

Select references on ACT in the Treatment of Chronic Pain

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Acceptance & Commitment Therapy in the treatment of chronic pain

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- Acceptance and Commitment Therapy is

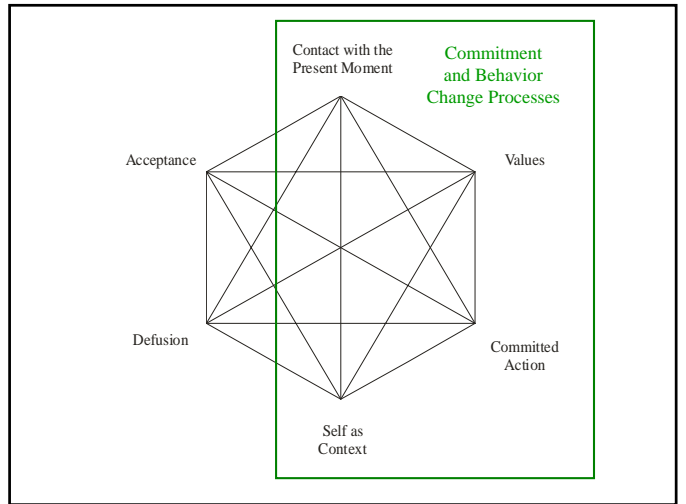
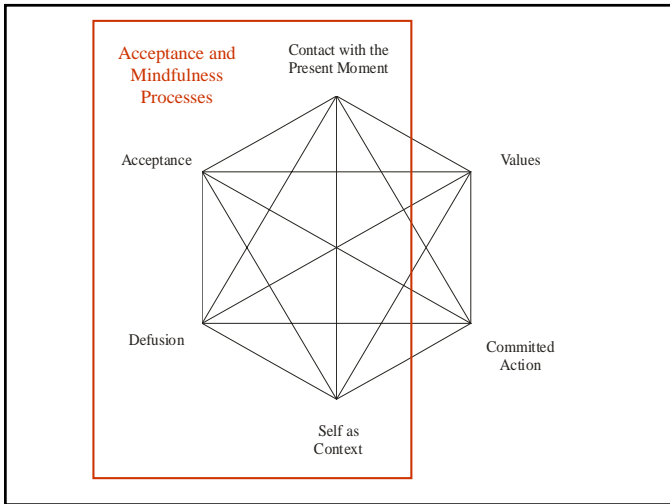
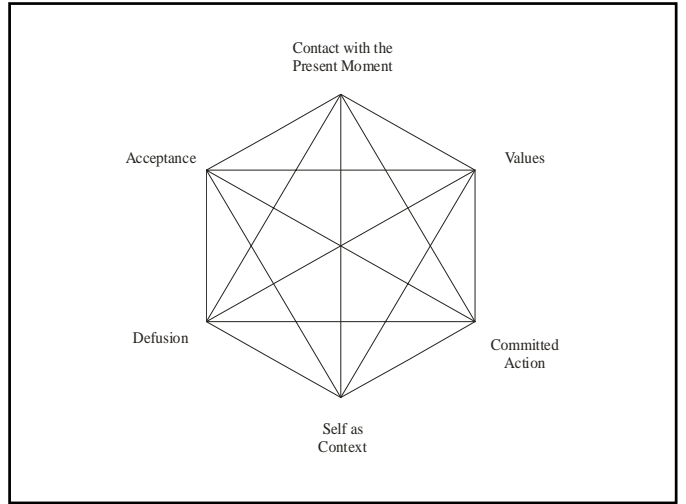
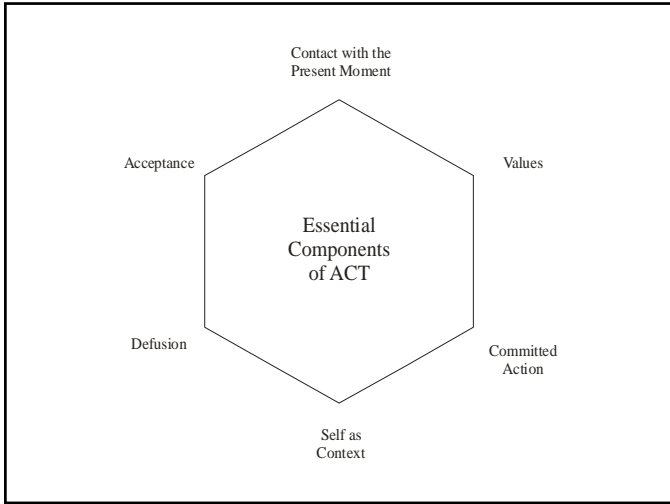
- ...based on empirically based principles
- ...aimed to increase psychological flexibility
- ...using a mindfulness-based approach
- ...with behavior change strategies

- Psychological flexibility is:

- contacting the present moment fully
- as a conscious, historical human being,
- and based on what the situation affords
- changing or persisting in behavior
- in the service of chosen values.

What is ACT?

a functional contextual therapy approach based on Relational Frame Theory which views human psychological problems dominantly as problems of psychological inflexibility fostered by cognitive fusion and experiential avoidance. In the context of a therapeutic relationship, ACT brings direct contingencies and indirect verbal processes to bear on the experiential establishment of greater psychological flexibility primarily through acceptance, defusion, establishment of a transcendent sense of self, contact with the present moment, values, and building larger and larger patterns of committed action linked to those values.



Creative Hopelessness

- Experienced by the client when she notices that there is an unworkable change agenda.
- the client has tried to make things better for herself by using control strategies in contexts where they don't work
- Creative hopelessness creates a space for something new to happen.

The solution is part of the problem

- Attempts to control and avoid unwanted private experience increase unwanted private experience
- If you're not willing to have it you've got it
- Avoidance decreases psychological flexibility and opportunities for positive reinforcement

Avoidance and chronic pain

- Avoiding pain
- Escaping pain
- Numbing pain
- Going from treatment to treatment
- Fad 'cures'

Pain and suffering

- Altering one's life to avoid pain causes suffering, which increases pain, which increases suffering, which increases pain, which increases suffering...
- It isn't pain itself, but one's response to pain that is the problem

- There are aspects of pain that can be changed and managed. And...
- Suffering increases when managing pain is at the expense of living one's life.

Acceptance

- Actively contacting psychological experiences
 - directly, fully, and without needless defense
 - while behaving effectively

Hayes, Wilson, Gifford, Follette, & Strosahl, 1996, p. 1163

Acceptance and pain

- People with chronic pain are often trying to escape pain in order to do something in their life that pain seems to prevent.
- What if you were to accept that pain?
- What if you were to choose to live the life you want with pain along for the ride?

Defusion

- Looking at thoughts, rather than from thoughts
- Seeing thoughts as what they are, not as what they say they are
- The aim is, instead of changing thoughts, to change one's relationship to thoughts

Pain and fusion

- Automatic thoughts, rules, and beliefs about pain
 - I should not feel pain
 - I am being punished
 - I cannot ___ because I Might feel pain
 - I am unlovable because I have chronic pain
 - I need to stop what I am doing when I feel pain
 - I shouldn't exercise when I am in pain

Pain and defusion

- I'm having the thought that...
- Physicalizing
- Looking at thoughts rather than through thoughts
- And Vs but

Self as Perspective

- A sense-of-self that is a consistent perspective from which to observe and accept all changing experiences
- Transcendent sense of self
- People are not their thoughts, feelings, or body sensations...

- Self a content
- Self as process
- Self as perspective

Self-as perspective and pain

- I am not my pain
- Mindfulness as a path to the observing self

Mindfulness

- The effort to intentionally pay attention, non-judgmentally, to present moment experience, and sustain the attention over time (Kabat-Zinn)
- Increased contact with the present moment

Mindfulness and pain

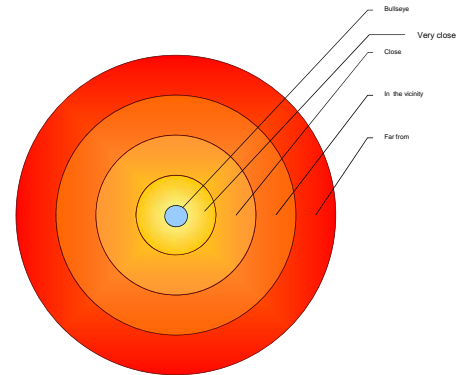
- Body scan
- Noticing and letting go of thoughts about pain
- Sitting meditation

Values

- Chosen life directions
 - Values give life meaning
 - There is a distinction between a value and a goal
 - Values fuel willingness and motivation

Values and pain

- Values dignify ACT/willingness to feel pain
- Values clarification
- Identifying barriers to willingness
- Values bull's eye



Committed Action

- Overt behavior in the service of values
- Moving forward in your important chosen directions

Committed Action and chronic pain

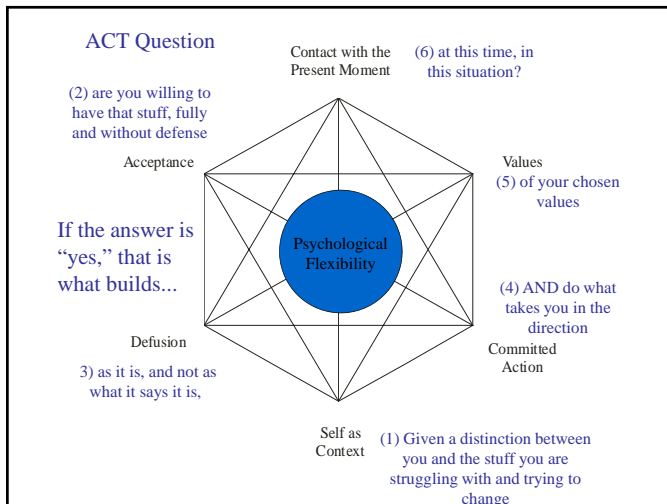
- Identify barriers to valued action
 - Treatment adherence
 - 'Use' instead of disuse
 - Change pain behaviors

The Outcome of ACT is

- Psychological flexibility
- Contacting the present moment fully as a conscious, historical human being, and based on what the situation affords changing or persisting in behavior in the service of chosen values.
- Outcome is the process through which process becomes the outcome

ACT and chronic pain treatment outcomes

- Increased acceptance of pain
- Increased activity levels
- Improved quality of life
- Sometimes initial increase in pain
- Usually (not always) eventual decreased pain



- For ACT info including publications list – www.contextualpsychology.org
- For ACT books – www.newharbinger.com
- Contact me – bach@iit.edu

Chronic Pain Acceptance Questionnaire – Revised (CPAQ-R)

Authors: Lance M. McCracken, Kevin E. Vowles, & Christopher Eccleston

The 20-item CPAQ-revised has been designed to measure acceptance of pain. The acceptance of chronic pain is thought to reduce unsuccessful attempts to avoid or control pain and thus focus on engaging in valued activities and pursuing meaningful goals.

There have been 2 factors identified in the CPAQ-Revised:

- (1) Activity engagement (pursuit of life activities regardless of pain). Items – 1, 2, 3, 5, 6, 8, 9, 10, 12, 15, 19.
- (2) Pain willingness (recognition that avoidance and control are often unworkable methods of adapting to chronic pain). Items – 4, 7, 11, 13, 14, 16, 17, 18, 20.

Scoring: The items on the CPAQ are rated on a 7-point scale from 0 (never true) to 6 (always true). To score the CPAQ, add the items for Activity engagement and Pain willingness to obtain a score for each factor. To obtain the total score, add the scores for each factor together. Higher scores indicate higher levels of acceptance

Reliability: The CPAQ-Revised demonstrates very good to excellent internal consistency, with alphas of .82 (Activity engagement) and .78 (Pain willingness).

Validity: The CPAQ shows moderate to high correlations with measures of avoidance, distress, and daily functioning. The 2 factors of the CPAQ-revised have been found to significantly predict pain-related disability and distress, thus demonstrating predictive validity.

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CHRONIC PAIN ACCEPTANCE QUESTIONNAIRE

Below you will find a list of statements. Please rate the truth of each statement as it applies to you. Use the following rating scale to make your choices. For instance, if you believe a statement is 'Always True,' you would write a 6 in the blank next to that statement.

0	1	2	3	4	5	6
Never true	Very rarely true	Seldom True	Sometimes true	Often true	Almost always true	Always true

- _____ 1. I am getting on with the business of living no matter what my level of pain is.
- _____ 2. My life is going well, even though I have chronic pain.
- _____ 3. It's OK to experience pain.
- _____ 4. I would gladly sacrifice important things in my life to control this pain better.
- _____ 5. It's not necessary for me to control my pain in order to handle my life well.
- _____ 6. Although things have changed, I am living a normal life despite my chronic pain.
- _____ 7. I need to concentrate on getting ride of my pain.
- _____ 8. There are many activities I do when I feel pain.
- _____ 9. I lead a full life even though I have chronic pain.
- _____ 10. Controlling my pain is less important than any other goals in my life.
- _____ 11. My thoughts and feelings about pain must change before I can take important steps in my life.
- _____ 12. Despite the pain, I am now sticking to a certain course in my life.
- _____ 13. Keeping my pain level under control takes first priority whenever I'm doing something.
- _____ 14. Before I can make any serious plans, I have to get some control over my pain.
- _____ 15. When my pain increases, I can still take care of my responsibilities.
- _____ 16. I will have better control over my life if I can control my negative thoughts about pain.
- _____ 17. I avoid putting myself in situations where my pain might increase.
- _____ 18. My worries and fears about what pain will do to me are true.
- _____ 19. It's a great relief to realize that I don't have to change my pain to get on with life.
- _____ 20. I have to struggle to do things when I have pain.