

ACCEPTANCE AND COMMITMENT THERAPY

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Acceptance and Commitment Therapy

*An Experiential Approach
to Behavior Change*

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KIRK D. STROSAHL
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*To my children, Camille, Charles, and Ester:
May the illusion of a “need for control” not suffocate you.*
—S. C. H.

*To Patricia Robinson, PhD, for her seminal work in
advancing mindfulness and acceptance strategies and her
undying support of me personally.*
—K. D. S.

*To my brother Randy,
who lost his life to the word machine.*
—K. G. W.

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About the Authors

Steven C. Hayes, PhD, is Nevada Foundation Professor and Chair of the Department of Psychology at the University of Nevada, Reno. An author of 15 books and more than 250 scientific articles, his interests cover basic research, applied research, methodology, and philosophy of science. In 1992 he was listed by the Institute for Scientific Information as the 30th “highest impact” psychologist in the world during 1986–1990 based on the citation impact of his writings. Dr. Hayes has been President of Division 25 of the American Psychological Association, the American Association of Applied and Preventive Psychology, and the Association for Advancement of Behavior Therapy. He was the first Secretary-Treasurer of the American Psychological Society and is currently cochair of the Practice Guidelines Coalition.

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Preface

This book is the result of the journeys we have taken. Viewed from one perspective, it represents our personal journeys through life, learning about pain and suffering, and learning how to open up and move on. Our parents, siblings, spouses, and children are in this book. Our mistakes and blind alleys are in this book. Indeed, although we will say naught else about it, our own personal struggles with personal problems probably inform this book more than any other source. There is just no way to connect with the Acceptance and Commitment Therapy (ACT) work without connecting personally with it because the model itself will not allow a convenient division into those needing treatment and those doing the treatment.

From another perspective, this book represents our professional journeys. Each of us was trained in behavioral and cognitive-behavioral therapy and worked to find ways to link this old and honorable empirical tradition to the rich but confusing veins of thought and practice from humanistic, existential, spiritual, and human potential domains. In that we have been influenced by many fellow travelers, including Bob Kohlenberg, the late Neil Jacobson, Marsha Linehan, John Kabat-Zinn, Les Greenberg, Alan Marlatt, Michael Mahoney, and Michael Dougher. ACT is a collection, with components borrowed from many traditions, and we are encouraged by the great success others are having in related work.

If there is anything novel about ACT, it is in the specific way it combines philosophy, theory, and practice. We have little interest in our approach as a finished product or brand name, and we encourage the reader to apply and modify our work. What is most important is to move ahead, using the best of the empirical and behavioral traditions, but keeping an eye toward the prize of greater understanding of the

breadth and depth of human experience. In the long run what works will become the conventional wisdom of a future day, and little will remain from any of the current therapies that is distinctive. If this book helps move that day a bit closer, we are satisfied.

This book also represents a scientific journey of psychologists, teaching, researching, and learning psychology. In the academic and research domain, we have been influenced particularly by our teachers and close colleagues, including John Cone, David Barlow, Irv Kessler, Patty Robinson, Jon Krapfl, Linda Hayes, Vic Follette, Rosemary Nelson-Gray, Aaron Brownstein, Dermot Barnes, and Sam Leigland. At the other end of this chain of knowledge stand our students, each contributing in so many ways to this work. These include (in no particular order) Rob Zettle, Jeanne Devany, Sonny Turner, Zamir Korn, Irwin Rosenfarb, David Greenway, Terry Olson, Mary Wolfe, Elga Wulfert, David Steele, Joe Haas, Norm Anderson, Terry Grubb, Rachel Azrin, Ed Munt, Robin Jarrett, Sandy Sigmon, Dave McKnight, Diane Volosin, Lee Cooper, Sue Melancon McCurry, Durriyah Khorakiwala, Regina Lipkens, Nancy Taylor, Chris Leonhard, Chris McCurry, Niloo Afari, Barbara Kohlenberg, Jacque Pistorello, Liz Gifford, Robyn Walser, Wini Ju, Adam Grundt, J. T. Blackledge, Tuna Townsend, Pat Bach, Jen Gregg, Rich Bissett, Dosheen Toarmino, Eric Fox, and David Sayrs. We thank them all.

Equally important are our clients and the many clinicians who have contributed to the work. Literally everyone we have treated from any ACT perspective and everyone we have trained clinically has contributed in some way. We acknowledge them all.

And finally, there is you, the reader. This book is an invitation to take a journey yourself. In doing so, you have a disadvantage and an advantage. The disadvantage is that it may be easier to get caught up in your own literal interpretations of what you are about to read and to miss what is transformational about an ACT model. Books are literal in a way that conversation is not, and that realization has contributed a certain amount of melancholy to the process of writing this book. We hope that what we have written is helpful, even while we fear that it may be confusing.

Yet there is also an advantage. You are dealing with the frozen verbal product of the authors. There is a path laid down here, and you can go back and forth, reread, and reconsider. You can catch inconsistencies or detect what is superfluous. You can try out something from one chapter and only much later on consider what is in another. In this process of assimilation, analysis, and use, we hope that what is truly useful will become evident. We also hope that new things will emerge. If they do,

we hope you will let us know what you learn. After all, in a very important sense, we are all in this boat together.

Humanity has solved or ameliorated an impressive number of the problems faced by other living creatures, yet the tool we used to do that good work—human language—turns on us in a most insidious way every day. It may take us centuries or eons to solve the problems that language creates, but solve them we will. Behavioral scientists have something few other groups concerned with human suffering have had: the processes of scientific knowing itself. If we can get beyond mere syndromes and can focus properly on the problem of human suffering, there is much we can contribute. For the sake of our clients, it is our duty to try.

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•PART I•

The Problem and the Approach

The single most remarkable fact of human existence is how hard it is for human beings to be happy. Psychotherapists are all too familiar with the sad statistical findings, taken one at a time, that document this fact (e.g., Kessler et al., 1994; Regier et al., 1993). They already know that in any given year the overall prevalence rates for mental disorders will approach 30%. They also know that there are nearly 20 million alcoholics. They know that nearly 30,000 people will take their own lives each year and countless others will try but fail. Indeed, therapists often revel in such statistics when discussing the need for more clinicians or for more funding for mental health programs. At the same time, psychotherapists generally miss the larger message these many statistics contain when taken as a whole. Even taking into account the many areas of overlap, if we add up all those humans who are or have been depressed, addicted, anxious, angry, self-destructive, alienated, worried, compulsive, workaholic, insecure, painfully shy, divorced, avoidant of intimacy, stressed, and so on, we are compelled to reach this startling conclusion: Suffering is a basic characteristic of human life.

This book is about that fact. In Chapter 1 we try to show how our conventional assumptions have hidden this obvious truth from psychotherapists and psychopathologists. A firm grasp on the ubiquitous nature of human suffering produces a view of human change and development that is quite different than if we begin with the assumption that suffering is abnormal. In Chapter 2 we defend the importance of philosophy and theory and describe the philosophical and theoretical grounds on which our work stands. We show how functional contextual philoso-

phy leads to radically different ideas about the nature of the relationship between cognition, emotion, and behavior. We describe an approach to human language—Relational Frame Theory—that vitalizes our work, both technically and as an approach to human psychopathology. In Chapter 3 we describe our view of psychopathology and relate many behavioral health problems to experiential avoidance and cognitive fusion. These two phenomena then become the key targets of our therapeutic work.

•1•

The Dilemma of Human Suffering

Dania, Fla. June 16 (AP)—A 6-year-old girl was killed today when she stepped in front of a train, telling siblings that she “wanted to be with her mother.” The authorities said that her mother had a terminal illness.

—*New York Times* (June 17, 1993, p. A12)

Happiness for a dog or a cat is straightforward. If pets are given shelter, food and drink, warmth, stimulation, play, and physical health they are contented. Without the intervention of humans, animals are often missing some of these basic things. They live, as we say, a dog’s life. Many humans also are missing such basic items too, and it is not difficult to understand the misery of a person living without them.

But many humans have *all* the things a nonverbal organism would need to be happy, and yet they are not. Humans can be warm, well fed, dry, physically well, and still be miserable. Indeed, humans can have forms of excitement and entertainment unknown in the nonhuman world—color TVs, exotic cars, and airplane trips to the Caribbean—and still be miserable. Literally nothing external that you can name—great looks, loving parents, terrific children, a caring spouse—are enough to ensure that a human will not suffer terribly. Every day a human being with every imaginable advantage takes a gun, loads a bullet into it, bites the barrel, and squeezes the trigger. Every morning a successful business person gets to the office, closes the door, and reaches quietly into the bottom drawer of the desk to find the bottle of gin hidden there.

Humans as a species are suffering creatures. Yet our most popular