

CULTIVATING PSYCHOLOGICAL FLEXIBILITY IN THE THERAPEUTIC RELATIONSHIP

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DISCLOSURES

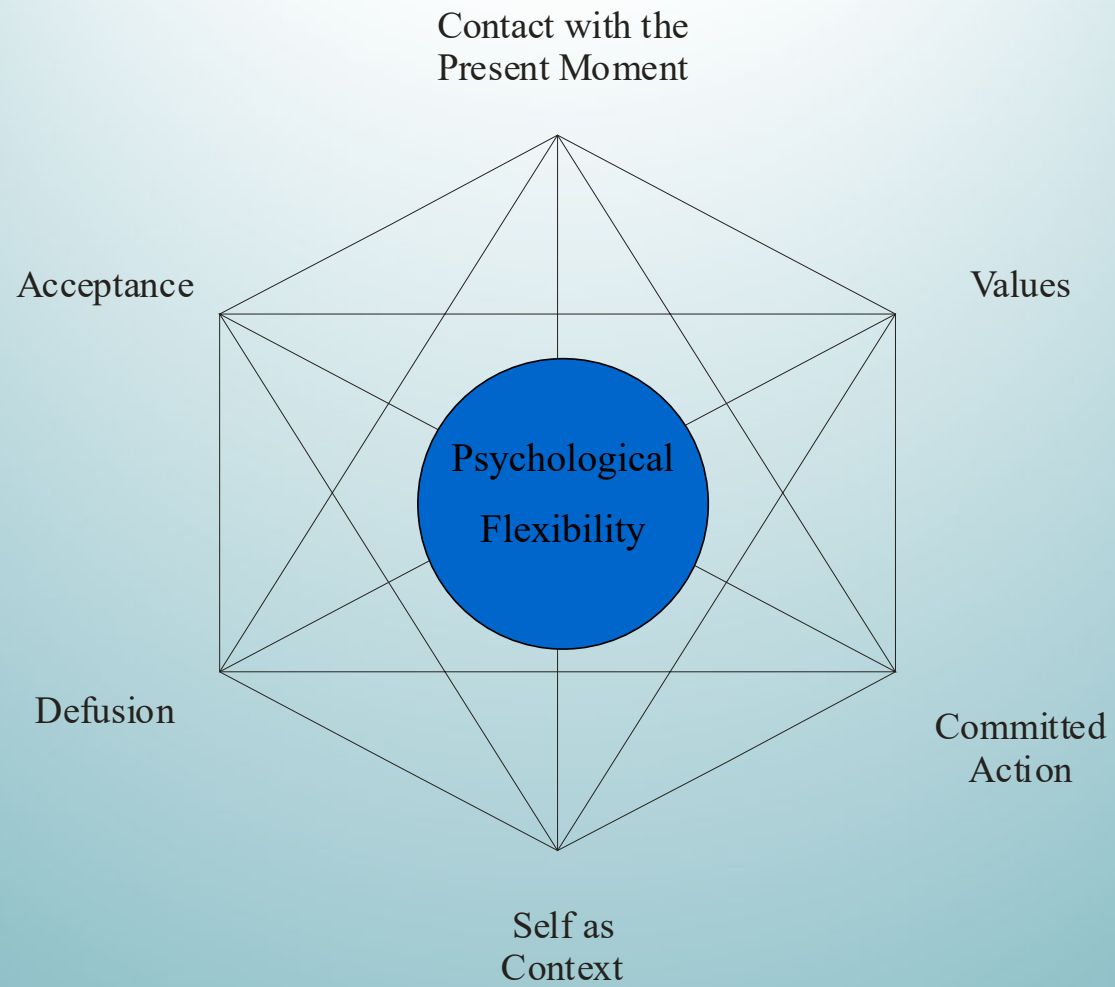
- Robyn D. Walser receives royalties from New Harbinger Publications for books including *The Heart of ACT*.

WHERE WE ARE HEADED

- 2 levels of process
- Therapeutic stance and relationship

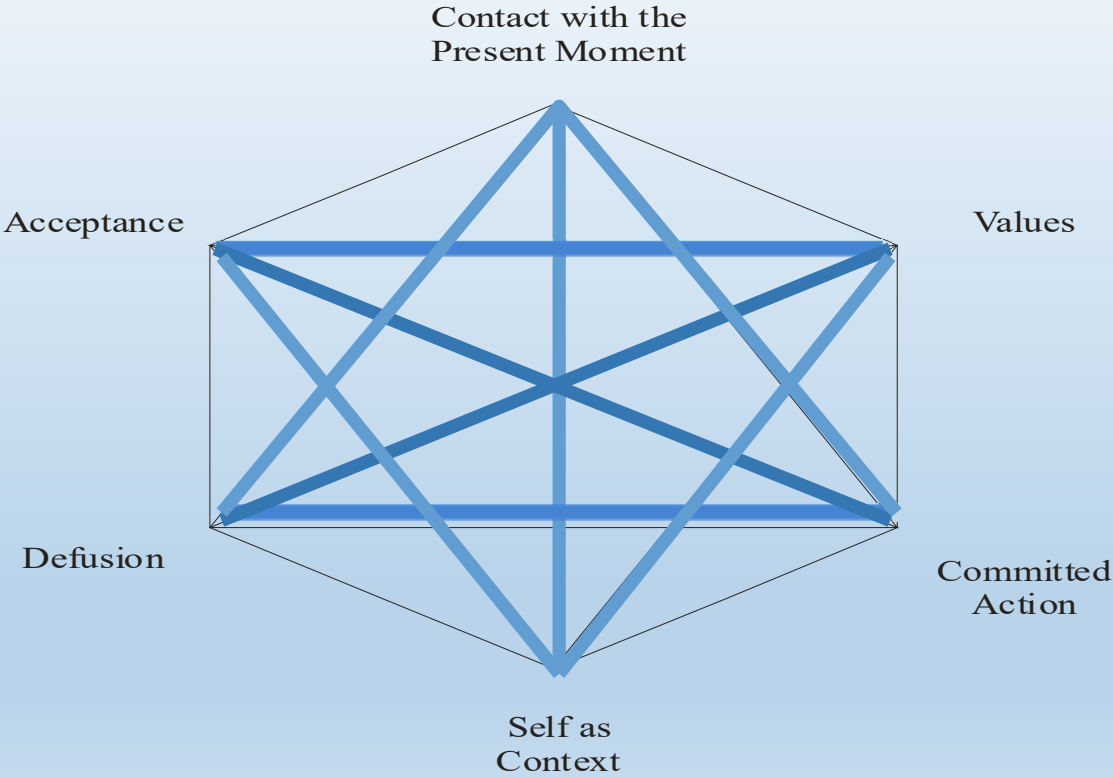
BUT FIRST...

The Essence of ACT Work



Context Matters

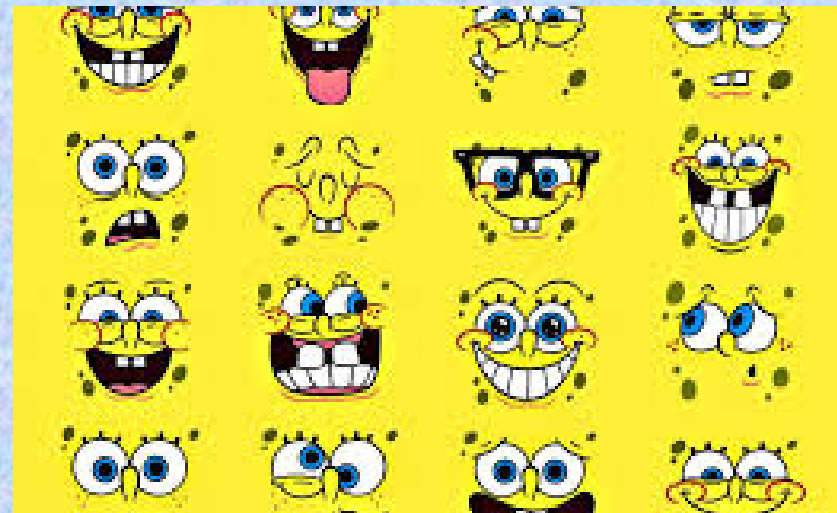
Taking the flex in hexaflex more seriously



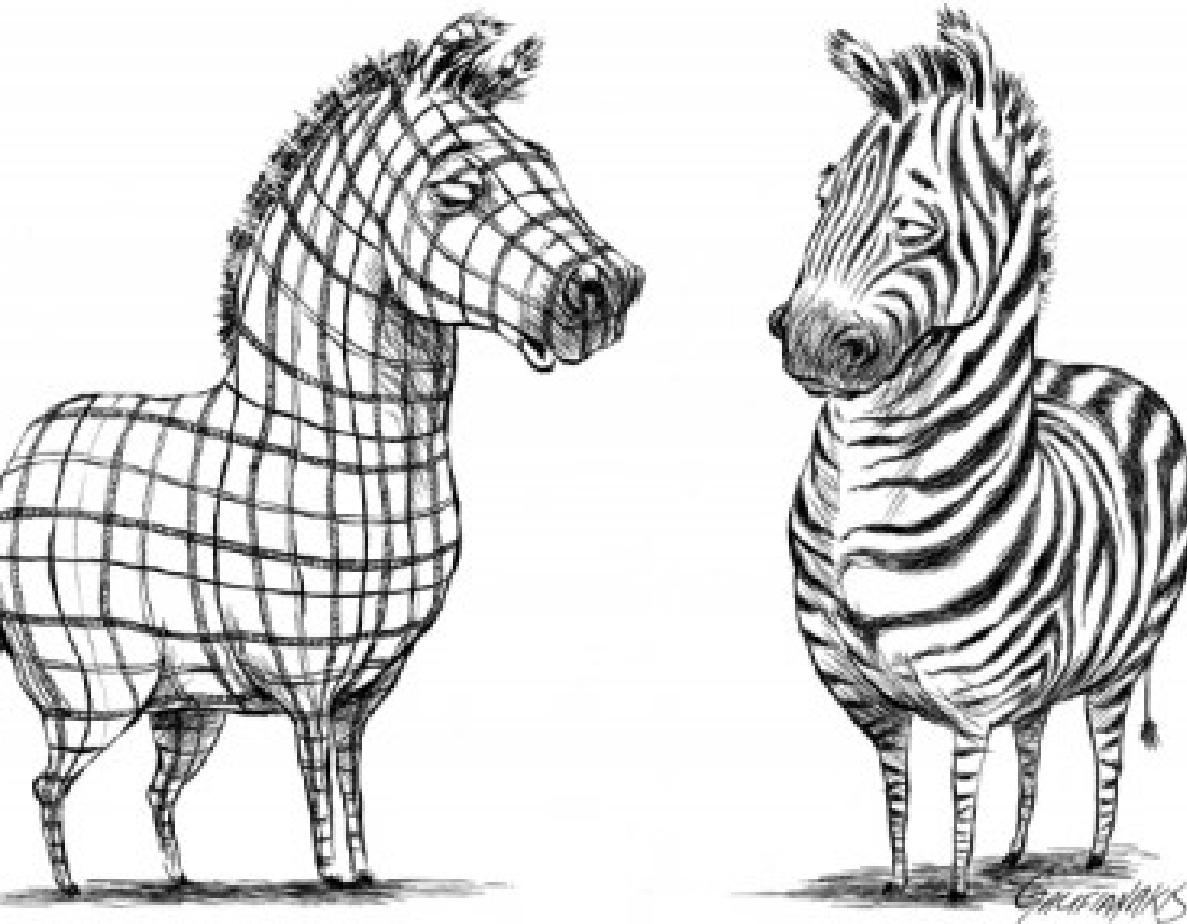
RE-ORIENTING TO THERAPEUTIC PROCESS

When techniques
become the therapy

Versus a therapy that
uses techniques







THE IMPORTANT THING IS, I'VE
FINALLY MADE PEACE WITH MYSELF.

ACT AS TECHNIQUE

“Just” Accept

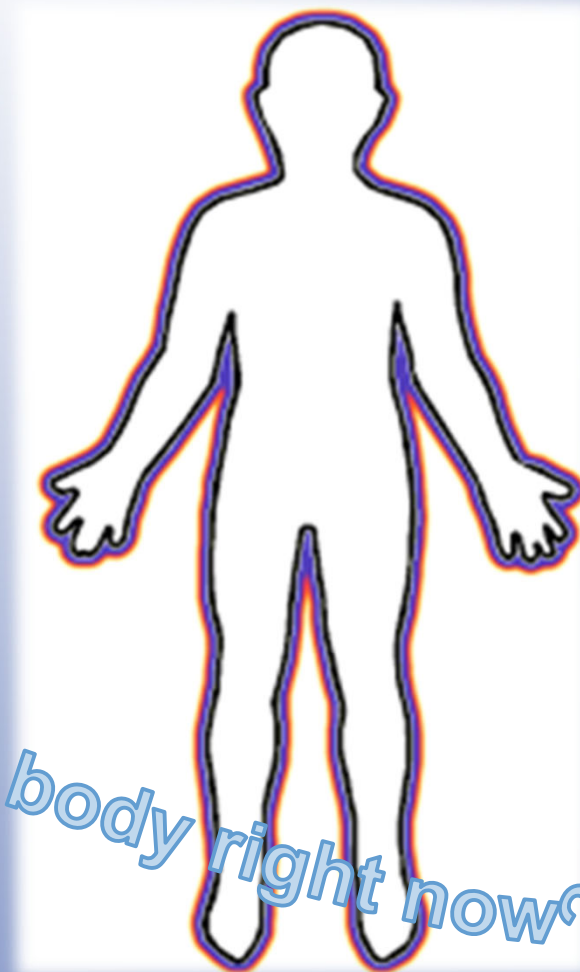


ACT AS TECHNIQUE

- Insensitive Defusion

ACT AS TECHNIQUE

Turn to present moment in
an artificial way



What do you feel in your body right now?



ACT AS TECHNIQUE

Complete and utter
skipping of SAC/PT

Being vague
is almost as fun
as doing this
other thing.

ACT AS TECHNIQUE

Vague and diffuse goals



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ACT as Technique

Values are treated as
Sticks not carrots



ACT AS TECHNIQUE

- **Stuck in explanation and intellectualization**



ACT AS TECHNIQUE

Metaphors and
exercises without
purpose



ACT AS TECHNIQUE

Form not function

ACT AS TECHNIQUE

Content not
process



ACT STARTS TO LOOK LIKE A CARTOON OF ITSELF



“My therapy is quite simple: I wag my tail and lick your face until you feel good about yourself again.”

I HAVE BEEN ASKING MYSELF?

Where did the client go?

Where did the therapist go?

Where did the function of behavior go?

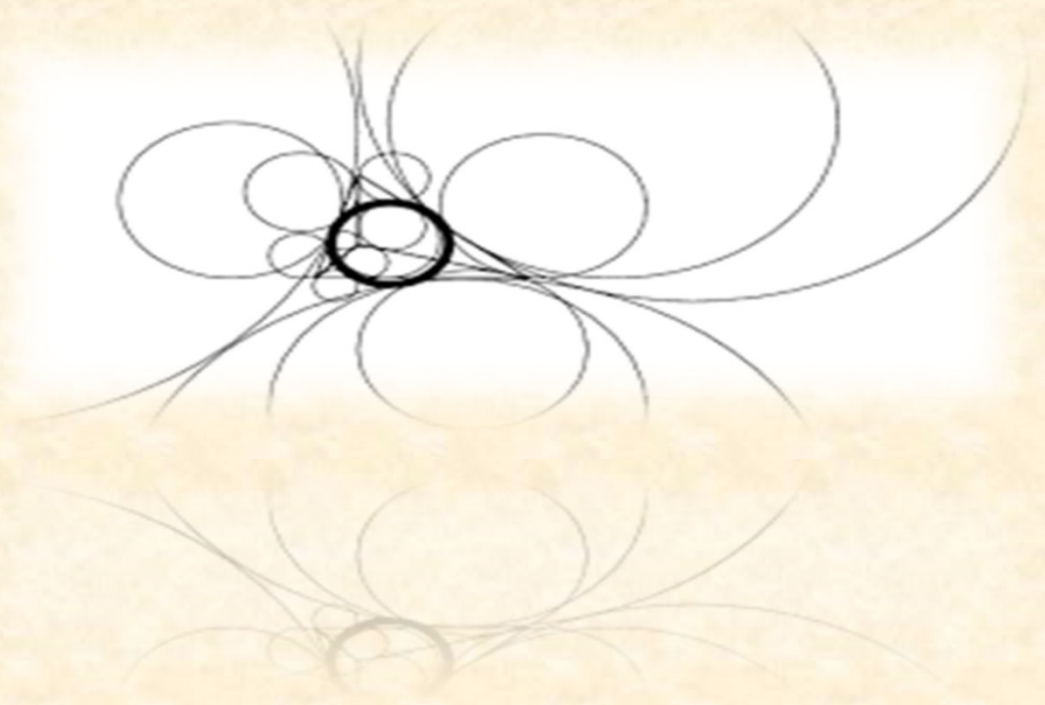
Where did the process go? And do we know what is meant when we say “process”?

Where did the system go?

Where did the compassion go?

Why is this looking like sets of techniques and tools?

How do we convey the interaction between client, therapist, and intervention, occurring in a context, such that the function of behavior is targeted for change and principles are applied in an ongoing and process-oriented fashion?



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PROCESS AND FUNCTION

Process

- A continuous action, operation or series of changes that are going forward or on.

Function

- The purpose of an action/behavior
- Three term contingency

Opening

SIX CORE PROCESSES OF ACT

Accepting

Defusing

Present momenting

Self-as-contexting

Valuing

Acting

Awaring

Engaging

A-B-C

A-B-C

A-B-C

A-B-C

A-B-C

A-B-C

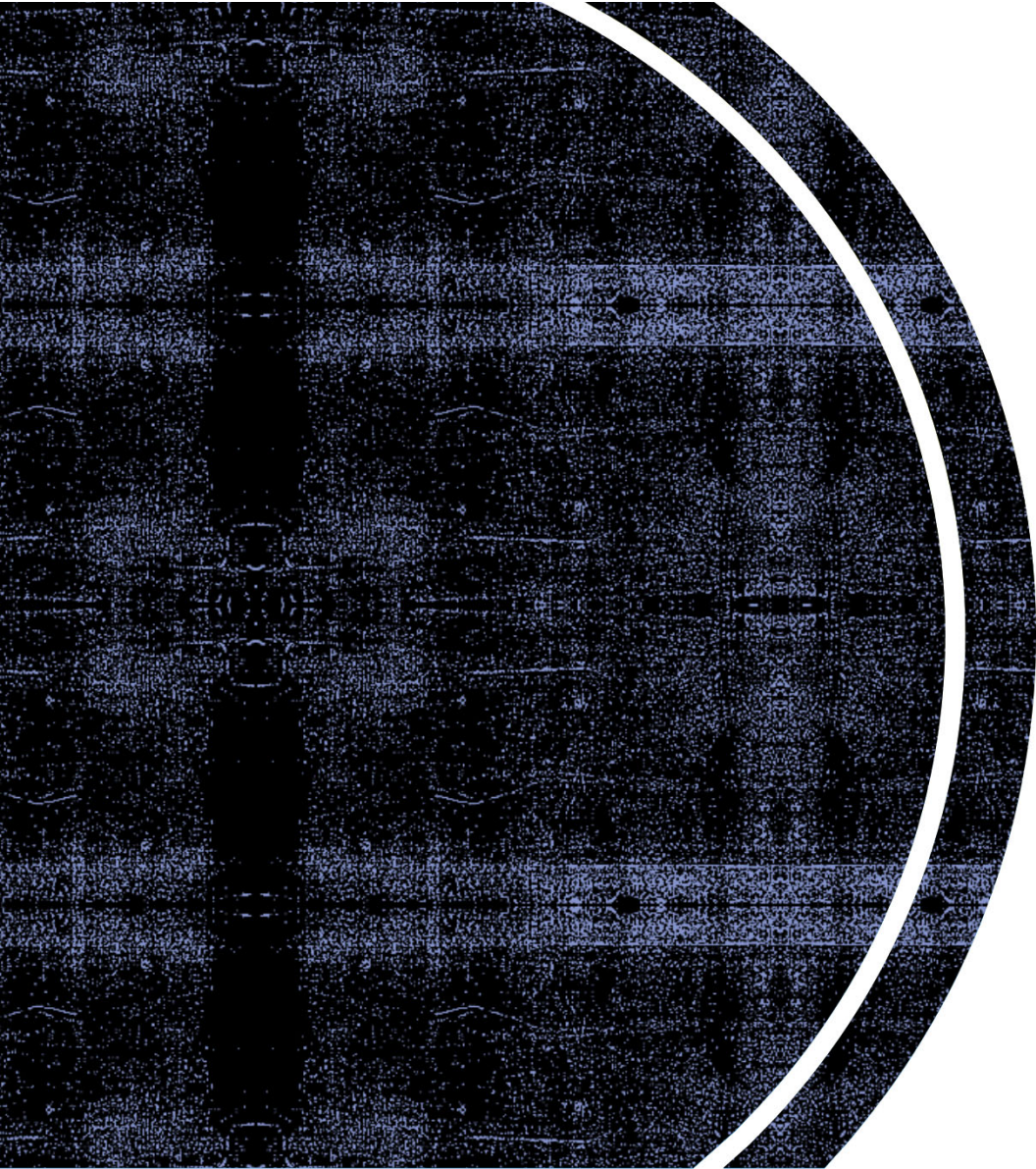
A-B-C

A-B-C

A-B-C

A-B-C

A-B-C



**THE WORK IN ACT THERAPY IS TO
CONTINUOUSLY ASSESS AND INFLUENCE
BEHAVIOR INCLUDING ATTENDING TO
CHANGES ACROSS TIME AND CONTEXT**

- CONTEXT MATTERS:
- 2 LEVELS OF PROCESS WHERE 6 CORE ARE CONTINUOUSLY APPLIED **BASED ON ONGOING FUNCTIONAL ANALYSIS**
- Intrapersonal Process
- Interpersonal Process

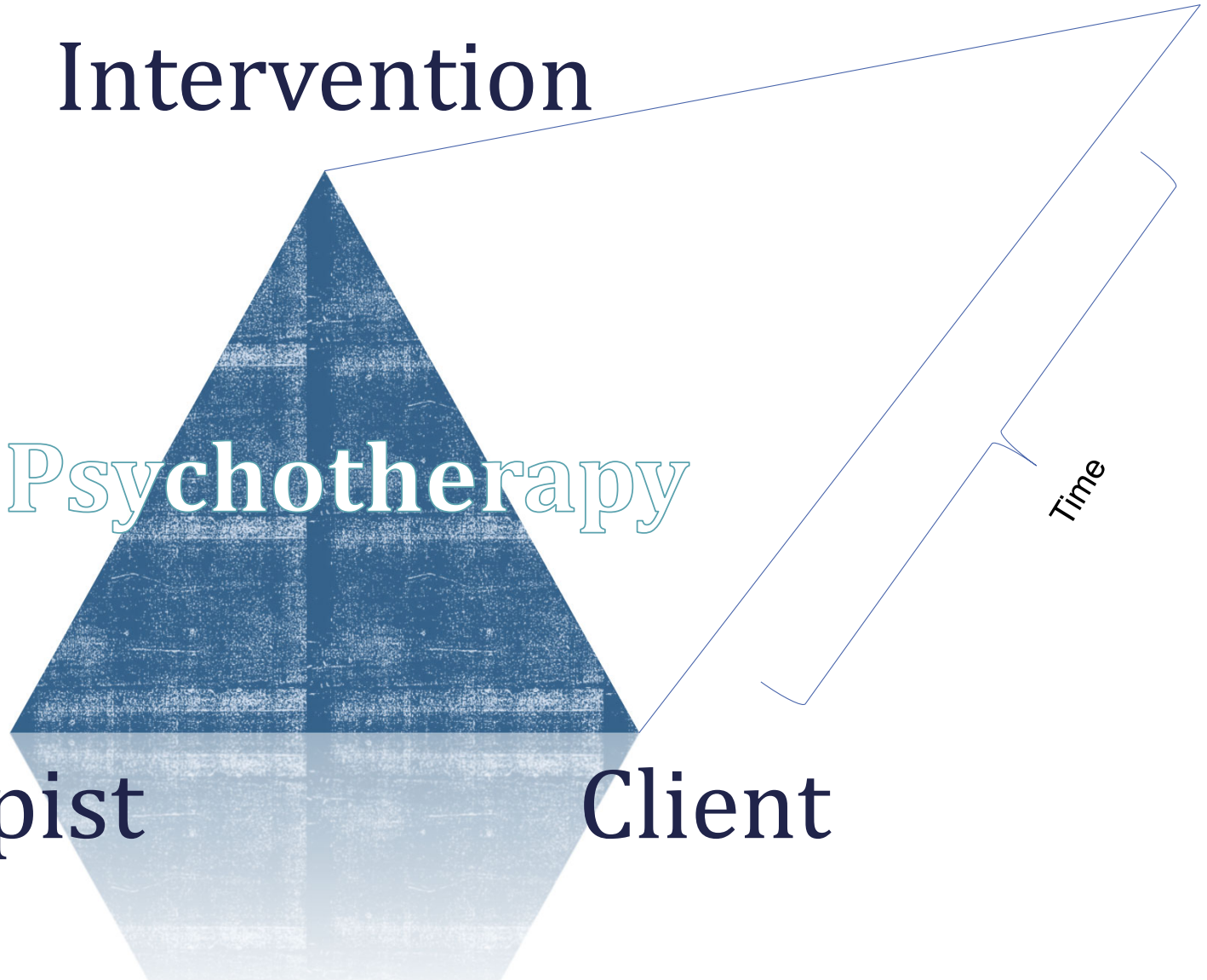
Intervention

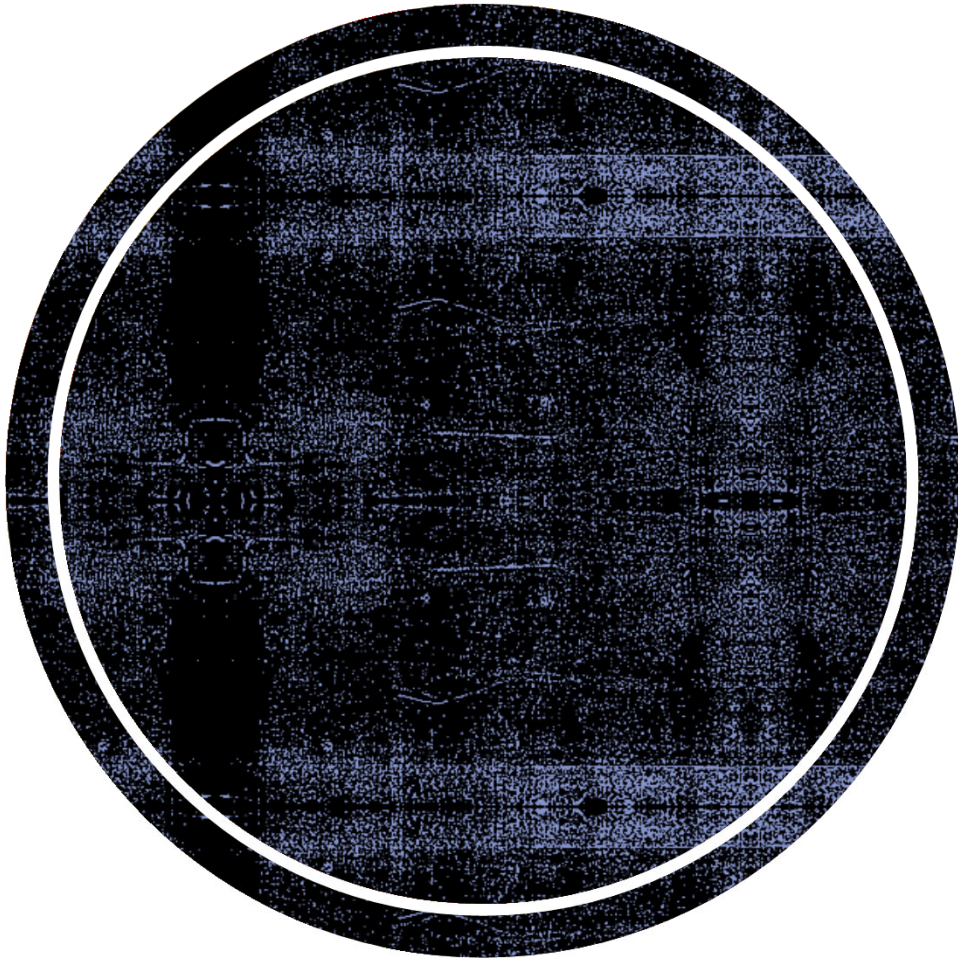
Psychotherapy

Therapist

Client

Time





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A DELICIOUS DISH

Knowing yourself is the beginning of all wisdom.

Aristotle

AN HONEST CHECK WITH YOURSELF



When and where do you use technique?



Have you become over-reliant?



What elements of ACT do you shy away from?



Are there ones that you avoid or use too often?



If you work in a setting using brief therapy, how can you introduce and use process?



Where do you think personal growth is needed?

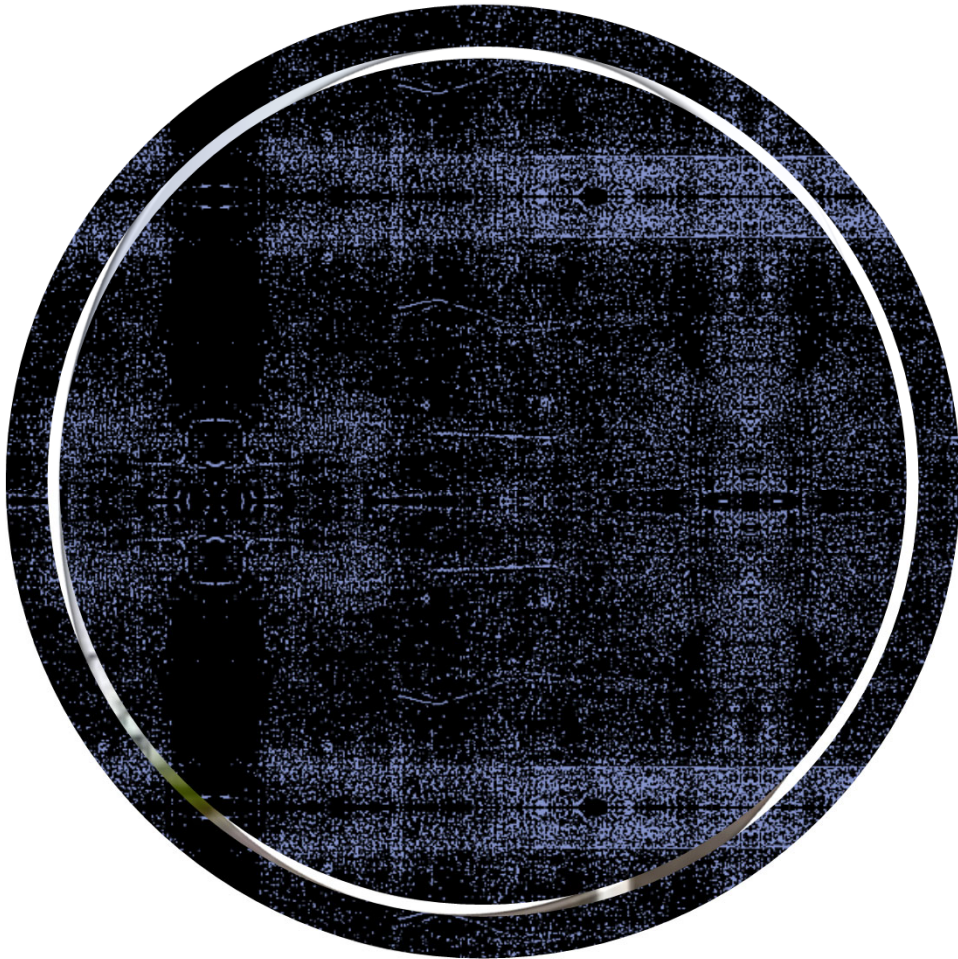
DISCOMFORT PROCEEDS GROWTH





OPENING TO HEART OF ACT

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NO ARRIVAL

WHY NO ARRIVAL



- I thought I was over this?
- Why can't I just let go?
- Why is this still catching me?



FLEXIBLE

Changing course to fit
the needs of the client at
any moment



SETTING A THERAPEUTIC INTENTION

Holding the client as whole

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GROWTH IS POSSIBLE

- Genuine faith in the client's capacity
- Change is possible
- Includes respect, deep listening, and empathy inside of a safely vulnerable and developing relationship

- **Something can be done**



Groups of 3
Therapist, client, observer
Go to a difficult place in therapy
If holding client as whole and
capable ---what would you say?



INTRAPERSONAL PROCESS

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**HE WHO KNOWS OTHERS IS WISE;
HE WHO KNOWS HIMSELF IS ENLIGHTENED.
-LAO TZU**

ACT CORE COMPETENCY: THERAPEUTIC STANCE

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- The ACT therapist speaks to the client from an equal, vulnerable, compassionate, genuine, and sharing point of view and respects the client's inherent ability to move from unworkable to workable responses and respects the client's values.
- The therapist is willing to self disclose about personal issues when it serves the interest of the client



STANCE

- Can mean two things and both are relevant:
 - First, it can be defined as an adopted mental or emotional position
 - Second, it can be defined as a position of the feet.



STANCE

- It is a place occupied by experience and body and it entails a particular kind of relationship with yourself and others.
- It entails awareness and is intimately linked to the ACT Core Competencies for the Therapeutic Relationship.
- The position of the feet is explored through being bold and speaking from the heart in therapy.
- Exercise

THE ACT (EXPERIENTIAL) STANCE



- Vulnerable
- Genuine
- Equal

INTRA-PERSONAL PROCESS



- What is happening and flowing within yourself
- Being awake, alive and curious about your internal states - your senses, your emotions, your mind
- Practice self-knowledge

SELF AWARENESS

- The therapeutic stance involves being able to recognize your personal capacity to be open, aware, and engaged in the therapy
- It means understanding your behavior, knowing when you are fused, avoidant, or out of touch with your values
- But self-awareness also means being connected to and aware of how others perceive you and the impact of your behavior on others, in the moment, and across time.
- Dyadic Discussion
 - How do you think you are perceived?
 - How do you hope to be perceived?



DEMONSTRATION



**I have just three things to teach: simplicity,
patience and compassion. These three are your
greatest treasures.**

Lao Tzu

ACT CORE COMPETENCY: THERAPEUTIC STANCE

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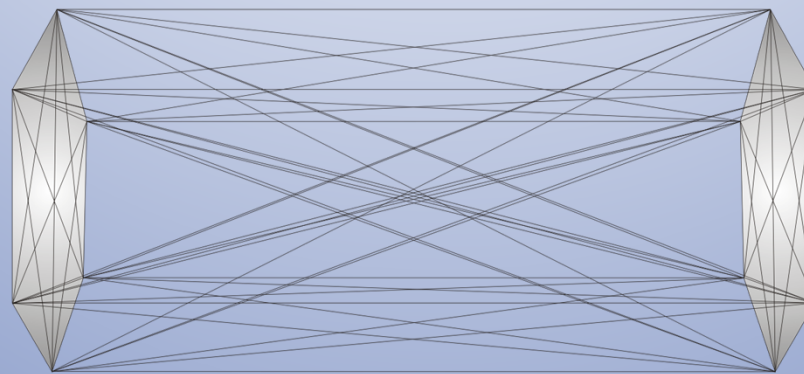
- The therapist is flexible in responding to the client (e.g., avoids use of “canned” ACT; tailors interventions to fit the client’s language and life experience; flexibly responds to client need)
- The therapist does not argue with, lecture, coerce or attempt to convince the client or provide his or her personal opinion as a substitute for the client’s genuine experience.
- The therapist models acceptance of challenging content while also being willing to hold contradictory or difficult ideas, feelings, memories, and the like without needing to “resolve” them.
- ACT-relevant processes are recognized in the moment, and when appropriate, are directly supported in the context of the therapeutic relationship.

In its fullness, the stance of the ACT therapist is not separable into categories. Rather the stance is a set of interwoven concepts that are tied together in whole cloth by the threads of what it means to engage in a relationship designed to compassionately support another being in creating a meaningful life.

A Model of the ACT Therapeutic Relationship

Practitioner
Psychology

Client
Psychology



Therapy Interactions



INTERPERSONAL PROCESS

- The unique, operative (a person engaged), and dynamic quality of the relationship between two people working together in therapy in efforts designed to promote change, growth, evolution, or whatever movement is desired and agreed upon by the two

DISCOVERY EXERCISE



When I see others suffering, what breaks my heart is

When I recognize my own passing, what potentially breaks my heart is....

What I find hard in the work I do is....

When I think of what my legacy is, it looks like...

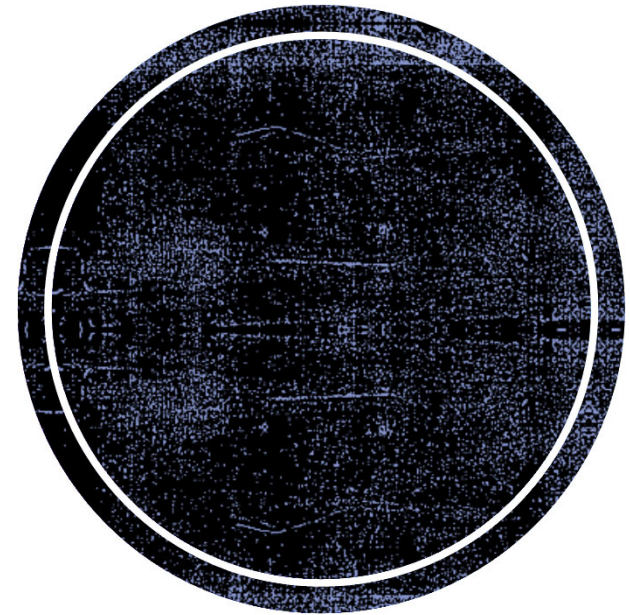
I feel the most joy when....

I am sometimes reluctant to share my pain because...

CONSCIOUS BEING

An allowing that is awake to
experiencing “how large and fluid
and full of color and energy our
world is”

Pema Chodron





CONSCIOUS BEING IN THERAPY

- Consciousness to your internal experience (intra)
- Consciousness to the experience between you and your client (inter)
- The two are deeply intertwined
- Choosing what experiences to act on in any moment depends on this awareness and creates a more flexible, larger capacity to respond to the function

ACT THERAPEUTIC RELATIONSHIP



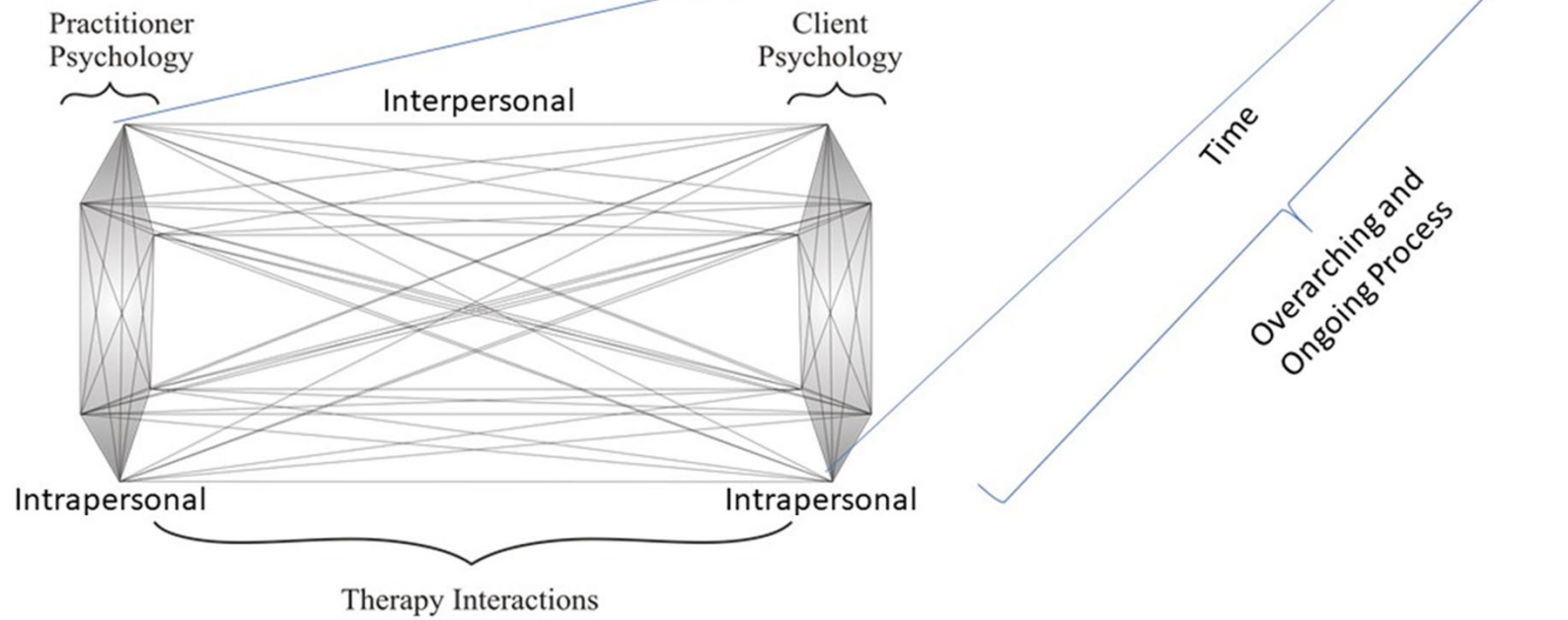
SUMMARY OF THE RELATIONSHIP RESEARCH


- Reviews have been quite consistent: the alliance-outcome correlation is moderate but significant (ranges from .22 to .29), client's assessments tend to be more predictive of outcome than are other sources, early alliance is as good or better predictor of outcome than assessments taken later, and the alliance as measured appears to be related but not identical to parallel therapeutic gains (Horvath, 2005).
- The relation of alliance and outcome does not appear to be influenced by other moderator variables, such as the type of outcome measure, the type of rater, the time of alliance assessment, the type of alliance rater, the type of treatment provided, or the publication status of the study. (Martin, Garske & David, 2000).

CHALLENGES

- **First, we need more theoretical debate about the construct of the relationship.**
 - Dynamic evolution of the therapeutic relationship over time and perhaps its unique unfolding within particular diagnostic contexts needs to be investigated.
- **Second, the field needs to struggle with the question of how therapists can be trained to develop better alliances with their clients.**
- **Third, we need to examine changes in the quality of the alliance over time.**

A Model of the ACT Therapeutic Relationship



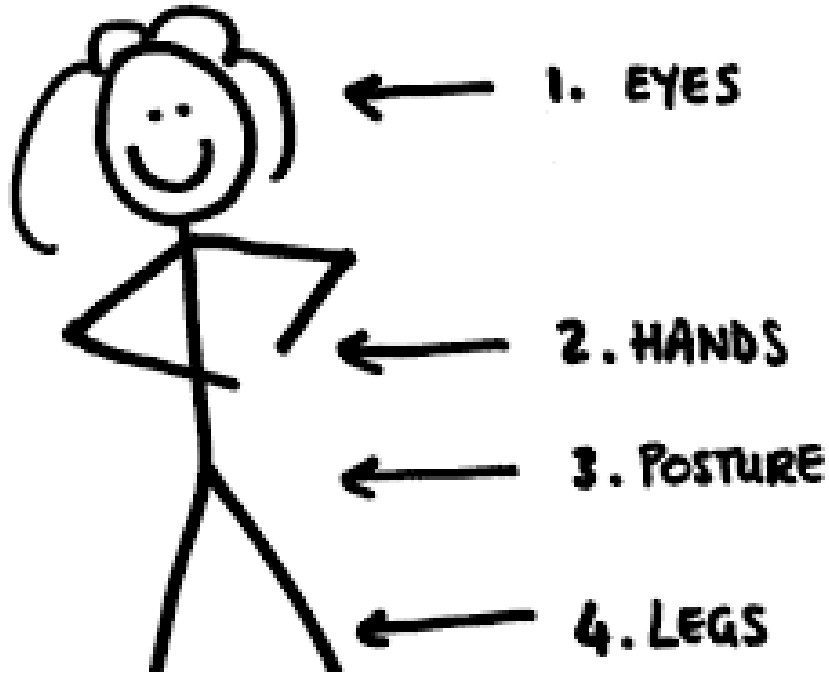


EVOLUTION OF THE THERAPEUTIC RELATIONSHIP

- Challenging to explore in detail – what was missed, what was focused on
- There may be moments in the therapy where what the therapist thought to do next is not going to work based on what just happened interpersonally.
- Requires Awareness

CREATIVE HOPELESSNESS

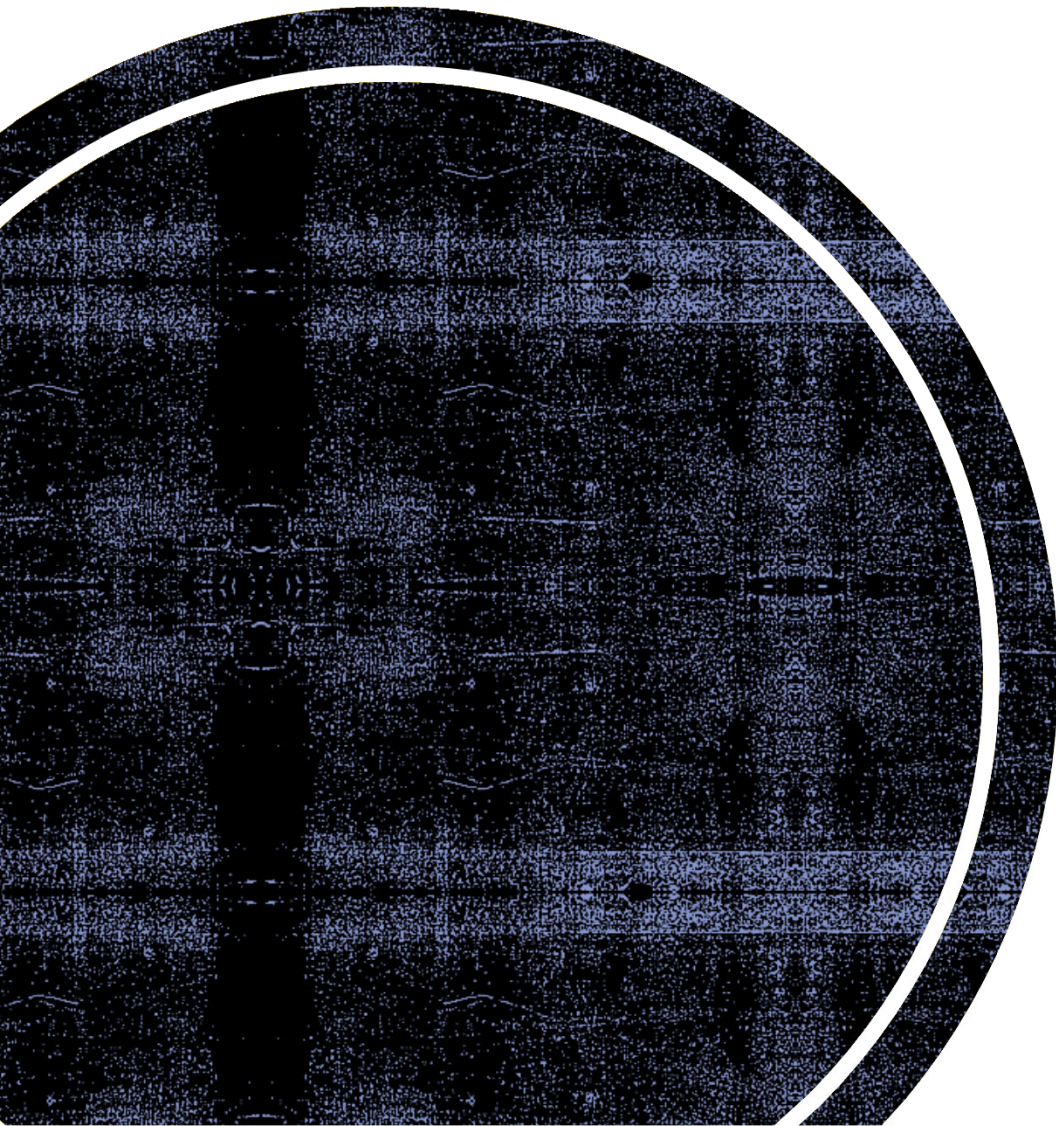
THERAPEUTIC FLUENCY: LITERALLY



- What and how you say things
 - What you say matters
 - How you say it matters (pacing, pitch)
- Body Language
 - Eye contact
 - Gestures
 - Skin tone
 - Spatial presence/distance

TIMING AND PACING

- 
- * Alliance
 - * Slowing down and the work of mindfulness/presence
 - * Disrupting rigidity

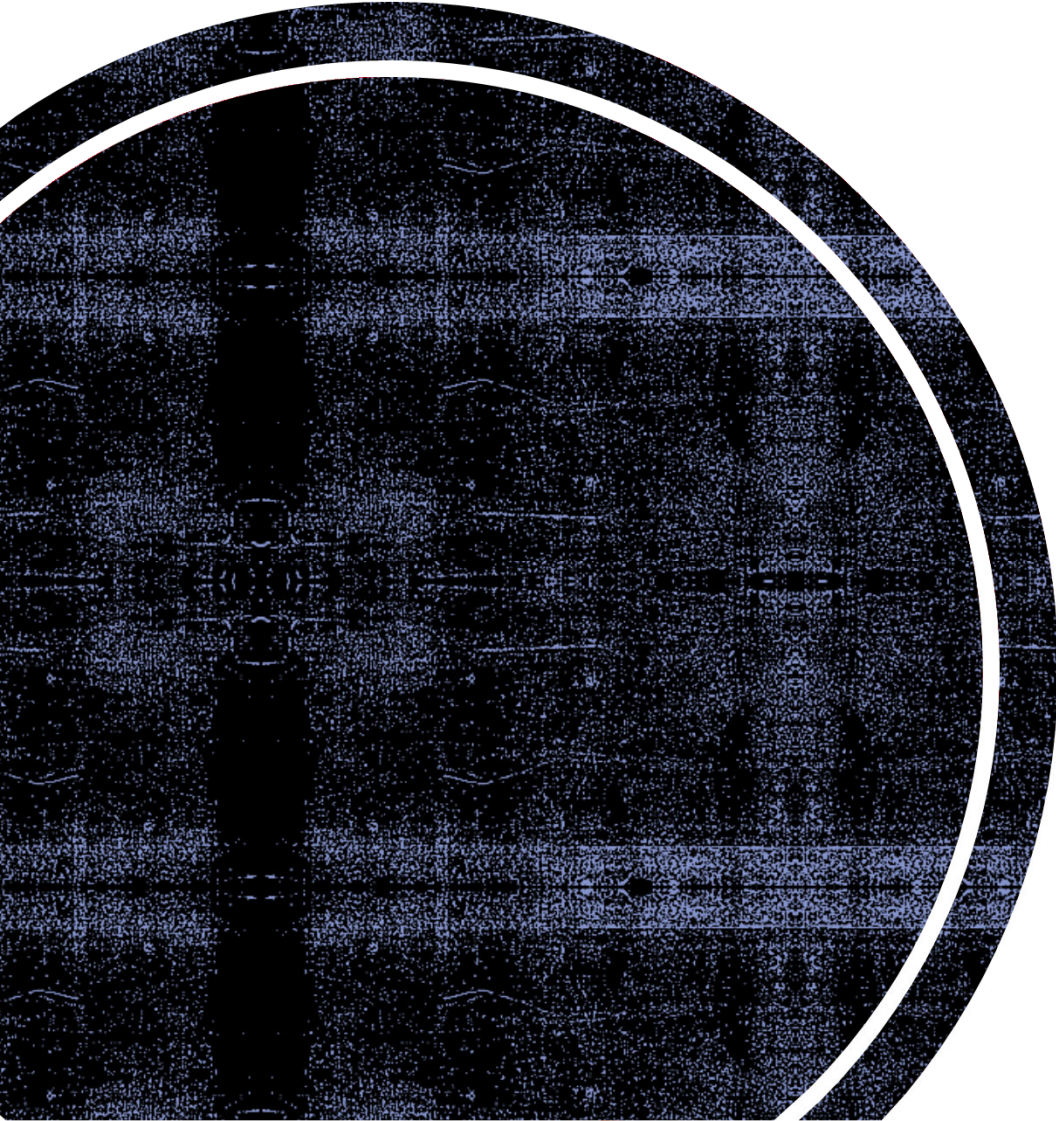


THIN SLICES OF BEHAVIOR

- Brief behavioral expressions (observable)/Glimpses of behavior
 - Perhaps an evolutionary advantage
 - Situational variance/behavioral persistence
- Patterns and function

DEMONSTRATION

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- The therapist maintains a stance that instigates and reinforces psychological flexibility...

...and has heart

Death is no pretense.
It is as stark a reality,
As complete a presence as life itself,
The other ultimate choice.

-karen

COMPASSIONATE IMMEDIACY

- Expressing a sense of urgency
- “Lean in”

YOU ARE HERE



You are alive and
here

You are
conscious



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FREEDOM AND RESPONSIBILITY

Inside of being able to
observe your “hereness”
what will you do?



LIFE FROM THE FEET UP

- Values cannot be lived from a “still” position
- We are carried into and through our values with our actions
- Life is found in the feet

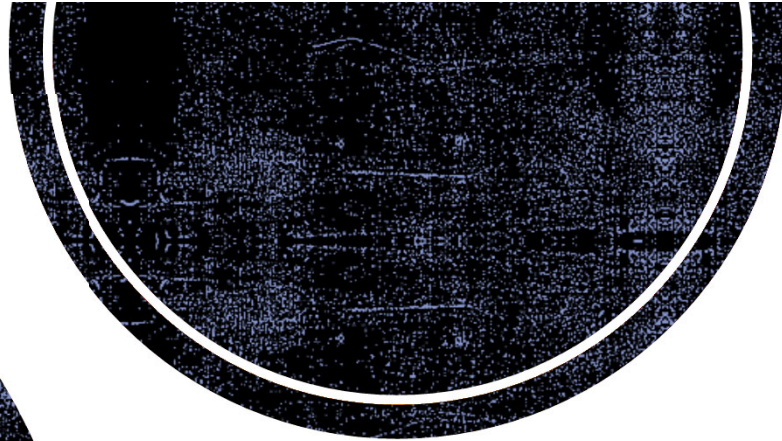
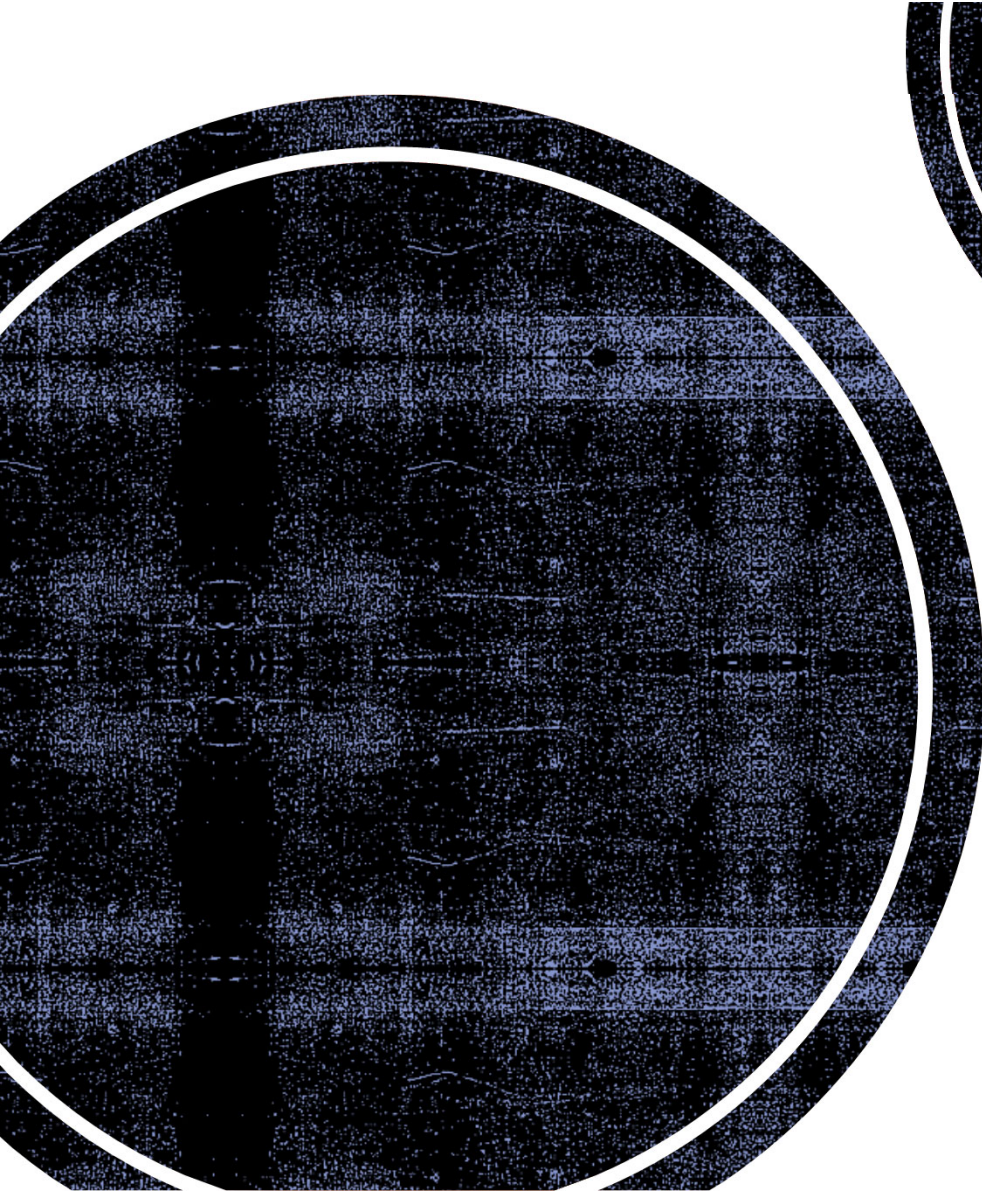
Motion

ACT'S HEART: PROCESS AND FUNCTION

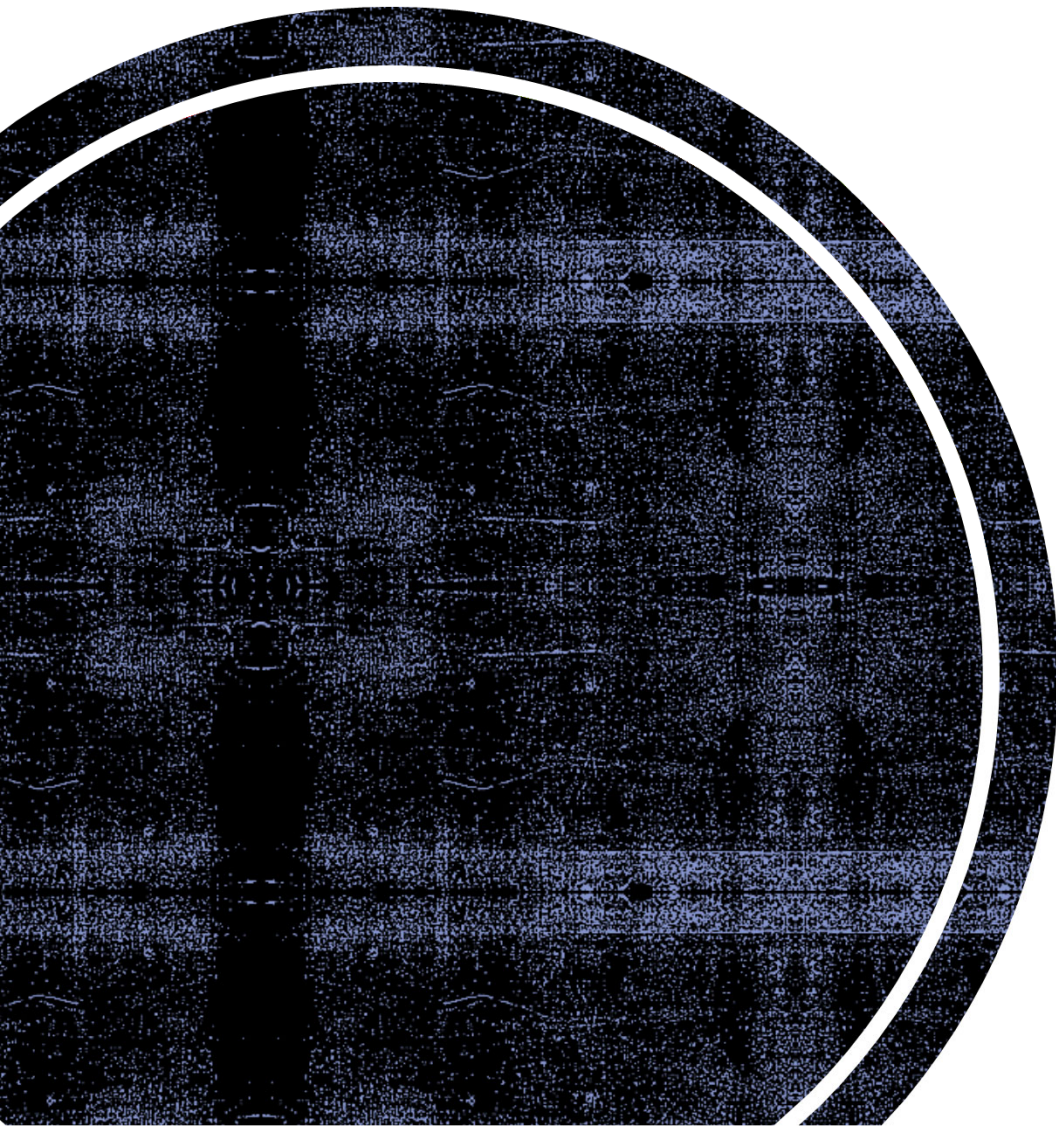




SHE IS A PROCESS



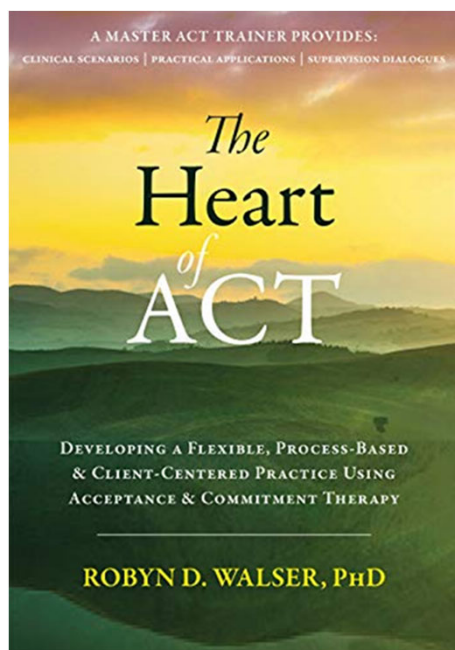
...AND SO ARE YOU



ROBYN'S MOM'S WORDS FOR ROBYN

“Life should not be a journey to the grave with the intention of arriving safely in a pretty and well-preserved body, but rather to skid in broadside in a cloud of smoke, thoroughly used up, totally worn out, and loudly proclaiming “Wow! What a Ride!”

-Hunter S. Thompson



THANK YOU!

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