



Brought to you by...



Table of Contents

Welcome from the ACBS President	2
ACBS Officers	2
Items of Note	3
<i>Book Selling</i>	3
<i>CE credits</i>	3
<i>Busing</i>	3
<i>Breakfast</i>	3
<i>6:00am Meditation Workshops</i>	3
<i>Parking</i>	3
<i>Services</i>	4
<i>Food and Beverages</i>	4
<i>Additional Rooms</i>	4
Evening Events	5
<i>Tuesday Evening Social/ Poster Session</i>	5
<i>Thursday Evening Follies</i>	5
Room Schedules	6
Session Descriptions – Monday, 16 July	11
Session Descriptions - Tuesday, 17 July	14
Session Descriptions - Wednesday, 18 July	17
Session Descriptions - Thursday, 19 July	22
Session Descriptions - Friday, 20 July	26
Sponsors	29
Special Thank You's	29
Bus Schedule	30
Dining and Entertainment	29
Maps of Bayou Building	33 & 34
Map of UHCL	Backcover



Welcome from the ACBS President

Welcome all to the Association for Contextual Behavioral Science ACT Summer Institute III. I want to especially welcome all of the clinicians in attendance. ***The Summer Institute is really dedicated to the clinician.*** ACBS hosts two types of conferences. Our World Conferences, held every third year, contain many conceptual and empirical presentations and a few workshops. The Summer Institutes are very focused on training and application. There are a few papers reporting empirical findings and workshop presenters will mention some findings, but the focus of SI3 is to train people to apply ACT and related treatments. Contextual science is, at its heart, a practical matter. ***“If this work does not speak, in the most direct way, to practitioners, it is not good science.”*** How we aim to produce a useful science

is to co-opt practicing clinicians into the development of the work. I want to welcome you and also to implore you to participate actively in the workshops this week. Help you presenters by telling them directly what is very helpful and what is unclear or unhelpful. If we work together, we can produce a science more adequate to the alleviation of unnecessary human suffering and to the richening of lives.

“If this work does not speak, in the most direct way, to practitioners, it is not good science.”

Items of Note

Book Selling

Context Press is selling ACT/ RFT related books at the conference all week (closing at about 4:45pm each day, after lunch on Friday). Please be kind to our generous volunteers selling the books, as the Context Press manager will not always be able to be there to sell books, as she is also your conference organizer, and the ACBS Executive Director. We encourage Visa or MasterCard, but can accept cash as well (the ability to make change may be limited).

CE Credits

What the heck is the deal with CE credits?

- APA CE credits are very time intensive, from an administrative standpoint. This is why we must charge \$25 for those who want APA CEs. You will need to sign in for each session you attend on the sheet provided at the door. You will need to complete an evaluation for each session you attend. If you do these things and turn in your paperwork to the registration/bookselling desk on Friday during lunch, we will do everything in our power to have your certificate ready for you after the final plenary on Friday.
- Texas State Board LPC Credits are available for a charge of \$15. These are less time intensive, but still have a cost. You will need to sign in for each session you attend on the sheet provided at the door. You will need to complete an evaluation for each session you attend. If you do these things and turn in your paperwork to the registration/bookselling desk on Friday during lunch, we will do everything in our power to have your certificate ready for you after the final plenary on Friday.
- CE credits for people who are from states that don't require APA CEs. This is easy. Sign in for each session you attend on the sheet provided at the door. We will do our best to compile the information and have your certificate with the number of hours attended ready for you after the final plenary on Friday.

If we are unable to have everyone's CE certificate printed and ready for you to pick up before you leave, we will try to email it to you within the next week following ACT SI3. If you don't receive it, please email Emily, doact@nvtbell.net.

Busing

For convenience, we have hired our own busing this year. We have one 47 passenger bus that will make loops for us. It will run between the Hilton and UHCL, and between the Hilton and designated eating areas. The bus will make as many loops as possible between scheduled times. Only the first and last runs will occur at specific times. Please see the Bus Schedule/ Dining & Entertainment sections at the back of the program for times, schedule, and designated eating areas.

If you miss the bus or are just a party animal, you can call taxis.

Liberty Cab (713) 416-6005

Yellow Cab: (713) 236-1111

A1 Taxi: (713) 722-8888

Breakfast

Is breakfast provided? Yes and no. Bagels, croissants, fruit, etc. are being provided each morning. However it is limited, and not guaranteed. This is our effort to encourage people to take the early bus in the morning, as everyone can't fit on the bus at the same time. If you arrive hungry and all of the complimentary food is gone, you can still purchase a muffin/bagel or something of the sort on campus at The Patio Café (see next page).

6:00am Meditation Workshops at the Hilton, Tuesday - Thursday

Please note that a special workshop and meditation session is available at the Hilton on Tuesday, Wednesday, and Thursday mornings. See the program for details. These sessions may take place indoors or outdoors, so please dress accordingly (sunglasses, etc.). You should plan on bringing your own mat or cushion. The exact room/location will be announced during a plenary prior to the sessions.

Parking (see map on back cover)

Attendees should park in either **Lot V** (the gated area located in Lot D2) which requires a \$3.00 fee to exit or in a **metered space** which requires a fee. If Lot V indicates "FULL", conference attendees may park in any unreserved space in any of the D Lots. (Weekend parking is free in **Visitor's Lots**.)

Services

Library (2nd floor near Atrium I elevators)

Computers including internet access

Copy machines

Monday--Thursday	8:00 am - 12:00 midnight
Friday	8:00 am - 5:00 pm
Saturday	9:00 am - 5:00 pm
Sunday	1:00 pm - 5:00 pm

Registration/Conference Bookstore (first floor in Atrium I)

Monday--Thursday	8:00 am - 4:45 pm
Friday	8:00 am - 1:30 pm
Saturday	7:45 am - 9:00 am
Sunday	CLOSED

Campus Bookstore (1st floor near Atrium II)

Monday--Thursday	8:30 am - 6:00 pm
Friday	8:30 am - 12 noon
Saturday	CLOSED
Sunday	CLOSED

Food and Beverages

The Patio Café

Serving sandwiches, salads, soft drinks and more.

Located on the first floor of the Bayou Building the cafe features Quiznos, Home Zone, Grill Works, Bene Pizza and Java City.

Monday--Thursday	7:30 am - 6:30 pm
Friday--Sunday	CLOSED

Vending machines

-Microwavable foods (microwaves available)

-Snacks

-Beverages (sodas, water, etc.)

-Hot coffee machines

Additional Rooms

Please note that additional rooms have been reserved during the week. If you are in a session that needs "break out" space to work on exercises, you have access to the following rooms (as long as another ACT SI group has not gotten there first):

Monday - Friday: B1130 (holds 16)

Monday - Friday: B1133 (holds 46)

Monday & Friday only: B1104 (holds 34)

Tuesday only: B1313 (holds 95)

Wednesday only: B1333 (holds 46)

Thursday only: B1313 (holds 95)

Friday only: B1124 (holds 20)

Evening Events

Tuesday Evening, Social/ Poster Session, 17 July, 8:00pm – 11:00pm **Marina Ballroom, 2nd Floor, Hilton**

We will have an evening of drinks, lab/research center posters, and merriment at the Hilton - Houston Nasa Clear Lake (the conference hotel), at 3000 NASA Parkway. Please eat dinner prior to arriving. A cash bar will be available.

POSTER SESSION

Category: ACT/Theoretical/Contextualism

Relationship between PTSD Symptomology, Acceptance Coping, and Self-care Behaviors in Individuals with Comorbid Type 2 Diabetes and PTSD

Priscilla Almada, Eric Schmidt, and Jennifer Gregg, Ph.D., San Jose State University

Category: ACT-relevant Empirical Study

The Relationship between Targeted ACT Processes and Body Image and Eating Habits: The Moderating Role of Gender

Erin Barnett, M. A., Anik Gevers, M. A., & Laurie A. Greco, Ph.D.
University of Missouri, St. Louis

Psychological Inflexibility and Friendship Quality Among Youth: Contributions of Gender, Age, and Mental Health Variables

Debra W. Emery, M. A., Erin Barnett, M. A., & Laurie A. Greco
University of Missouri, St. Louis

Gender Differences in the Relationship between Eating Disorder Symptoms and Quality of Life as Influenced by Psychological Inflexibility, Acceptance, and Mindfulness

Anik Gevers, M. A., Erin Barnett, M. A., & Laurie A. Greco
University of Missouri, St. Louis

The Role of Age and Gender in the Relationship between ACT-relevant Processes and Mental Health Challenges

Anik Gevers, M. A., Meghna Patel, M. A., John Nanney & Laurie A. Greco, Ph.D.
University of Missouri, St. Louis

The Role of Acceptance and Mindfulness in the Relationship between Somatic Complaints and Quality of Life in Children and Adolescents

John Nanney, Debbie Emery, M. A. & Laurie A. Greco.
University of Missouri, St. Louis

The Role of Psychological Inflexibility in the Relationship between Somatic Complaints and Quality of Life in Children and Adolescents

John Nanney, Debbie Emery & Laurie A. Greco
University of Missouri, St. Louis

Evaluating the Moderating Effects of ACT-Relevant Processes in the Relationship between Anxiety and Somatic Symptoms and Social and Academic Functioning

Meghna Patel, John Nanney & Laurie Greco
University of Missouri, St. Louis

Category: Pain and Acceptance

Pain in Veterans with Spinal Cord Injuries: Acceptance and Catastrophizing

Joshua R. Bringle, Ph.D. (Bronx VA, GRECC), David Siegel, M. D. (Bronx VA), Chris Cordoza, M. D. (Bronx VA), Ann Spungen, Ed.D. (Bronx VA), (Bronx VA), Julia Siegel, B. A. (Bronx VA, GRECC), Joan Penrod, Ph.D. (Bronx VA, GRECC)

Category: Teaching

Using ACT to Teach Professionalism in Medical Training

Karen Kingsolver and Jill Compton
Duke University School of Medicine

Thursday Evening, Follies, 19 July, 8:00pm – Midnight **Admiral Ballroom, 1st Floor, Hilton**

Thursday will be our famous "Follies Night." We encourage one and all to develop and perform ACT/RFT related skits, songs, funny PowerPoint presentations, etc. The show will begin at approximately 9:00pm. Please eat dinner prior to arriving. A cash bar will be available.

Monday, July 16

	9:00-10:00	10:00-10:15	10:15-12:30	12:30-1:30	1:30-4:15	4:15-4:30	4:30-5:45
<u>Room</u>	<u>Plenary</u>	-	<u>Sessions</u>	-	<u>Sessions</u>	-	<u>Plenary</u>
Theater	Join Me! A Communitarian Approach is Essential to Contextual Science <i>Wilson</i>	Break		Lunch (Atrium I & Garden Rm.)		Break	State of the Evidence in ACT <i>Hayes</i>
Forest Rm. B1418			Basic ACT Skills <i>Hayes & Boulanger</i>		Behavioral Activation & Conversations about Convergence and Divergence with ACT <i>Dimidjian & Wilson</i>		
Garden Rm. B1510			Spiritual Reality <i>Robb</i>		Watch and Practice <i>Luoma & Torneke</i>		
B1135			Cancer, Death, & Dying <i>Branstetter</i>		Demystifying RFT: An Introduction to Relational Frame Theory <i>Moran & Bach</i>		
B1335			ACT Outside the United States: Joys and Challenges <i>Masuda</i>		ACT at War: Soldiers, Survivors, and Families <i>Batten</i>		
B2512					The Therapeutic Relationship: Using ACT to Do ACT <i>Walser</i>		

Tuesday, July 17

	6:00-8:00	9:00-11:45	11:45-1:30	1:30-4:15	4:15-4:30	4:30-5:45
Room	-	Sessions	- -	Sessions	-	Plenary
Theater						The Relationship between ACT, CT, and CBT <i>Herbert</i>
Forest Rm. B1418		ACT with Chronic Medical Conditions <i>Strosahl, Robinson, & Gregg</i>	<i>ACT in ACTION</i> DVD 1	ACT-Based Contextual Behavioral Supervision <i>Batten & Walser</i>	Break	
Garden Rm. B1510		Lessons Learned From Applying ACT to Anxious Older Adults <i>Wetherell & Afari</i>	Lunch (Atrium I & Garden Rm.)	Mindfulness and ACT: Connecting Buddhist Meditation Practices to ACT/RFT Concepts <i>Fletcher & Levin</i>		
B1135		ACT Clinical Methods in Values Clarification and Defusion <i>Luciano</i>		ACT on Death: Terminal Illness, Mortality Awareness, and the Daily Practice of Dying <i>Gregg</i>		
B1335				In Pursuit of a Behavioral Measure of Psychological Flexibility: Design, Data, and Discussion <i>Panel Discussion: Drake et al.</i>		
B2512	Opt. Meditation (HILTON)	ACT Gone Wild: An Intensive Approach to Getting Veterans Suffering with Trauma Back Into Life <i>Polk</i>	Paper Pres. 1-1:30			

Wednesday, July 18

	6:00-8:00	9:00-11:45	11:45-1:30	1:30-4:15	4:15-4:30	4:30-5:45
<u>Room</u>	-	<u>Sessions</u>	-	<u>Sessions</u>	-	<u>Plenary</u>
Theater						State of the Evidence in RFT for Clinicians <i>Bach</i>
Forest Rm. B1418		ACT as a Brief Intervention Model <i>Strosahl</i>	<i>ACT in ACTION</i> DVD 2	ACT with the "Difficult Client" <i>Strosahl</i>	Break	
Garden Rm. B1510		ACT: Finding Life Beyond Trauma <i>Walser & Pistorello</i>	Lunch (Atrium I & Garden Rm.)	ACT-ifying DBT <i>Georgescu & Bach</i>		
B1135		Helping Treatment-Resistant Patients Live Rich and Meaningful Lives <i>Clarke, Bolderston, Kingston, & Remington</i>		ACT: A Novel Approach to the Treatment of Problematic Eating and Body Image <i>Sandoz, Timko, & Merwin</i>		
B1335		Creating Values-Based Communities and Organizations <i>Hayes & Fletcher</i>		ACT and the Christian Tradition <i>Ord, Wilson, & Hayes</i>		
B2512	Opt. Meditation (HILTON)	Case Conceptualization in ACT <i>Bach & Moran</i>	Paper Pres. 1-1:30	ACT and Social Phobia <i>Herbert</i>		

Thursday, July 19

	6:00-8:00	9:00-11:45	11:45-1:30	1:30-4:15	4:15-4:30	4:30-5:45
<u>Room</u>	-	<u>Sessions</u>	-	<u>Sessions</u>	-	<u>Plenary</u>
Theater						Mindfulness and Cognitive Processes <i>Ramel</i> Mindfulness Meditation Training <i>Goldin</i>
Forest Rm. B1418		A Step-by-Step Walk Through a Videotaped ACT Intervention <i>Wilson & Bolderston</i>	<i>ACT in ACTion</i> DVD 3	ACT in the Delivery of Primary Care Behavioral Health Services <i>Robinson</i>	Break	
Garden Rm. B1510		ACT in the Treatment of Psychosis <i>Bach</i>	Lunch (Atrium I & II)	What Hurts Matters Most: The Values of Pain Link in ACT/RFT <i>Hayes, Plumb, & Yadavaia</i>		
B1135		Mindfulness-Based Stress Reduction <i>Cushman</i>		ACT in the Workplace <i>Bond</i>		
B1335		Using ACT to Address Weight Loss and Obesity-Related Stigma <i>Lillis</i>				
B2512	Opt. Meditation (HILTON)	Creating an ACT-Like Culture for Children and Adolescents <i>Embry, Biglan, & Murrell</i>		Letting Go of "Righteous" Anger with Willingness: Strategies for Working with Anger Rooted in the Past, Present, and Future <i>Santanello & Robb</i>		

Friday, July 20

	9:00-11:45	11:45-12:45	12:45-2:00
<u>Room</u>	<u>Sessions</u>	-	<u>Plenary</u>
Atrium II		Box Lunch (Atrium I & II)	<p align="center">Presidential Address The Hexaflex Diagnostic: A Fully Dimensional Approach to Assessment, Treatment, and Case Conceptualization <i>Wilson</i></p>
Forest Rm. B1418	<p align="center">Teaching ACT More Directly <i>Hank Robb</i></p>		
Garden Rm. B1510	<p align="center">ACT for Chronic Medical Conditions and Lifestyle Behavior Change <i>Gregg</i></p>		
B1135	<p align="center">Writing Research Proposals for NIH <i>Biglan</i></p>		
B1335	<p align="center">Betting on People in Impoverished Contexts <i>Rogers & LaBorde</i></p>		
B2512	<p align="center">ACT with Depression <i>Zettle</i></p>		

Monday Morning 9:00-10:00am

OPENING SESSION: THEATER

WELCOME TO UHCL

WILLIAM A. STAPLES, President, University of Houston – Clear Lake

JOIN ME! A COMMUNITARIAN APPROACH IS ESSENTIAL TO CONTEXTUAL SCIENCE

KELLY WILSON, ACBS President & University of Mississippi

Monday Morning 10:15-12:30pm

BASIC ACT SKILLS

Workshop

Forest Room: B1418

STEVEN C. HAYES, University of Nevada, Reno
JENNIFER L. BOULANGER, University of Nevada, Reno
Target Audience: Beginner, Intermediate, Clinicians

This workshop will target a small set of core ACT skills, primarily in defusion and acceptance, and through instruction, videotapes and role play will practice these skills.

Educational Objectives:

1. Learn a small set of acceptance and defusion methods.
2. Increase participants' ability to recognize more and less skillful use of acceptance and defusion methods.
3. Gain skill in applying acceptance and defusion methods.

SPIRITUAL REALITY

Workshop

Garden Room: B1510

HANK ROBB, Pacific University

Target Audience: Anyone interested in spiritual development

The principles of Acceptance and Commitment Therapy have been suggested to already be in, or available for use to support, many traditional dualistic spiritual beliefs and practices. This workshop pushes the envelope to ask if ACT based principles and practices could be used to support a monistic, pragmatically oriented approach to spiritual development. This workshop will explore the philosophical and practical aspects of such a proposal.

Educational Objectives:

1. Identify the outlines of a monistic, pragmatically oriented approach to spiritual development.
2. Identify a possible root metaphor for the approach.
3. Consider ACT principles as a basis for spiritual development rather than an adjunct to it.

COPING WITH CANCER: FACILITATING ACCEPTANCE AND A FIGHTING SPIRIT THROUGHOUT THE JOURNEY

Workshop

Room: B1135

ANN BRANSTETTER, Missouri State University

Target Audience: Intermediate, Clinicians

Research suggests that up to 90% of individuals diagnosed with cancer will experience significant psychological distress, including depression and chronic anxiety. The occurrence of depression and anxiety are also associated with mortality and decreased response to chemotherapy, as well as lowered immune function. In addition, these forms of psychological distress are clearly associated with avoidance-based coping mechanisms. Alternatively, acceptance is associated with lower distress, improved health, and greater quality of life. This workshop is designed to provide the practitioner with skills to conduct Acceptance and Commitment Therapy within the context of cancer, the medical system, and potential death, with the overall goal to move patients to greater levels of acceptance, while maintaining their fighting spirit.

Educational Objectives:

1. Gain understanding regarding the impact of a cancer diagnosis on an individual's psychological and physical well being.
2. Learn key components and ACT-consistent exercises to use when working with individual's who have cancer.
3. Learn value-based techniques for use with individuals nearing the end of life

ACT OUTSIDE THE UNITED STATES: JOYS AND CHALLENGES

Panel Discussion

Room: B1335

Moderator: AKIHIKO MASUDA, Georgia State University

Panelists:

TAKASHI MUTO, Ritsumeikan University, Kyoto, Japan
JACQUELINE PISTORELLO, University of Nevada, Reno

CLAUDIA DROSSEL, University of Nevada, Reno

Target Audience: All Levels, Clinicians and Researchers

Acceptance and Commitment Therapy (Hayes, Strosahl, and Wilson, 1999) is now studied and practiced worldwide. In this context, many dissemination efforts have been made, such as translation of ACT and ACT-related books into native tongues as well as publication of original ACT books and articles. Additionally, we now see ACT workshop/training conducted all over the place in the world. While thrilled by this rapid growth, there are some challenges and concerns in these dissemination efforts.

The present panel brings together ACT researchers and therapists who have been actively involved in the dissemination of ACT in cross-cultural contexts. The

central aim will be simply to share their experiences (i.e., difficulties in translation and training). Some of their experiences may be very unique, and others may be global and shared by many of us in the daily practice and research of ACT. Dissemination efforts in cross-cultural settings will also be discussed from a functional contextualistic perspective.

Educational Objectives:

1. To discuss and explore issues/concerns about doing ACT therapy/training in cross-cultural contexts.
2. To discuss concerns/issues in writing ACT manuscripts in non-English languages.
3. To discuss how to best conceptualize ACT in cross-cultural settings.

Monday Lunch 12:30-1:30pm

Monday Afternoon 1:30-4:15pm

ACTIVATING AND ENGAGING: TREATING DEPRESSION WITH BEHAVIORAL ACTIVATION & CONVERSATIONS ABOUT CONVERGENCE AND DIVERGENCE WITH ACT

Workshop

Forest Room: B1418

SONA DIMIDJIAN, University of Colorado, Boulder

KELLY WILSON, University of Mississippi

Target Audience: Beginner, Intermediate, Clinicians

Behavioral Activation (BA) is an exciting treatment for depression that has demonstrated strong results in a number of recently completed randomized clinical trials. BA teaches clients specific strategies to become active and engaged in their lives in ways that will help improve mood and address life problems. A number of core strategies are utilized in BA, including increasing activity linked with positive mood, modifying avoidance patterns, identifying important life goals, maximizing commitment to acting toward goals in the context of negative affect, regulating routines, increasing contact with naturally reinforcing contexts, and solving problems. This workshop will review the history and background, structure, key techniques, and empirical support for the BA approach with depressed patients, and it will also discuss other relevant activation approaches and new directions in research on BA. Finally, the workshop will provide an opportunity for discussion and reflection on points of convergence and divergence between BA and ACT. In general, the structure of the workshop will include a combination of didactic presentation, experiential exercises, observation of videotaped illustrations, and discussion.

Educational Objectives:

1. The history and evidence base supporting the clinical application of BA
2. The basic theory and core strategies of BA.
3. Points of convergence and divergence between BA and ACT.

WATCH AND PRACTICE

Workshop

Garden Room: B1510

JASON LUOMA, Private Practice, Portland, Oregon

NIKLAS TORNEKE, Private Practice, Sweden

Target Audience: Beginner, Intermediate Clinicians

This workshop will build on role plays. The workshop leaders will demonstrate different aspects of ACT in role playing before the participants and the participants will practice themselves in smaller groups. The workshop will shift between work in the whole group and work in smaller groups. Feedback and discussion on different ways to handle clinical situations will be included, and formal teaching will be kept to a minimum, except for a short introduction.

Important: Each participant should bring a clinical case to work on! There will be no need to formally present the case but the participant should know the case well enough to role play the client in a small group of 3-5 persons.

Maximum of 30 participants.

Educational Objectives:

1. Learn how to do a functional analysis from an ACT perspective.
2. Learn how different ACT techniques relate to one another.
3. Learn how to bring metaphors and experiential exercises into the flow of therapy.

DEMISTIFYING RFT: AN INTRODUCTION TO RELATIONAL FRAME THEORY

Workshop

Room: B1135

DANIEL J. MORAN, Trinity Services, MidAmerican Psychological Institute

PATRICIA BACH, Illinois Institute of Technology

Target Audience: Beginner, Clinicians and Researchers

Arbitrarily applied what? Derived relational who? If you started learning about Relational Frame Theory (RFT), and then stopped when you read: *Crel {ArxB and BrxC...}*, or have just been interested in learning the basics of RFT, this is the introductory workshop for you.

This workshop will outline and explain the basic concepts of RFT and help the audience members understand an expanded functional approach to verbal behavior. The workshop will simplify functional contextualism principles and discuss the basic RFT research methods and results in a manner that will help people who are new to RFT to begin applying the concepts to their own clinical and research endeavors.

We plan to make clear the core assumptions of functional contextual behavior analysis and how they apply to discussing language and cognition. We aim to not let your eyes glaze over as we discuss

transformation of stimulus functions, generalized operants, and the different types of derived relating. Most importantly, we plan to help everyone have an enjoyable time while “framing events relationally” about RFT.

The workshop will be guided by an animated slide show and will be punctuated with audience participation and small group participation. Slide show handouts will be distributed as well.

Educational Objectives:

1. Basic understanding of arbitrary applicable relational responding, along with mutual entailment and combinatorial entailment, and transformation of stimulus functions.
2. Expanded view of “verbal behavior” using RFT principles.
3. Able to generate examples of how to apply RFT principles to their own research or clinical applications.

ACT AT WAR: SOLDIERS, SURVIVORS, AND FAMILIES

Workshop

Room: B1335

SONJA V. BATTEN, VA Maryland Health Care System and University of Maryland School of Medicine

Target Audience: Intermediate, Advanced, Clinicians and Researchers

Ongoing conflicts in Iraq and Afghanistan have provided a recent highlight on the effect of warzone experiences on the soldiers who are engaged in warfare throughout the world. Some of the veterans returning from these conflicts will experience diagnosable disorders, such as PTSD, depression, GAD, and substance use disorders, for which there are empirically supported treatments. However, clinicians often find that barriers to implementing those treatments exist. We feel that there are multiple reasons that an ACT-based approach is especially appropriate for military veterans. Military culture specifically trains individuals to avoid aversive private experiences (which may actually be adaptive in the context of combat) and to follow directions as given through the chain of command. Thus, we believe that an approach based on reducing avoidant responding and increasing willingness to experience and accept all private experiences in the service of moving toward a more valued life is fully applicable to many of these veterans. This work on values is particularly important as veterans transition from several years in the military, where most day-to-day choices are made externally, to a life in which they must choose their own directions.

The current workshop will provide a framework for understanding the posttraumatic problems in functioning often seen in military veterans, and the subsequent effects on their families and relationships. Specific applications of ACT for those individuals who have been exposed to warfare will be presented,

along with implications for readjustment to daily life following a wartime experience.

Educational Objectives:

1. Describe the aspects of military culture that contribute to experiential avoidance.
2. Identify clinical characteristics of war veterans returning from current conflicts.
3. Describe several ACT-based interventions used with traumatized veterans.

THE THERAPEUTIC RELATIONSHIP: USING ACT TO DO ACT

Workshop

Room: B2512

ROBYN D. WALSER, National Center for PTSD, Palo Alto, California

Target Audience: Intermediate, Clinicians

Measures of the therapeutic relationship have been shown to be some of the strongest correlates with positive outcome. However, understanding and describing the therapeutic relationship has proved more elusive. In this workshop we will explore both the content and processes of the therapeutic relationship from an ACT stance. Our focus will include a description of how the most basic part of the ACT therapeutic stance naturally flows from a therapist's application of the ACT model of language and human functioning to their own professional and personal life. We will address how therapists can flexibly adopt the basic ACT therapeutic stance, and work with the six ACT processes in regards to their own psychological experience in session. Experiential exercises will be included.

Educational Objectives:

1. Discuss the theoretical basis for the therapeutic relationship from an ACT perspective.
2. Describe how six core processes apply to personal psychological experience in the session.

Monday Afternoon 4:30-5:45pm

PLENARY SESSION: THEATER

THE STATE OF THE EVIDENCE IN ACT

STEVEN C. HAYES, University of Nevada, Reno

This talk will examine the current state of the scientific literature in ACT, both in terms of outcomes and in terms of processes of change. It will also look ahead to future developments that seem to be coming or would be useful to have emerge.

Educational Objectives:

1. Identify the current state of scientific literature in ACT in terms of outcomes.

2. Identify the current state of scientific literature in ACT in terms of processes of change.
3. Describe future research that might fill in gaps in the current empirical literature.

Tuesday Morning 6:00-8:00am (Hilton)

THE PRACTICE OF ACT AND THE PRACTICE OF VIPASSANA: SESSION 1

Workshop – 3 sessions*

Room: Hilton TBA

VIJAY SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

ANNE SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

JAY WILKINSON, Pacific University

Target Audience: All Clinicians

The premise is that Vipassana and ACT overlap almost completely. Vipassana achieves without words what ACT achieves with words.

The premise will be experientially explored during the three sessions with about half of the session spent in Vipassana meditation and half in interactive dialogue. (Those not having had any experience in Vipassana will be given some basic guidance. Please note that I am not a Vipassana teacher so that this is not to be construed as the teaching of Vipassana).

Participants are requested to bring their own meditation cushions, benches, safus, mats etc. as we will not have any available on site.

*Participants are strongly encouraged to commit to attending all three sessions.

Educational Objectives:

1. Deepen the integration of ACT with mindfulness.
2. Build a better understanding of Self as Context.
3. Values and Vipassana.

Tuesday Morning 9:00-11:45am

ACT WITH CHRONIC MEDICAL CONDITIONS

Workshop

Forest Room: B1418

KIRK STROSAHL, Mountainview Consulting Group, Zillah, Washington

PATRICIA ROBINSON, Mountainview Consulting Group, Zillah, Washington

JENNIFER A. GREGG, San Jose State University

Target Audience: Advanced, Clinicians

The growing national emphasis on primary care behavioral health integration brings with it many opportunities to implement ACT concepts in the long term management of chronic conditions, such as chronic pain, diabetes or depression. Chronic

condition “pathways” are evidence based, integrated treatment packages that may be applied over time to help the patient live a vital life in the midst of distressing physical and/or psychological symptoms. ACT is an ideal treatment model in such instances, with its twin emphasis on accepting what can’t be changed and commitment to living a valued life in the midst of pain. In this workshop, we will explore the application of ACT to two common conditions seen in primary care: chronic pain syndrome and obesity. We will explain each of these conditions from an ACT perspective and then describe an integrated pathway approach in which the behaviorist and physician operate as a closely knit unit. Principles for developing ACT based chronic condition pathways will be described. We will also provide clinical demonstrations of ACT interventions with patients suffering from chronic pain and obesity.

Educational Objectives:

1. Demonstrate how ACT principles support the goals of chronic condition management.
2. Appreciate the ACT PC approach as applied to chronic pain and obesity.
3. Illustrate core principles for designing integrated ACT pathway programs.

LESSONS LEARNED FROM APPLYING ACT TO ANXIOUS OLDER ADULTS

Workshop

Garden Room: B1510

JULIE L. WETHERELL, University of California San Diego

NILOO AFARI, University of California San Diego

Target Audience: Beginner, Intermediate, Clinicians and Researchers

The presenters, who are experts in ACT and geropsychology, will offer a 60-minute interactive presentation focused mainly on lessons they have learned in applying ACT to older adults with GAD. During the first half of the session, the speakers will introduce a case presentation. The second half will consist of a therapist-client role-play and question/answer consultation.

Educational Objectives:

1. To familiarize attendees with distinguishing characteristics of therapy with older adult clients.
2. To discuss widespread themes seen in therapy with older anxious adults, such as caregiving and responsibility, and how to address these from an ACT perspective.
3. To discuss common challenges in doing ACT with older adults and how to overcome them.

ACT CLINICAL METHODS IN VALUES CLARIFICATION AND DEFUSION

Workshop

Room: B1135

CARMEN LUCIANO, University of Almería, Spain

Target Audience: Intermediate, Clinicians

Among the relevant aspects defining Acceptance and Commitment Therapy, the therapist has to work on values clarification and defusion. First, several methods will be presented for clarifying the workability of the rule-governed behavior that is organizing the client's life. Multiple clinical examples will be provided which can help clients to make experiential contact with actions consistent with his/her chosen values. In addition, examples will be given of exercises that help clients in perspective taking on private behavior, such as thoughts and emotions. Finally, a technical account of the verbal processes involved in these interventions will be provided.

Educational Objectives:

Participants will learn:

1. Methods of examining the workability of current client functioning.
2. Values clarification strategies.
3. Methods of teaching clients self-as-context through perspective taking on private events.
4. Technical analyses of these interventions.

ACT GONE WILD: AN INTENSIVE APPROACH TO GETTING VETERANS SUFFERING WITH TRAUMA BACK INTO LIFE
Workshop

Room: B2512

KEVIN L. POLK, Veterans Affairs Hospital, Togus, Maine

Target Audience: All Levels, Clinicians

The Intensive Outpatient PTSD Program (IOP) at the Togus VA may well be the most intensive group implementation of ACT yet developed. The intensity has allowed for rapid testing of what works and does not work in terms of using ACT with groups of veterans suffering with trauma memories. Dr. Polk will present how an intensive ACT program can quickly activate psychological flexibility in both veterans and clinicians.

Educational Objectives:

1. Learn the structure of the ACT intensive PTSD program at the Togus VA.
2. Learn how the program impacts the veteran's psychological flexibility.
3. Learn how the program impacts the clinician's psychological flexibility.

ACBS BOARD MEETING

Tuesday Lunch 11:45-1:30pm

ACT in ACTION DVD Series

Steve Hayes & New Harbinger Publications
Forest Room: B1418

During lunch Tuesday, Wednesday, and Thursday we will be showing an early draft of some of the videos

from the *ACT in ACTION* DVD Series that will be coming out this fall. They are 60-90 minutes and will run through lunch. Please watch at your convenience. Thank you to New Harbinger Publications for allowing us to screen these for you, even though they are in rough format.

Paper Session (end of lunch) 1:00-1:30pm

DOES AVOIDANCE (EXPERIENTIAL AVOIDANCE AND THOUGHT SUPPRESSION) MEDIATE THE RELATIONSHIP BETWEEN NEGATIVE AFFECTIVITY, CHILDHOOD TRAUMA, AND ENGAGING IN MALADAPTIVE BEHAVIOUR PROBLEMS?

Paper Session

Garden Room: B1510

JESSICA KINGSTON, University of Southampton and Dorset National Health Service
SUSAN CLARKE, University of Southampton and Dorset National Health Service

BOB REMINGTON, University of Southampton

Target Audience: Beginner, Intermediate, Researchers

Tuesday Afternoon 1:30-4:15pm

ACT-BASED CONTEXTUAL BEHAVIORAL SUPERVISION
Workshop

Forest Room: B1418

SONJA V. BATTEN, VA Maryland Health Care System and University of Maryland School of Medicine

ROBYN D. WALSER, National Center for PTSD, Palo Alto, California

Target Audience: Intermediate, Clinicians

Supervision in Acceptance and Commitment Therapy (ACT) is vital in training. A context for establishing willingness to experience is fundamental. The supervisor needs to both model willingness and promote such behavior in supervisees in a way that is tangible and transferable to therapy sessions. Thus, working with the supervisee on personal acceptance and commitment, while also pointing to the parallel processes for the client is a powerful training tool. Providing quality supervision that is ACT consistent and compassionate will be presented. This workshop will begin with a discussion of the importance of the expression of emotion in ACT-based supervision. Suggestions will be made for shaping the ability of therapists in training to willingly experience and express emotion, with clarification of appropriate supervisory boundaries. This didactic discussion will be followed by multiple roll plays and experiential exercises in which attendees will practice different ways of responding to challenging content in a supervisory setting.

Educational Objectives:

1. Discuss the theoretical basis for including emotions in the psychotherapy supervision process.
2. Describe how to focus on acceptance of emotion and thoughts, both as how it relates

to the supervisee's experience and to the client's experience.

3. Describe how to help supervisees assess the cost of avoidance as it relates to their own and to their clients' lives, as well as the process of psychotherapy.

MINDFULNESS AND ACT: CONNECTING BUDDHIST MEDITATION PRACTICES TO ACT/RFT CONCEPTS

Workshop

Garden Room: B1510

LINDSAY FLETCHER, University of Nevada, Reno

MICHAEL LEVIN, University of Nevada, Reno

Target Audience: All Levels, Clinicians

Acceptance and Commitment Therapy (ACT) is one of several third wave behavioral treatments to incorporate mindfulness into therapy. In order to apply mindfulness techniques to psychological problems, it is important to create a coherent theory of how these techniques will improve human suffering. Mindfulness is defined in ACT through its relation to the four core processes of acceptance, defusion, present moment awareness and self-as-context. Furthermore, these four core processes are linked to a behavioral account of language, Relational Frame Theory (RFT). Thus, the ability to tie mindfulness practices to both ACT core processes and more basic RFT is an important step towards making informed treatment decisions in applying mindfulness techniques with clients. While informal mindfulness practices can be very powerful in promoting behavioral change, they can be further supported with formal meditation practices.

The term mindfulness is borrowed from Eastern religious and spiritual traditions that emphasize meditation practice as an important technique for the alleviation of suffering. Buddhist traditions provide a nearly limitless supply of different meditation practices that may be adapted to work with ACT concepts. While many third-wave therapies emphasize informal mindfulness practices, including ACT, this workshop will explore the inclusion of "formal" practices that may enhance treatment when they are adapted for use with the ACT model. Specifically, tonglen practice, lovingkindness meditation, vipassana, and other meditation techniques will be introduced.

The purpose of this workshop will be to teach participants how to conceptualize particular meditation techniques in ACT/RFT terms and to apply these techniques to therapy. During the workshop we will accomplish these goals by introducing a variety of meditation techniques within an experiential format. These techniques will also be tied to a larger context by relating them to ACT core processes. Thus, clinicians will learn to apply these techniques and conceptualize their application according to specific ACT core processes and RFT.

Educational Objectives:

1. Learn meditation techniques that have been adapted for use in ACT
2. Practice meditation/mindfulness techniques through experiential exercises
3. Learn how to conceptualize meditation techniques in terms of the ACT definition of mindfulness

ACTING ON DEATH: TERMINAL ILLNESS, MORTALITY AWARENESS, AND THE DAILY PRACTICE OF DYING

Workshop

Room: B1135

JENNIFER A. GREGG, San Jose State University

Target Audience: All Levels, Clinicians

Death is an issue faced by all beings. The awareness of the eventual end of this life is an essential element of what differentiates humans from other animals. This awareness is intensified with the diagnosis of a terminal illness, and the range of private responses to such a diagnosis or thoughts of one's own mortality encompasses the entirety of human experience. Acceptance models of therapy provide an amazing context for developing a relationship with our responses to our mortality, and the ability to use awareness to enhance meaningful living. This workshop will provide attendees with a foundation for understanding mortality awareness in the lives of their clients and themselves, and will provide a forum for exploring these issues and their relation to passionate living every day. Attendees will engage in interactive and experiential exercises designed to build the skills necessary to address these issues with clients and in their own lives.

Educational Objectives:

1. Build understanding of conceptual issues present in coping with terminal illness and dying.
2. Learn interventions for issues of death awareness.
3. Develop role of values in end-of-life.

IN PURSUIT OF A BEHAVIORAL MEASURE OF PSYCHOLOGICAL FLEXIBILITY: DESIGN, DATA, AND DISCUSSION

Panel Discussion

Room: B1335

Panelists:

CHAD E. DRAKE, University of Mississippi

EMILY K. SANDOZ, University of Mississippi

PATRICIA BACH, Illinois Institute of Technology

SCOTT BETHAY, University of Mississippi

SHAWN BOLES, Oregon Research Institute

AKIHIKO MASUDA, Georgia State University

TAKASHI MUTO, Ritsumeikan University

C. ALIX TIMKO, University of Pennsylvania

Target Audience: Intermediate, Researchers

A behavioral measure of psychological flexibility could provide a useful measure in ACT research. Such a

measure could be used as a dependent variable in process research on ACT components and techniques. If sensitive enough, it could even be used as a measure of progress with individual clients in an applied setting. One possible means of developing this measure involves adapting basic laboratory methods used by RFT researchers. This symposium represents a collection of efforts to investigate this possibility. The panelists have conducted empirical projects on this matter using a variety of procedures. Discussion will focus on refining existing methods as well as generating new ideas for measuring psychological flexibility.

Educational Objectives:

1. Learn about current methods to measure psychological flexibility.
2. Become familiar with the theoretical basis of these behavioral measures.
3. Generate ideas about future methods to measure clinically relevant behavior.

Tuesday Afternoon 4: 30-5: 45pm

PLENARY SESSION: THEATER

THE RELATIONSHIP BETWEEN ACT, CT, AND CBT

JAMES D. HERBERT, Drexel University

In terms of its widespread dissemination, empirical support, and acceptance by the scientist-practitioner community, Cognitive Therapy (CT) has emerged as the preeminent model of psychotherapy. However, recent theoretical, empirical, and technical developments have raised questions about traditional CT, leading to the emergence of a new group of "acceptance-based" behavioral therapies (including ACT), as well as the evolution of CT itself. Although important distinctions exist between CT and ACT, these differences are sometimes overemphasized by proponents of both perspectives. In fact, CT and ACT are most accurately conceptualized as distinct models within the larger CBT umbrella. We will explore similarities and differences between CT and ACT, and implications for future developments.

Educational Objectives:

1. Learn similarities between CT and ACT.
2. Learn differences between CT and ACT.
3. Understand implications for future interaction between CT and ACT.

Tuesday Night Social/ Poster Session (Hilton)

8: 00-11: 00pm

Wednesday Morning 6: 00-8: 00am (Hilton)

THE PRACTICE OF ACT AND THE PRACTICE OF VIPASSANA: SESSION 2

Workshop – 3 sessions*

Room: Hilton TBA

VIJAY SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

ANNE SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

JAY WILKINSON, Pacific University

Target Audience: All Clinicians

The premise is that Vipassana and ACT overlap almost completely. Vipassana achieves without words what ACT achieves with words.

The premise will be experientially explored during the three sessions with about half of the session spent in Vipassana meditation and half in interactive dialogue. (Those not having had any experience in Vipassana will be given some basic guidance. Please note that I am not a Vipassana teacher so that this is not to be construed as the teaching of Vipassana).

Participants are requested to bring their own meditation cushions, benches, safus, mats etc. as we will not have any available on site.

*Participants are strongly encouraged to commit to attending all three sessions.

Educational Objectives:

1. Deepen the integration of ACT with mindfulness.
2. Build a better understanding of Self as Context.
3. Values and Vipassana.

Wednesday Morning 9: 00-11: 45am

ACT AS A BRIEF INTERVENTION MODEL

Workshop

Forest Room: B1418

KIRK STROSAHL, Mountainview Consulting Group, Zillah, Washington

Target Audience: Advanced, Clinicians

Increasingly, we are learning that human behavior change in response to clinical intervention is not dose dependent. To a major extent, people are capable of making life changing "moves" in response to simple but well targeted interventions. ACT seems particularly well suited to such a rapid response model because of its transformative emphasis on mindfulness and committed action. This means ACT can be particularly useful in settings where the number of contacts with a client will be limited, such as in a primary care setting. This workshop will introduce participants to the empirical science that argues for the potential efficacy of brief interventions. We will then review several cardinal principles of brief therapy and frame the ACT model within those principles. A demonstration of a brief intervention will be used to show how these simple principles can lead to major life changes. If time permits, we may also

conduct a live role play to show how these principles can be applied on the ground.

Educational Objectives:

1. Demonstrate the empirical literature supporting the utility of brief interventions.
2. Appreciate the basic organizing principles of brief, strategic therapy.
3. Illustrate how to modify ACT interventions to fit the brief, rapid response approach.

ACCEPTANCE AND COMMITMENT THERAPY: FINDING LIFE BEYOND TRAUMA

Workshop

Garden Room: B1510

ROBYN D. WALSER, National Center for PTSD, Palo Alto, California

JACQUELINE PISTORELLO, University of Nevada, Reno

Target Audience: Intermediate, Clinicians

The concept of emotional avoidance offers organization to the functional analysis of trauma-related problems and lends coherence to understanding the sequelae of trauma. Many individuals who have been diagnosed with PTSD are struggling with traumatic memories, painful feelings and unwanted thoughts and they take great efforts to avoid these private experiences. Avoidance, then, is a common goal of many trauma survivors and has a powerful negative impact on individuals diagnosed with PTSD. One therapeutic alternative to avoidance is acceptance.

Acceptance can create a new context from which the trauma survivor may view the world and the self. If efforts to control private experience are relinquished as a means to mental health, then efforts to take healthy action can be instituted and may bring valued behavior change. Acceptance and Commitment Therapy (ACT) is a structured intervention that applies acceptance techniques to internal experience while encouraging positive behavior change that is consistent with individual values and goals. We will present the application of ACT in the treatment of trauma with a particular focus use of acceptance and mindfulness techniques and on values lost as a result of trauma. In addition, we will conduct role-plays and experiential exercises to demonstrate the implementation of ACT with trauma survivors.

Educational Objectives:

1. Describe the theoretical underpinnings of ACT as it applies to diagnoses following a traumatic event.
2. Describe the application of ACT with trauma survivors with a particular focus on values lost as a result of the trauma.
3. Conduct role-plays and experiential exercises to demonstrate the implementation of ACT with trauma survivors.

HELPING TREATMENT-RESISTANT PATIENTS LIVE RICH AND MEANINGFUL LIVES: APPLYING ACT TO A TRANS-DIAGNOSTIC GROUP OF "TREATMENT-RESISTANT" PATIENTS

Workshop

Room: B1135

SUSAN CLARKE, University of Southampton and Dorset National Health Service

HELEN BOLDERSTON, Dorset National Health Service
JESSICA KINGSTON, University of Southampton and Dorset National Health Service

BOB REMINGTON, University of Southampton

Target Audience: Intermediate, Clinicians and Researchers

Current needs for psychological intervention by far exceed available supply; resulting in long and trans-diagnostic waiting-lists. This problem is compounded by the re-referral of "Treatment Resistant Patients" who, having received psychological intervention in the past, are returning with significant residual mental health problems. The hypothesised generic applicability of ACT, in conjunction with its reported effectiveness as a time-limited and group-based intervention, makes it an ideal candidate therapy. We report both the application and the effectiveness of using "Get Out of Your Mind and Into Your Life" (Hayes & Smith, 2006) as a manual for the group-based delivery of ACT to treatment resistant patients (mean number of previous intervention = 3.5; range 2 - 5). Two 16-week groups were run sequentially (total N = 10). Before and after intervention, and at 6-month follow-up, participants completed BDI, STAI, SCL-90, Millon, AAQ, MAAS, thought believability, valued living and SCID-II assessments. All patients had Axis I presentations, and five patients were formally diagnosed as having at least one personality disorder. Preliminary data on the effectiveness of the intervention indicates clinically significant gains at post-test for the majority of patients (Truax & Jacobson's (1991) clinical change criterion). Of the data available to date, most patients maintained gains at 6-months, with several continuing to improve. Millon scores also evidenced some positive changes in personality profiles. Shifts in processes measures (valued living, AAQ, cognitive fusion and mindfulness) will be presented. Practical issues (e.g., the delivery of ACT as a semi-structured, group-based intervention) and process issues (e.g., facilitating and maintaining present moment focus) will also be discussed.

Educational Objectives:

1. Communicate skills for the use of ACT with trans-diagnostic patient groups.
2. Develop an understanding of how "Get out of Your Mind and into Your Life" was applied as a group-based protocol.
3. Learn about preliminary effectiveness data on the application of 16-weeks, group-based ACT for "Treatment Resistant Patients".

CREATING VALUES-BASED COMMUNITIES AND ORGANIZATIONS

Workshop

Room: B1335

STEVEN C. HAYES, University of Nevada, Reno
LINDSAY B. FLETCHER, University of Nevada, Reno
Target Audience: All Levels, Clinicians and Researchers

In an age of terrorism and war, it is becoming more and more urgent to not only treat individuals with psychological problems, but to also change the communities we all live in. Our culture promotes avoidance of and fighting with unwanted experiences. Internally, we struggle with anger and self-hatred, and we fight our external battles by going to war and "rooting out" our enemies. Acceptance is both revolutionary and necessary to countering these approaches. Acceptance and values in ACT have traditionally been applied at the level of one's internal experiences. Applying ACT processes at the group level has the possibility of empowering and transforming whole communities to live values-based lives.

This workshop will investigate ways of creating values-based communities by applying ACT processes to both new and existing relationships and organizations. The aim is to empower relationships that contribute to larger goals, therefore creating more impact than individuals alone could accomplish. We will discuss how to apply values to the level of the therapeutic relationship, couples, families, workplaces, and larger communities. We will explore how to integrate personal and group values and to create a safe environment for vulnerability. This workshop will require the participation of all attendees and aims to create an atmosphere that will lead to the generation of new ideas.

Educational Objectives:

1. Learn an ACT model for applying values to groups.
2. Generate ideas for applying ACT processes to groups.
3. Develop commitments for creating change in your relationships and communities.

CASE CONCEPTUALIZATION IN ACCEPTANCE AND COMMITMENT THERAPY

Workshop

Room: B2512

PATRICIA BACH, Illinois Institute of Technology
DANIEL J. MORAN, Trinity Services, MidAmerican Psychological Institute
Target Audience: Beginner, Intermediate, Clinicians

This workshop will provide a step-by-step framework for functionally conceptualizing client behavior problems, and will discuss selection and application of specific ACT interventions based on the six core ACT processes described in Steven Hayes 'hexaflex' model.

Participants will practice experiential exercises and have the opportunity to practice case conceptualization and developing their own ACT consistent interventions, exercises, and metaphors using clinical examples from their own practices.

This workshop will be based on content from the forthcoming publication ACT in Practice: *Case Conceptualization in Acceptance and Commitment Therapy*, (Bach and Moran, in preparation, New Harbinger).

The workshop will use a case-based approach beginning with instructor supplied cases and later using participants' clinical cases for practice in ACT case formulation, selecting interventions, and assessing the effectiveness of interventions, and outcomes.

There will be a 60 minute slide presentation, demonstrations, large group exercises and case-based practice. Participants will be provided with handouts to use with their clients for assessment and homework assignments to augment in session interventions. Worksheets will also be distributed for the participants to use to facilitate ACT case formulation.

Educational Objectives:

1. Become familiar with the six core ACT principles of defusion, self-as-context, acceptance, values, committed action, and contacting the present moment, which will be described from a strict behavior analytic perspective.
2. Be able to select ACT interventions appropriate for addressing specific core principles and learn how to apply specific ACT interventions based on the case formulation.
3. Learn to use ACT case conceptualization to facilitate creating one's own ACT-consistent metaphors, exercises, and interventions for application in the context of a client's unique history and presenting complaints and assessing the effectiveness of interventions.

Wednesday Lunch 11:45-1:30pm

ACT in ACTION DVD Series

Steve Hayes & New Harbinger Publications
Forest Room: B1418

During lunch Tuesday, Wednesday, and Thursday we will be showing an early draft of some of the videos from the *ACT in ACTION* DVD Series that will be coming out this fall. They are 60-90 minutes and will run through lunch. Please watch at your convenience. Thank you to New Harbinger Publications for allowing us to screen these for you, even though they are in rough format.

Paper Session (end of lunch) 1:00-1:30pm

RFT AND TRAPS IN THE HUMAN CONDITION

Paper Session

Garden Room: B1510

CARMEN LUCIANO, University of Almería, Spain

Target Audience: Researchers

Both direct and relational conditioning processes are necessary to teach individuals to discriminate private events, and to establish self-as-context for those private events. These learning processes will be described. The paper will provide an analysis of the conditions that give rise to fluent deictic framing and of traps that emerge when such fluency is not established. The paper will provide developmental and clinical examples and will offer suggestions for needed research.

Wednesday Afternoon 1:30-4:15pm

ACCEPTANCE AND COMMITMENT THERAPY WITH THE "DIFFICULT CLIENT"

Workshop

Forest Room: B1418

KIRK STROSAHL, Mountainview Consulting Group, Zillah, Washington

Target Audience: Advanced, Clinicians

Even experienced therapists can struggle with clients that have well entrenched, albeit dysfunctional behavior patterns, particularly those involving self-destructive and addictive behaviors. Out of frustration, the therapist may use pejorative labels (non-compliance, resistance, and denial, borderline personality) to both justify and explain the lack of therapeutic progress. In the research to date, ACT has shown great promise as a treatment approach for difficult clients, in large part because of the humanizing philosophy that patients are not "broken", only trapped in unworkable patterns of rule governed behavior. In this workshop, we will examine what makes difficult clients "difficult" and will demonstrate how to "use" the ACT therapeutic stance itself as an intervention tool. In addition, we will demonstrate when & how to apply some core ACT strategies (defusion/acceptance & value based commitments) to create therapeutic movement. Video-tape demonstrations with live clients will be used to highlight key principles.

Educational Objectives:

1. Appreciate the core characteristics that define a difficult patient.
2. Demonstrate features of the ACT therapeutic stances that can be useful with difficult patients.
3. Illustrate when and how to apply core act interventions with difficult patients.

ACT-IFYING DBT

Workshop

Garden Room: B1510

SANDRA GEORGESCU, Private Practice, Chicago, Illinois

PATRICIA BACH, Illinois Institute of Technology

Target Audience: Intermediate, Clinicians

This workshop will focus on the replacement of cognitive restructuring strategies in DBT with ACT interventions in order to help facilitate acceptance of and defusion from private experience – particular areas of interest from ACT will include contact with the present moment, defusion, acceptance and self as context, as an extension of the mindfulness/acceptance strategies already in place in DBT. This section of the workshop is inspired by a paper by Holmes, Georgescu & Liles (2006).

This workshop will further extend DBT work by proposing and trying out the addition of values work as part of DBT's Stage I – Behavioral Control agenda. We will explore how values work may fit into the existing format (individual hierarchy & skill training content areas) and begin to anchor change strategies in the service of something more specific and personal than the existing DBT goal of "building a life worth living".

Part of the session will be presented in the format of an actual DBT skills training group to provide a first hand experience with a group. Role-plays are an inherent part of DBT skills training and will also be utilized with the scope of helping participants interact with the revised DBT handouts (provided) in a more applied manner. Time will be allotted for case examples and consultation instead of the typical diary card review while questions will be addressed throughout.

Educational Objectives:

1. Participants will learn about the behavioral principles that underlie the DBT system and be provided with a rationale for the proposed changes – e.g. how the various components of treatment come together to create a context for change (with associated pros & cons)
2. Participants will become familiar with the areas that originally include cognitive control strategies (individual work & group)
3. Participants will begin to discriminate between cognitive control strategies and acceptance based strategies in their own work – examples will be encouraged from participants and provided by workshop leaders (if necessary)
4. Participants will learn about and begin to identify the ACT interventions (acceptance/defusion and values work) that help expand DBT – what goes where & when?
5. Participants will begin to apply ACT interventions in the context of the existing

- DBT hierarchy through role plays and discussion of case material
- Participants will discuss the potential consequences/implications of applying ACT interventions within the context of DBT

ACT: A NOVEL APPROACH TO THE TREATMENT OF PROBLEMATIC EATING AND BODY IMAGE

Workshop

Room: B1135

EMILY SANDOZ, University of Mississippi

C. ALIX TIMKO, University of Pennsylvania

RHONDA M. MERWIN, Duke University Medical Center

Target Audience: Clinicians

Problems related to eating and body image are becoming increasingly common with recent trends defying typical patterns regarding age of onset and cultural exclusivity. That is, eating disorders are emerging earlier *and* later in life and are being seen in cultures and sub-cultures that were once believed to be somewhat immune to such difficulties. The increased prevalence of eating disorders becomes particularly concerning when one considers the negative outcomes associated with maladaptive eating and exercise behavior, including poor quality of life (e.g., social isolation), significant long-term health consequences (e.g., osteoporosis), and increased risk of psychiatric mortality. Despite the devastating impact of EDs, the development of effective treatments has been unacceptably slow. The past 50 years has seen few novel interventions and little advancement has been made in improving the effectiveness of traditional cognitive-behavioral interventions targeting eating and body image. Furthermore, engaging individuals with problematic eating behaviors in treatment continues to be a significant obstacle for traditional intervention strategies which often assume a certain level of commitment to change. ACT, with its emphasis on experiential avoidance and valued-guided action, may be a novel approach that changes the landscape of ED treatment.

For individuals with eating concerns, bodily cues of hunger and satiety have meaning far beyond biological necessity and body size/shape becomes the primary indicator of self-worth. Controlling intake or bingeing and purging often functions to control, avoid, or otherwise decrease contact with difficult thoughts and feelings and changing one's body may become a pre-requisite for engaging in life. As a result, individuals with eating or body image concerns find themselves moving further away from what they value as they follow rigid rules regarding eating and avoid situations that evoke body-related thoughts/feelings. Those fully entrenched in the ED may find that they do not know what they value beyond eating, exercise, and appearance. This half-day workshop will focus on case conceptualization and treatment of disordered eating from an ACT perspective. The focus will be on providing clinicians

with the tools necessary to effectively treat this population; however, there will also be information relevant to clinical researchers. The workshop will include didactics, experiential exercises, and role plays. We will draw upon our experience with a clinical population at a major medical center and with college and community populations struggling with less severe forms of problematic eating, exercise, and body image.

Educational Objectives:

1. Conceptualize problematic eating and exercise behavior from an ACT perspective.
2. Adapt intervention techniques for use with this population.
3. Increase awareness regarding special considerations when using ACT with ED's.

ACT AND THE CHRISTIAN TRADITION

Workshop

Room: B1335

INGRID ORD, Private Practice, Dubai, United Arab Emirates

KELLY WILSON, University of Mississippi

STEVEN C. HAYES, University of Nevada, Reno

University of Nevada, Reno

Target Audience: All Levels, Clinicians

There are many verses in the Bible which seem to be consistent with the 'hexaflex' model. The practical application of the injunctions in a number of these verses is motivated by promises which would seem only to apply to believers in the Christian gospel. This will address the relevance of this to clinical practice, with relevance to both believers and unbelievers. Is there material here for research?

Educational Objectives:

1. To investigate the application of Biblical 'quotes' and stories in (ACT) clinical practice with the general public.
2. To investigate differences in the application of Biblical 'quotes' and stories in (ACT) clinical practice with 'believers'.
3. To address the question of the relevance of the clinician's and client's beliefs about who God is.

ACT AND SOCIAL PHOBIA

Workshop

Room: B2512

JAMES D. HERBERT, Drexel University

Target Audience: Clinicians

Social anxiety disorder (SAD, also known as social phobia) is a common and debilitating condition associated with distress and impairments in functioning across multiple life domains. Both pharmacological and psychological treatments have been developed, and produce reasonably strong outcomes. However, pharmacotherapy is limited by high rates of relapse following discontinuation.

Although psychological interventions based on traditional cognitive therapy produce durable effects in many individuals, many patients fail to respond to treatment, and many others remain impaired despite some gains. Moreover, the mechanisms through which current treatments function are poorly understood. Over the past few years, we have been developing an intervention program that integrates key components of traditional interventions for SAD (e.g., simulated in-session exposure exercises) within an ACT framework. Preliminary outcome data are encouraging, and suggest effect sizes at least as large as those produced by the best established treatments. Mediation findings are generally consistent with hypotheses derived from the ACT model. Finally, new data suggest that experiential avoidance appears to moderate the effects of anxiety on social performance, thereby highlighting the potential importance of addressing such avoidance in treatment.

This workshop will present an overview of SAD, including a theoretical conceptualization of the disorder from an ACT perspective. Our current treatment protocol will be described, and relevant outcome and process data will be presented. Clinical demonstrations will illustrate key intervention strategies.

Educational Objectives:

1. Understand the nature of social anxiety disorder, including an ACT-based theoretical perspective of the condition.
2. Appreciate the data on the outcome and process of an ACT-based intervention for SAD, as well as data on the role of experiential avoidance in SAD.
3. Learn about key ACT interventions for SAD.

Wednesday Afternoon 4:30-5:45pm

PLENARY SESSION: THEATER

THE STATE OF THE EVIDENCE IN RFT FOR CLINICIANS
 PATTY BACH, Illinois Institute of Technology

An exploration of recent RFT research and its relevance for clinicians will be considered in user-friendly terms. Recent RFT research is giving us glimpses into basic verbal processes and advanced social behavior. Understanding relational framing is increasing our understanding of complex behaviors including those implicated in psychopathology and in psychological flexibility, in human suffering and in human understanding.

Educational Objectives:

1. Identify strategies for using basic understanding of RFT as a tool for ACT case conceptualization.

2. Become familiar with recent RFT research and its implications for understanding psychopathology.
3. Become familiar with novel interventions now being developed and tested around the world.

Thursday Morning 6:00-8:00am (Hilton)

THE PRACTICE OF ACT AND THE PRACTICE OF VIPASSANA: SESSION 3

Workshop – 3 sessions*

Room: Hilton TBA

VIJAY SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

ANNE SHANKAR, Lifequal LLC, Anxiety Disorders Clinic, Portland, Oregon

JAY WILKINSON, Pacific University

Target Audience: All Clinicians

The premise is that Vipassana and ACT overlap almost completely. Vipassana achieves without words what ACT achieves with words.

The premise will be experientially explored during the three sessions with about half of the session spent in Vipassana meditation and half in interactive dialogue. (Those not having had any experience in Vipassana will be given some basic guidance. Please note that I am not a Vipassana teacher so that this is not to be construed as the teaching of Vipassana).

Participants are requested to bring their own meditation cushions, benches, safus, mats etc. as we will not have any available on site.

*Participants are strongly encouraged to commit to attending all three sessions.

Educational Objectives:

1. Deepen the integration of ACT with mindfulness.
2. Build a better understanding of Self as Context.
3. Values and Vipassana.

Thursday Morning 9:00-11:45am

A STEP-BY-STEP WALK THROUGH A VIDEOTAPED ACT INTERVENTION

Workshop

Forest Room: B1418

KELLY WILSON, University of Mississippi

HELEN BOLDERSTON, Dorset National Health Service

Target Audience: All Levels, Clinicians, Supervisors

Descriptions of ACT interventions often emphasize a particular focus of the intervention, such as acceptance, defusion, or values. However, ACT interventions often contain multiple layers and impact multiple processes. The layering of these interventions can be difficult to see in real-time. This workshop will highlight a videotaped intervention. The intervention

is part of an experiential role play done in London in July, 2006 with Kelly Wilson and Helen Bolderston. Both participants in this experiential role play will be available to talk about the role play and its impact. The role play accurately depicts a series of multi-layered ACT interventions. In the workshop, we will stop and start the tape and walk participants through the layering of interventions. We will show how all 6 points of the Hexaflex are contained in this relatively short series of interventions. We will describe the ways in which experiential role plays can be used as a training strategy or in a peer supervision group.

Educational Objectives:

1. Participants will learn the use of experiential role play as a training and consultation tool.
2. Participants will learn to intervene on multiple ACT processes simultaneously.
3. Participants will learn to form an initial values-based therapeutic contract

ACT IN THE TREATMENT OF PSYCHOSIS

Workshop

Garden Room: B1510

PATRICIA BACH, Illinois Institute of Technology

Target Audience: Intermediate, Advanced, Clinicians

ACT may be successfully applied to the treatment of persons with symptoms of psychosis including those who are so-called 'low functioning clients'. This workshop will use participant case examples, demonstrations and experiential exercises. The workshop will emphasize how those with basic familiarity with ACT interventions might approach the treatment of symptoms of psychosis; how to select or modify interventions to accommodate those with an impoverished social history and/or with mild to moderate cognitive deficits; how to build motivation when working with involuntary and non-treatment adherent clients; how to incorporate adjunct material such as homework and self-help materials into treatment.

Educational Objectives:

1. Identify how using ACT is similar to and different from working with clients with other sorts of problems.
2. Select exercises suitable for work with clients with serious mental health illness as well as how to modify existing exercises to be more readily grasped by the client.
3. Identify strategies for using ACT with involuntary and treatment non-adherent clients

MINDFULNESS-BASED STRESS REDUCTION

Workshop

Room: B1135

CYNTHIA CUSHMAN, Private Practice, Great Barrington, MA

Target Audience: All Levels, Clinicians

Mindfulness-Based Stress Reduction (MBSR) is an eight-week course in mindfulness meditation that was developed by Jon Kabat-Zinn at the University of Massachusetts in the late 1970s, and now is offered at thousands of sites internationally, particularly in institutional settings such as hospitals, jails, schools, and workplaces. The protocol has been adapted into various forms, including Mindfulness-Based Cognitive Therapy, and is intensively studied by a number of committed researchers.

Originally targeted at chronic pain and intractable physical illness, MBSR is still perhaps best viewed as being rooted in mind-body medicine, rather than psychological science. Course facilitators see themselves as teachers, not as therapists, and MBSR is often taught to large classes of thirty or so participants. Unlike ACT, MBSR is explicitly based in secular Buddhist traditions, with the main intervention being the individual practice by course participants of 45 minutes or more of daily meditation.

On the surface, MBSR appears quite different from ACT, and yet much of the beneficial effect of MBSR found in outcome studies may be mediated by ACT-relevant psychological processes such as increased acceptance, defusion, values orientation, and committed action. And on an experiential level, 'getting MBSR' feels very much like 'getting ACT'.

This workshop offers a brief overview of MBSR from a clinical perspective. We will sample MBSR's primary teaching modality, that of guided meditation followed by a group discussion that focuses on the direct, present-moment experience of participants. Then, we'll explore the structure and processes of MBSR by watching video clips of an actual eight-week class led by Jon Kabat-Zinn. Finally, we'll address the interesting question of whether core ACT processes play out within the form of the MBSR protocol.

Educational Objectives:

1. Learn the general structure of an MBSR course.
2. Appreciate the 'flavor' of MBSR-style guided meditation and discussion.
3. Build an understanding of the relationship between MBSR and ACT.

USING ACT TO ADDRESS WEIGHT LOSS AND OBESITY-RELATED STIGMA

Workshop

Room: B1335

JASON LILLIS, VA Palo Alto Health Care System, University of Nevada, Reno

Target Audience: Intermediate, Advanced, Clinicians and Researchers

Obesity is a major public health problem. Technologies exist for reducing weight, but typically weight is gained back. Two key areas have received little attention in terms of technology development:

stigma, and emotional-coping. ACT is well situated to address these concerns. Results of a RCT (n=84) comparing ACT to treatment-as-usual (TAU) will be presented in this workshop. In addition, the protocol will be described, and several techniques will be trained. This ACT protocol was shown to be effective over TAU for reducing BMI, blood pressure, and stigma, as well as increasing exercise, quality of life, general health, while moving relevant mediators of interest (e.g. decreasing experiential avoidance. In addition, several resources, including new measures relevant to ACT and obesity research, will be reviewed and shared with participants.

Educational Objectives:

1. Learn about an ACT model of overeating.
2. Learn about, and build skills for using, an ACT protocol for weight loss that has empirical support.
3. Learn about the results of a clinical trial (n=84) using ACT to promote weight loss, decreased stigma, and increased quality of life.

CREATING AN ACT-LIKE CULTURE FOR CHILDREN AND ADOLESCENTS

Workshop

Room: B2512

DENNIS D. EMBRY, PAXIS Institute; Center for Early Adolescence, Oregon Research Institute; Johns Hopkins Center on Prevention and Early Intervention
ANTHONY BIGLAN, Center for Early Adolescence, Oregon Research Institute

AMY MURRELL, University of North Texas, Center for Early Adolescence

Target Audience: Intermediate, Clinicians and Researchers

Could ACT be used as a preventative strategy with children and adolescents? ACT emerges from clinical work—mostly with adults, and the exercises are designed for adults who are often in therapy or distress. Developmental literature consistently notes that children and adolescents with serious predictive prospects for externalizing and internalizing disorders—not to mention difficulties with academics—often have cognitive biases or attributions (entailments), which would appear to be malleable to ACT-like strategies. This workshop draws on prior research as well as research in process to suggest candidate strategies that could show promise for ACT-like interventions—in addition prior research on behavior analytic procedures—for prevention of developmental problems among children. The workshop draws on the PeaceBuilders project (which included mass media), the PATHS to PAX project that is combining several evidence-based practices (e.g., Promoting Alternative Thinking Skills, the Good Behavior Game and PeaceBuilders-type relational frames) as well a new study on Positive Behavior Support. The workshop will provide practical demonstrations, and invite the participants to help

design or modify ACT-like strategies that might be used as preventative procedures for pre-K through secondary students. The workshop will outline rationales or principles for how ACT-like prevention protocols could be designed for children and teens, and why those procedures might be profitably combined with more traditional behavioral procedures with children and teens. The idea is not to create counseling or session-based preventative approaches, but rather strategies that can be imbedded in everyday living at school, at home and in the community to create a culture whereby children are nurtured, cared for and successful.

Educational Objectives:

1. Learn potential procedures that have been used previously with children that have ACT-like qualities.
2. Experience and recommend ways to refine potential ACT-like preventative procedures for children and adolescents.
3. Develop principles to apply and test ACT-like preventative strategies for children and adolescents in a broad cultural context

Thursday Lunch 11:45-1:30pm

ACT in ACTION DVD Series

Steve Hayes & New Harbinger Publications
Forest Room: B1418

During lunch Tuesday, Wednesday, and Thursday we will be showing an early draft of some of the videos from the *ACT in ACTION* DVD Series that will be coming out this fall. They are 60-90 minutes and will run through lunch. Please watch at your convenience. Thank you to New Harbinger Publications for allowing us to screen these for you, even though they are in rough format.

Thursday Afternoon 1:30-4:15pm

USING ACT IN THE DELIVERY OF PRIMARY CARE BEHAVIORAL HEALTH SERVICES

Workshop

Forest Room: B1418

PATRICIA ROBINSON, Mountainview Consulting Group, Zillah, Washington

Target Audience: Intermediate, Advanced, Clinicians

The new frontier for delivery of behavioral health services is the primary care setting. This workshop introduces a model for initiating, developing, and evaluating an array of clinical services, ranging from individual consultations with patients to classes and on-going training of primary care providers. In the Primary Care Behavioral Health (PCBH) model, the role of the behavioral health provider is that of a Behavioral Health Consultant. Duties include providing brief interventions at the time of request from children, youth, families, and adults and developing programs that support the mission of primary care:

helping people attain and maintain optimal health. Delivery of brief, consultative services is a new area for many ACT therapists, as is the development of pathways involving classes. This workshop provides core competencies and guidelines for therapist, ACT materials to use with patients, and videos demonstrating ACT interventions in primary care and their acceptance and adaptation by primary care providers.

Educational Objectives:

1. Learn the basics of the Primary Care Behavioral Health Model and the role of the Behavioral Health Consultant in primary care.
2. Understand adaptations needed to empower the success of ACT in the primary care setting.
3. View video examples of ACT interventions with children and adults.

WHAT HURTS MATTERS MOST: THE VALUES AND PAIN LINK IN ACT/RFT

Workshop

Garden Room: B1510

STEVEN C. HAYES, University of Nevada, Reno

JENNIFER C. PLUMB, University of Nevada, Reno

JAMES E. YADAVAIA, University of Nevada, Reno

Target Audience: Beginner, Intermediate, Clinicians and Researchers

"I don't want to try—it'll hurt too much if I fail." "I can't—I'm too afraid" "What if I'm rejected—that would be devastating." What would be possible in our work if we went beyond these statements into the deeply held values that put so much at stake? Pain, suffering, fear and hurt may indicate that something we are doing (or not doing) is of value to us. Out of fear, we may disavow, actively sabotage, or avoid what matters most to us. In this workshop, we will explore the behaviors we may see in clinical work (and undoubtedly ourselves) that interfere with and/or promote value consistent living. We will explore the role of pain in uncovering and understanding what matters to us, apply and practice new techniques for working with those values, and walk through how values may manifest themselves in behaviors that look like the opposite of what we value. The workshop will be collaborative, experiential, and will involve case examples and role plays.

Educational Objectives:

1. Develop skills for engaging in and promoting values work with clients.
2. Understand the RFT/conceptual basis for linking values and pain.
3. Develop research ideas for further exploring this relationship.

ACT IN THE WORKPLACE

Workshop

Room: B1135

FRANK BOND, Goldsmiths College, University of London

Target Audience: All Levels, Clinicians

This workshop will show how ACT has been used to reduce stress and improve performance in the workplace. Strategies will be detailed for using ACT in a group format, to enhance leadership skills, and at an organizational level. The goals of ACT are very consistent with current trends in leadership theory, and these overlaps will be considered in order to show how ACT can be easily integrated into an organization's existing leadership development program.

Educational Objectives:

1. Understand how ACT can be tailored for use in the workplace.
2. Learn how and why ACT can be used to improve both mental health and job performance.
3. Develop skills for overcoming resistance in organizations.

LETTING GO OF "RIGHTEOUS" ANGER WITH WILLINGNESS: STRATEGIES FOR WORKING WITH ANGER ROOTED IN THE PAST, PRESENT, AND FUTURE

Workshop

Room: B2512

ANDREW P. SANTANELLO, VA Maryland Health Care System

HANK ROBB, Pacific University

Target Audience: Intermediate, Clinicians

Why doesn't anger simply "flash" and pass? Is it possible to experience anger in a skillful manner that honors one's values? Anger often has a "story" that "justifies" hanging on to it. This allows us humans to maintain a fury not only about things that happened in the past and that are happening right now but also about things that are nothing more than conceptions of possible future events. This experiential workshop will focus on the demonstration of practical techniques for aiding clients (and yourself) to have anger sensations as the sensations they are and the story about them as the story it is. Workshop attendees will learn acceptance-and values-based methods for addressing anger related to resentment, current stressors, and thoughts concerning future situations.

Educational Objectives:

1. Identify techniques for experiencing anger as sensations and the story surrounding them as a story.
2. Identify how forgiveness is as an antidote to anger.
3. Identify the role of increased patience with self, others and the world in general in aiding

individuals to experience anger in skillful manner that honors their values.

Thursday Afternoon 4:30-5:45pm

PLENARY SESSION: THEATER

PART I

MINDFULNESS, DEPRESSION, AND COGNITIVE PROCESSES

WIVEKA RAMEL, Stanford University

The goal of this presentation is to share the results of a study that examined the effects of a Mindfulness-Based Stress Reduction course in adults with mood disorders. Research suggests that the practice of mindfulness meditation (MM) reduces psychiatric relapse for individuals with a history of major depression (e.g., Teasdale et al., 2000).

Proposed MM mechanisms for this increased resilience to relapse involve

(1) enhanced attentional awareness and allocation, and (2) increased decentered and nonjudgmental perspective towards cognitions, emotions, and sensations. This presentation will provide evidence for both mechanisms, with the most robust support for the second option, suggesting that MM practice leads to decreases in ruminative thinking on negative events, and these decreases explain reductions in affective symptoms and dysfunctional attitudes.

PART II

MINDFULNESS MEDITATION TRAINING AND NEURAL MECHANISMS OF ATTENTIONAL EMOTION REGULATION IN INDIVIDUALS WITH SOCIAL ANXIETY DISORDER

PHILIPPE R. GOLDIN, Stanford University

There is a growing interest in the application of mindfulness techniques for modulating one's relationship to ongoing mental experience (cognitions, emotions, sensations). However, there is need for more detailed empirical investigations using experimental paradigms to address (a) whether mindfulness training works, (b) how it affects emotional reactivity and regulation, (c) what neural systems are modulated by training in mindfulness techniques, and (d) how these might compare to cognitive regulatory strategies. In this talk, we consider the brain-behavior indices of emotion regulation - mindfulness meditation, cognitive regulation, and attentional distraction - in people diagnosed with social phobia (SP), and changes in neural mechanisms underlying therapeutic change associated with training in mindfulness meditation.

Educational Objectives:

1. Learn about the effects of Mindfulness-Based Stress Reduction courses on adults with mood disorders.
2. Learn unexplored research areas pertaining to the application of mindfulness techniques.
3. Consider the brain-behavior indices of emotion regulation in people diagnosed with

social phobia and changes in neural mechanisms underlying therapeutic change associated with training in mindfulness meditation.

Thursday Night Follies (Hilton)

8:00-midnight

TEACHING ACCEPTANCE AND COMMITMENT THERAPY MORE DIRECTLY

Workshop

Forest Room: B1418

HANK ROBB, Pacific University

Target Audience: All Levels, Clinicians

Many practitioners attempting to grasp the basic moves in ACT find the explanations often get in the way. In this 2.5-hour workshop participants will experience more direct methods to transmit basic ACT moves including acceptance, defusion, self-as-context, committed action, values and contact with the present moment; all of which are aimed collectively at developing psychological flexibility. The workshop aims to demonstrate A way, not THE way, to introduce ACT processes in preparation for their use to address troublesome life issues. Participants will watch this introductory protocol conducted with a workshop participant in a manner similar to that provided to most of the speaker's new clients. Participants will break into dyads and practice delivering and receiving what has been observed. Participants will discuss and integrate what they have experienced.

Educational Objectives:

1. Observe more direct methods of instantiating ACT principles.
2. Practice/experience such methods.
3. Consider ways to incorporate basic moves in participant's repertoire.

ACT FOR CHRONIC MEDICAL CONDITIONS AND LIFESTYLE BEHAVIOR CHANGE

Workshop

Garden Room: B1510

JENNIFER GREGG, San Jose State University

Target Audience: All Levels, Clinicians

As our population ages and obesity becomes a more prevalent problem, more and more individuals experience chronic health conditions such as diabetes, cardiovascular disease, and pain disorders. ACT has long been conceptualized as assisting in the most difficult behavior changes, and the lifestyle changes required by these chronic conditions are no exception. For example, medication adherence, diet and exercise consistency, and self-care are difficult under most circumstances, but the presence of a chronic health

condition often brings a level of experiential avoidance that can further prevent these behaviors. This workshop will provide attendees with a conceptual understanding and concrete interventions for difficult lifestyle changes and coping with chronic health problems. Attendees will engage in interactive exercises and role-plays to gain skills in helping make changes in these difficult areas.

Educational Objectives:

1. Build understanding of conceptual issues present in coping with chronic medical conditions.
2. Learn interventions for targeting lifestyle behavior change.
3. Develop role of values in creating behavior change.

WRITING RESEARCH PROPOSALS FOR NIH

Workshop

Room: B1135

ANTHONY BIGLAN, Center for Early Adolescence,
Oregon Research Institute

Target Audience: All Levels, Researchers

The workshop is intended to provide help to people who want to write proposals for research to any of the Institutes of the National Institutes of Health. It will provide a brief overview of funding opportunities through NIH and the major mechanisms for funding. The bulk of the time will be spent how to write the narrative sections of an R01 proposal (although the information will also be relevant to R21's, R13's, STTR's and SBIR's). Each section of such proposals will be described and guidance will be given about writing each section. People are encouraged to come to the workshop with a specific idea for a proposal and are welcome to send their ideas to me in advance of the workshop). Guidance will also be provided about how to form collaborations with others in the field, how to develop a line of research, such that each study contributes to that line and accumulated studies further prospects for getting funded.

Educational Objectives:

1. Understand each of the components of an NIH proposal.
2. Be able to organize material for each.
3. Understand the key theoretical, empirical, and methodological issues involved in writing a fundable proposal.

BETTING ON PEOPLE IN IMPOVERISHED CONTEXTS

Workshop

Room: B1335

LESLIE J. ROGERS, University of Mississippi
CICELY LaBORDE, University of North Texas

Target Audience: Beginner, Intermediate, Clinicians

Training new ACT clinicians to have a sincere appreciation of the individual and his or her own behavior, with an emphasis on appreciating the

function of behavior and the context in which people live and work can be challenging. The purpose of this workshop is to train clinicians to create a context in which human beings can live with meaning, integrity, and dignity regardless of the difficulties they face or present to others and environment they live in (Murrell, 2006). In this workshop we will discuss strategies that will increase the clinician's ability to create that context for themselves and their clients so that they may make a difference. This workshop will focus on forming ACT consistent alliances and implementing appropriate treatment strategies with clients who are severe in clinical presentation or reside in impoverished contexts.

Educational Objectives:

1. Execute and modify ACT-consistent treatments in difficult to treat or impoverished individuals.
2. Facilitate a rich appreciation for the individual and the context.
3. Broaden awareness and increase clinical skills for implementing more effective acceptance and mindfulness-based techniques when working with difficult to treat clients and or those who live in impoverished settings.

ACT WITH DEPRESSION

Workshop

Room: B2512

ROB ZETTLE, Wichita State University

Target Audience: Beginner, Intermediate, Clinicians

This workshop will focus on the application of ACT with clients with depression as a presenting problem. A case conceptualization approach will be emphasized in identifying multiple pathways that may lead to depression from the perspective of ACT. Specific therapeutic techniques and strategies tailored to individual clients and based upon such a case conceptualization will then be discussed and demonstrated. Special considerations and challenges in extending ACT to treatment of depression will also be covered.

Educational Objectives:

1. Learn how to apply an ACT-consistent case conceptualization approach to presenting problems of depression.
2. Learn how to identify and assess for multiple pathways that may contribute to depression.
3. Learn how to adjust techniques and strategies in ACT based upon unique considerations and issues that may arise in working with depressed clients.

ACBS BOARD MEETING

Friday Box Lunch 11:45-12:45pm

ACBS PRESIDENTIAL ADDRESS: ATRIUM II

THE HEXAFLEX DIAGNOSTIC: A FULLY DIMENSIONAL APPROACH TO ASSESSMENT, TREATMENT, AND CASE CONCEPTUALIZATION

KELLY WILSON, ACBS President and University of Mississippi

Target Audience: All levels

Empirical clinical psychology has largely been focused on measurement of the frequency and severity of various signs and symptoms and the treatment of psychological syndromes defined by clusters of signs and symptoms (DSM disorders for the most part). These syndromes have increasingly organized clinical psychology in spite of much criticism. It is imperative for us to understand that this is not as trivial as would be yet another theory of psychopathology. In such an instance, the presence of the theory might organize the activities of a relatively small group of individuals who share the area of research interest. Supposedly atheoretical syndromal classification, as seen in the DSM, has had a much more far reaching impact. Our central federal funding agency, the National Institutes of Mental Health, is organized around these categories, as are our abnormal psychology textbooks, journals, assessment instruments, and reimbursement for professional services. Such hegemony is wholly unwarranted based upon available evidence. Concerns about syndromal classification of psychological problems has been around for a good long time. However, only recently has dawn begun to break *within* the DSM effort.

The failure of syndromal classification carries with it a call for alternatives. We will explore an alternative view. I will argue that multiple systems of classification ought to compete with the gold standard being the treatment utility of the system of problem classification. Ancillary standards should include (1) the extent to which the classification strategy lends itself to the development of assessments that can guide treatment, (2) connection to more basic laboratory science, and (3) disseminability/trainability, among others. The hexaflex model will be presented as the kernel of a fully dimensional diagnostic system within which there exists close linkage between diagnosis, assessment, and intervention. Although this system is not fully worked out empirically or theoretically, evidence for its utility as an organizing strategy is mounting. Future directions in the development and testing of the model will be described.

Learning objectives:

Participants will learn:

1. Some core concerns regarding the validity of the DSM;
2. One possible framework for understanding the role of a diagnostic system;

3. About the Hexaflex Diagnostic as an alternative system for the development of assessment, treatment, and research.

Sponsors

ACT Summer Institute III is possible with the support of our generous sponsors.

University of Houston - Clear Lake, clinical psychology program

Houston Psychological Association

Nevada State Psychological Association

Context Press

Association for Contextual Behavioral Science (ACBS)

Special Thank You's

Thank you to our conference committee: Bill Black, Lora Black, Steve Bogdanos, Katherine DeLaune, Will Devine, Carrie Dodrill, Sean Fitzpatrick, Luz Garcini, Stacey Glaesmann, Diana Kurtz, Alexis Llewellyn, Aki Masuda, Julie Nicodemus, William Norwood, Emily Neilan Rodrigues, Angela Stotts, Kelly Wilson, Kelli Wright, and Rose Young.

An extra special thanks goes out to our program committee: Katherine DeLaune, William Norwood, Emily Neilan Rodrigues, Angela Stotts, Robyn Walser, Kelly Wilson, and Kelli Wright.

To all of our fabulous workshop leaders and all of you who continue to contribute year after year and make these conferences a joy to attend.

Bus Schedule

Our 47 passenger bus will run Saturday through Friday, July 14-July 20. Here are the hours of service:

Saturday & Sunday

7:30am - 9:30am
5:30pm - 10:30pm

Tuesday

7:30am - 9:30am
5:30pm - 8:30pm

Thursday

7:30am - 9:30am
5:30pm - 8:30pm

Monday

7:30am - 9:30am
5:30pm - 10:30pm

Wednesday

7:30am - 9:30am
5:30pm - 10:30pm

Friday

7:30am - 9:30am
1:00pm - 4:00pm

In the mornings the bus will **first leave** the Hilton for UHCL at approximately **7:40am**, then it will continue to loop for the rest of the morning. The bus will run approximately every 20 minutes from the Hilton to UHCL. **Final pick up** from the Hilton to UHCL in the morning will leave the Hilton at approximately **9:10am**.

In the afternoon, the bus will **first leave** UHCL at approximately **5:40pm**, after the plenary session, and make as many trips as necessary to get everyone back to the Hilton, then it will begin trips out for dinner, starting at the Hilton at approximately **6:30pm**. According to the nightly schedule, the bus will run in a loop every 20-35 minutes. Please see the nightly schedule for expected loop times.

The **final pick up of the night** will be at approximately **10:10pm or 8:10pm** (depending on the night, please see above). This is the time that it will depart from the eating area, so please make sure you're on time.

The bus will drop off and pick up at approximately the same spot at each location.

Nightly Schedule (from the Hilton to the identified locations)

Day	Dinner Location	Bus Times	Approximate Bus Loop Times	Special Event at Hilton
Saturday	Baybrook Passage	6:30pm-10:30pm	35 minutes	None
Sunday	Kemah	6:30pm-10:30pm	25 minutes	None
Monday	Big Texas	6:30pm-10:30pm	25 minutes	None
Tuesday	UHCL Area	6:30pm-8:30pm	20 minutes	Poster Session
Wednesday	Kemah	6:30pm-10:30pm	25 minutes	None
Thursday	Bay Area Blvd.	6:30pm-8:30pm	30 minutes	Follies

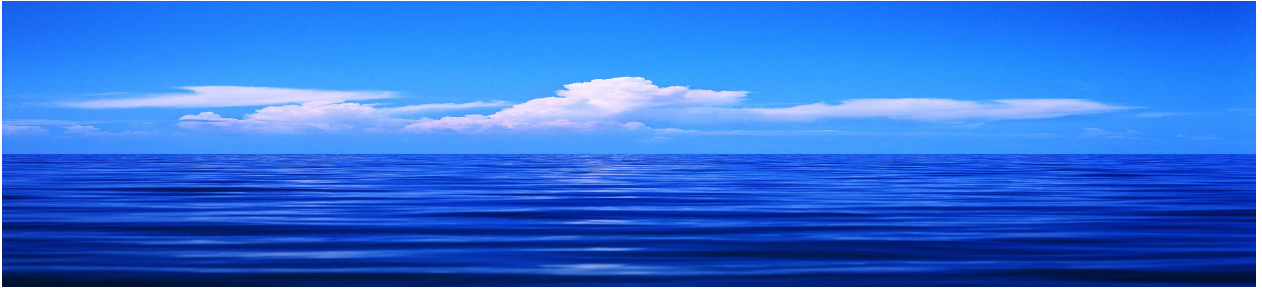
TAXI or Hilton Shuttle

If you miss the bus or are just a party animal, you can call taxis.

Liberty Cab (713) 416-6005
Yellow Cab: (713) 236-1111
A1 Taxi: (713) 722-8888

The Hilton offers a complimentary shuttle. Please call 281-333-9300 to make a reservation and/or check on availability.

Dining & Entertainment: Clear Lake-Style



For People With a Car – Pricier but GREAT !!!

Steakhouse - Perry's Steakhouse & T-Bone Tom's

Mexican – Pappasitos

Seafood – Pappadeaux or Pappa's Seafood

Italian – Frenchies Italian

New Orleans Jazz Bar & Grill – Tommy's Patio

Thai – Thai Cottage

Favorite Restaurant of the Locals 🍷

You Can Eat for Under \$10 💰

Baybrook Passage & Gateway - Saturday Night: 6:30–10:30 PM

- Berryhill Baja Grill & Cantina (Mexican) 🍷 💰
- Café Express 🍷 💰
- Panera Bread 🍷 💰
- La Madeline (French Country)
- Pei Wei Asian Diner
- Taco Milagro Beach Bar (Mexican)
- TGI Friday's
- Cold Stone Creamery (Ice Cream)
- Smoothie King
- Barnes & Noble / Starbucks
- Borders Books / Seattle Coffee
- Lowes (Building & Home Supplies)
- Best Buy Electronics
- Michael's Crafts
- Kinkos
- Old Navy

Kemah – Sunday & Wednesday Nights: 6:30-10:30 PM

- Babin's (Seafood) 🍷
- T-Bone Tom's 🍷
- The Pizza Oven 🍷 💰
- Joe's Crab Shack
- Cadillac Bar (Mexican)
- Saltgrass Steakhouse
- The Crab House
- Landry's Seafood House
- The Coffee House
- Starbucks Coffee
- Entertainment: Boardwalk Beast
Powerboat Ride & Stingray Reef

Big Texas Area – Monday Night: 6:30-10:30 PM

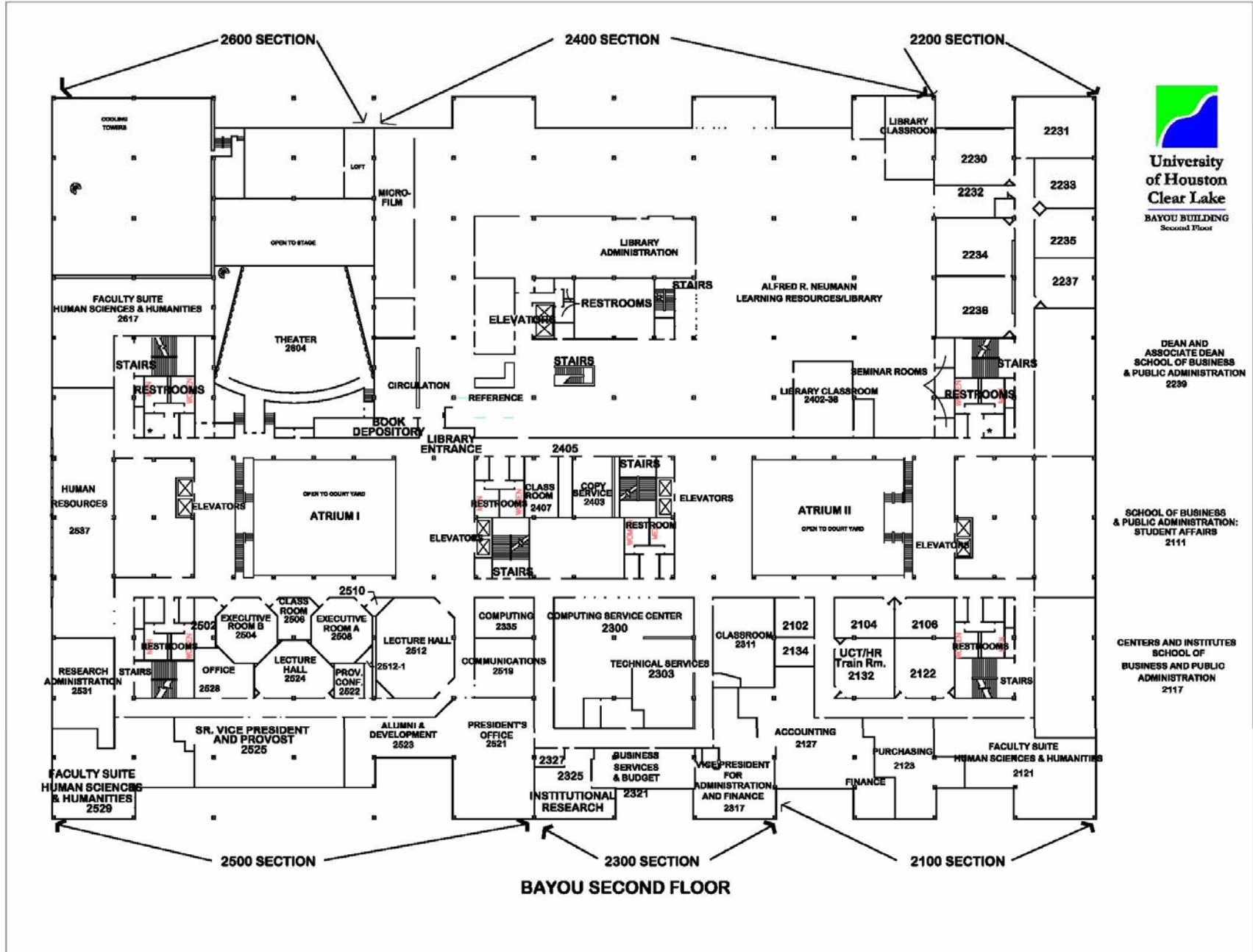
- Frenchie's Italian 🍷
- Johnny Tamale Cantina 🍷
- Jack in the Box 🍷
- Durango's (Mexican)
- Masa Sushi
- International House of Pancakes
- Tree House Bar
- Long John Silvers 🍷
- Subway 🍷
- Cyrus Persian Grill
- East Star Chinese Buffet and Sushi
- Cuisine of India
- Baskin Robbins Ice Cream
- NASA Liquor

UH Clear Lake Area – Tuesday Night: 6:30-8:30 PM

- Star Fire Grill 🍷
- DoubleDave's Pizza 🍷
- Pho 21 Vietnamese 🍷
- Arby's 🍷
- Pizza Hut To Go 🍷
- Popeyes
- Hunan Star
- Mogul (Indian)
- Sherlock's Pub
- Wael's Mediterranean Cuisine 🍷
- Schlotzsky's 🍷
- Miller's Hamburgers 🍷
- Jack in the Box 🍷
- Wingstop 🍷
- China Star
- Hoshizuna Japanese Steakhouse
- Tokyo Bowl (Japanese and Sushi)
- Tobacco 4 U Liquor Store
- CVS Pharmacy
- Ace Hardware

Bay Area Boulevard – Thursday Night: 6:30-8:30 PM

- Thai Cottage 🍷
- Jason's Deli 🍷
- Taco Cabana 🍷
- Buffalo Wild Wings Grill & Bar
- Freebirds World Burrito 🍷
- Salad Express 🍷
- BJ's Restaurant & Brewery
- Carrabba's Italian
- Outback Steakhouse
- Sushi Coast
- Marble Slab Creamery (Ice Cream)
- Ben & Jerry's (Ice Cream)
- Jamba Juice





ACT Summer Institute events take place in the Bayou Building (see maps inside back cover).

