safety)
- ✓ to do good (beneficence)
- ✗ to predict all suicides
- ✗ to prevent death in the short term at all costs



Good practice and effective risk management are the same.

