

WorldCon II

The Second World Conference on ACT, RFT, and Contextual Behavioural Science

JULY 24-28, 2006

LONDON

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Welcome from the ACBS President

Welcome all to the Second World Conference on ACT, RFT, and Contextual Behavioral Science. This is the fourth “event” for our community. We had a World Conference in Linköping, Sweden in 2003, and Summer Institutes in Reno and Philadelphia in 2004 and 2005. This will be the first meeting where we are an official organization. The program committee has put together a week filled with extraordinary opportunities. People from all over the world interested in ACT and RFT, but also fellow travelers who share interests in acceptance, mindfulness, and values work are present throughout the schedule. In addition to ACT and RFT, you will find workshops, symposia and panels on Dialectical Behavior Therapy, Mindfulness-Based Cognitive Therapy, Integrative Behavioral Couples Therapy, Functional Analytic Psychotherapy, Gestalt Therapy, and Rational Emotive Behavior Therapy, among others. If you are like us, you will find that there are two or three things at any given time that you want to attend. On behalf of the Program Committee and the ACBS Board of Directors I would like to wish you all the warmest of welcomes. Enjoy your week.

ACBS Officers

President

Kelly G. Wilson, University of Mississippi

President-Elect

Dermot Barnes-Holmes, National University of Ireland, Maynooth

Secretary-Treasurer

Patty Bach, Illinois Institute of Technology

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Sonja Batten, VA Maryland Health Care System & University of Maryland School of Medicine

Yvonne Barnes-Holmes, National University of Ireland, Maynooth

Eric Fox, Western Michigan University

Robyn Walser, National Center for Posttraumatic Stress Disorder, Palo Alto

Student Representative

Jason Lillis, University of Nevada, Reno

Items of Note

Information Booth

If all went according to plan, during the week our information booth will be staffed by local students from London. Please feel free to ask these wonderful volunteers questions about resources, dining, etc., in the London area and they will do the best they can to assist you.

T-shirts

Conference and ACBS t-shirts will be available for sale at the Information Booth and/or the Context Press bookselling tables. The t-shirts are £8 (8 British Pounds) each. We encourage you to pay with your Visa or MasterCard, but cash will also be accepted (the ability to make change may be limited).

Book Selling

Context Press is selling ACT/ RFT related books at the conference all week (closing at about 5:15pm 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 organiser. Summaries/details about the books are available at the Context Press tables to help you shop, if you don't see one, just ask the helpful volunteers.. We encourage Visa or MasterCard, but can accept US dollars or British Pounds if absolutely necessary (the ability to make change may be limited).

One Sessions

In the early stages of putting together the program for WorldConII, we noticed that many of the proposed symposia contained papers that mixed areas - basic research, applied research, and/or clinical practice. This is part of the very purpose of ACBS -- to create a whole psychology -- and we are highlighting it in this program. We are seeking the development of not separate psychologies, but of one whole psychology, thus, we've labeled these sessions "One Sessions," (under the session category and above the room number).

In such sessions, you will find basic and applied issues mixed. It may entail a basic researcher as the discussion leader for a clinical symposium, or clinicians as discussion leaders for basic symposia. Or it may entail sessions that are so mixed it is hard to know what to call them.

The core assumption driving this effort is that both basic and applied psychology will be best served by a rich interaction among our basic and applied fellows. We hope that these sessions will facilitate integration of all our work into the development of one psychology, and a psychology more adequate to what the human community wants and needs from the behavioral sciences.

Program Shorthand

"EO" stands for Educational Objectives, and "TA" stands for Target Audience.

Meditation with Greg Rogers

Mindfulness meditation is a crucial tool in ACT, and ACT writers are beginning to emphasise more strongly its centrality in promoting acceptance and defusion. Greg Rogers is offering a classic (although abbreviated) meditation at the **end of the lunch break each day**, from 1:00 - 1:30pm in Room 777.

Greg envisions a brief introduction followed by 10 minutes sitting, 5 minutes slow circular walking, and another 10 minutes sitting (silent, not guided). Any and all are welcome, no experience necessary!

Classical *Raga* on the *Hindustani* North Indian *bansuri*

Over the course of the conference you may see and hear someone playing a bamboo flute or *bansuri*. These musical performances are generously contributed by Bernard Parker to assist in calming, centering, and to help you to become more "present". We hope you enjoy it.

Evening Events

Tuesday Evening, Social, 25 July, 19:00 – Midnight

We will have an evening of drinks, lab/research centre posters, and merriment at the Royal National Hotel (the conference hotel), across the street from the conference venue, on Bedford Way. We will be in the Edward VII & Alexandra Suites. Please eat dinner prior to arriving. A cash bar will be available.

Thursday Evening, Follies, 27 July, 19:00 – Midnight

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 8:30pm.

You can buy drinks and some basic bar snacks (like pizza, nachos, etc.).

This evening event will take place at Boland House, **not at our conference venue**. It will be a 15 minute Tube ride away, approximately 20-30 minutes total if taking the Tube. (It will be a very long walk, if you choose to walk it.). Directions are below:

Location

Guy's Bar, Boland House, St. Thomas' Street
Guy's Hospital, King's College London

Directions by Tube

1. The Royal National Hotel to Russell Square Underground (Tube)

station (3-5 minutes):

- From outside of the hotel lobby door, turn **right** and walk through the forecourt onto Woburn Place.
- Turn **right** on **Woburn Place** and proceed for approximately 150 metres.
- Turn **left** onto **Bernard Street** (just opposite the North East corner of Russell Square) and **Russell Square Tube** station is 100 metres on the right side of the street.

2. Russell Square Tube station to London Bridge Tube station

(15-20 minutes):

- Take the Piccadilly Line (**East** towards Cockfosters) one stop to **King's Cross**
- Change at **King's Cross** to the **Northern Line** (**South** towards Morden). The Northern Line is coloured black. Take the Northern Line 5 stops to **London Bridge**

3. London Bridge Tube station to Boland House (5 minutes)

- There are two different exits at London Bridge Tube station. It is important to take the one marked, '**London Bridge**' (which indicates the over ground railway station). **DO NOT** take the exit to Borough High Street. Once you pass through the ticket barriers **turn right**. You will pass the ticket windows on your left and straight ahead are arches. **Walk through the arches** and **turn right** into a large, indoor walkway (which is called Joiner Street). **Walk straight ahead** for about 1 minute and you will end up outside on St. Thomas' Street (on the corner, to your right, there is a Starbucks Coffee shop and directly ahead is a large sign saying 'Guy's Hospital, Kings College London').
- **Cross over St. Thomas' Street** so that you are directly opposite Starbucks and **turn right** on **St. Thomas' Street**. 25 metres on your **left**, you will see a large courtyard surrounded by 18th Century buildings (see map, below). This is part of King's College London. **Walk into the courtyard**, and the building on the **left** side of the courtyard is **Boland House**. (There is no street address for this building. The porter inside Boland House will then direct you to **Guy's Bar**, which is the venue for the follies.

By Taxi

If you take a taxi to the venue, tell the driver that you want to go to Boland House, Guy's Hospital, St. Thomas' Street (between Borough High Street and Joiner Street). You may also show the driver this map. There is no street address for this building.



Room Schedules

Monday, 24 July						
	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15	12:15 - 13:30	13:30 - 15:00	15:00 - 15:15
Room	Plenary		Sessions		Sessions	Sessions
Jeffrey Hall						
642			ACT in Private Practice I GUARNA, TONGAS, ROBB, LUOMA, GUARNA		Giving It Away Thoughtfully: How Can We Offer Quality ACT Training Across the Globe? STROSAHL	ACT is Behaviour Therapy: The Place of Psycho Education, Homework, Exposure, and Directive Interventions in ACT STROSAHL, WICKSELL, OST, ROBINSON, LAPPALAINEN
728			Acceptance and Change in Couple Therapy CHRISTENSEN		Behavioural Control: Depression, Shocks, and Nasty Pictures D. BARNES-HOLMES, BATTEN, GORHAM, MULLEN, COCHRANE	The Implicit Relational Assessment Procedure: Background and Rationale D. BARNES-HOLMES
822			ACT Studies Targeting Stigma and Prejudice FLETCHER, LILLIS, B. KOHLENBERG, PISTORELLO		Integrating ACT in the Treatment of Patients with Disabilities Due to Somatic Disorders WICKSELL, DAHL, GREGG	A Functional Contextualist Framework for Prevention, Public Health, and Cultural Practices BIGLAN
736			ACT for Worry and Anxiety LUCIANO, RUIZ, WALLSER, KOCOVSKI, PLUMB		Experimental Analogs of Cognitive Defusion BLACKLEDGE, BAER, KEOGH	Promoting ACT and RFT in the Media HAYES, BATTEN, BOND
834	Plenary 1: Opening Session, WILSON, D. BARNES-HOLMES, BACH, FOX, LILLIS, BATTEN, Y. BARNES-HOLMES, BOND Jeffrey Hall		Heading West: Gendered Roles and Empowered Choices GREGG		Research Analogs of Clinical Processes in ACT Y. BARNES-HOLMES	ACT in the World DAHL
731			Hierarchy & Semantic Relational Networks STEWART, MCHUGH		Hey, What about the Kids? MURRELL	Principle versus Technique, Model versus Protocol: How Best to Think about ACT LUOMA, BLACKLEDGE, GREGG, BAER
826			Defusion, Values, & the Rest of the Hexaflex: Are they Distinct or Interdependent? BLACKLEDGE, TORNEKE, WILSON, HAYES		An Introduction to RFTBACH, MORAN	
739			Integrating ACT into Social and Cultural Psychology ROGERS, BIGLAN, MURRELL, DRAKE		Superchanging your Therapy with Functional Analytic Psychotherapy (FAP) R. KOHLENBERG, TSAL, B. KOHLENBERG, PLUMMER	
744			Using RFT to Create Powerful Therapeutic Metaphors (mini-workshop) Y. BARNES-HOLMES		ACT for Substance Abuse WILSON	
777			ACT across Cultures LUNDGREN, MOLLAHAN, DAHL, VILARDAGA, GRASSI		Trauma Research Discussion Group FOLLETTE	
				L U N C H		
						B r e a k
						B r e a k
						Plenary 2: RFT - The Current State of the Evidence Invited Address, IAN STEWART, & ACT: The Current State of the Evidence B. KOHLENBERG, Jeffrey Hall
						17:00 18:00 Plenary

Tuesday, 25 July									
Room	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15	12:15 - 13:30	13:30 - 15:00	15:00 - 15:15	15:15 - 16:45	16:45 - 17:00	17:00 - 18:00
Jeffrey Hall	Sessions What Does this Mean? The Whether, What and Why of Changes in the Behavioural and Cognitive Therapies HAYES, WILLIAMS, DRYDEN, WELLS, OST		Sessions Mindfulness and the Prevention of Depression WILLIAMS		Sessions Using Mindfulness in Therapy WILSON, WILLIAMS, BAER, SOULSBY		Sessions Efficacy of the Third Wave of Cognitive and Behavioral Therapies: A review of the Evidence OST		Plenary
642	Comparing Acceptance- and Distraction-based Interventions Using Analogues for Pain and Anxiety COCHRANE, WALSER, KEHOE		Innovating and Evaluating your ACT Training LUOMA, BACH, WALSER, LUCIANO, KOERNER		Clinical issues in ACT SANDOZ, WEINSTEIN, SONNTAG, BALAZS		Functional Contextualism: A Wikipedia Approach BIGLAN, D. BARNES-HOLMES, HAYES, FOX		
728	The Bridge Between Functional Analysis of Behaviour and Relational Learning: The Basic-applied Dimension and What we Gain in Understanding and Controlling Behaviour? LUCIANO		Metacognitive Therapy: What is It and Does It Work? WELLS		Bridging the Gap Between RFT and Clinical Work: The Role of Dialectic Frames and Perspective-taking MERWIN, VILARDAGA, PLUMB, BACH, Y. BARNES-HOLMES	B r e a k	RFT Analysis of Clinical Procedures other than ACT MORAN, LUCIANO, ROBB, COCHRANE		
822	ACT and Severe Psychopathology BACH, LIPKENS, MORRIS, MITCHELL, PANKEY	B r e a k	Acceptance from a Rational Emotive Behaviour Therapy Perspective DRYDEN	L U N C H	Using ACT in the Schools PELAEZ, LIVHEIM, WELLEN, LILLIS, BIGLAN, LAYTON		Applications of Acceptance-based Strategies to the Intervention and prevention of Different Health Problems GUTIERREZ, Y. BARNES-HOLMES, SANCHEZ, VALDIVIA		B r e a k
736	The Implicit Relational Assessment Procedure (IRAP) I STEWART, D. BARNES-HOLMES		The Implicit Relational Assessment Procedure (IRAP) II STEWART, Y. BARNES-HOLMES, D. BARNES-HOLMES		Acceptance Analysis through Several Experimental Protocols: The Valued Meaning of Pain LUCIANO, D. BARNES-HOLMES, PAEZ, GUTIERREZ, RUIZ		ACT & Literature WILSON, SONNTAG, MURRELL, STORAASLI		Plenary 3: Third Generation Behavioural and Cognitive Therapies: Similarities and Differences WILLIAMS, CHRISTENSEN, HAYES, R. KOHLENBERG, KOERNER, Jeffrey Hall
834	Comparing and Contrasting ACT with Other Therapies (Paper Session) B. KOHLENBERG, HAUKE, SONNTAG, SMOUT, PARKER, TAYLOR, BRUCKER		Behaviour Analysis for Clinicians: From Basic Principles to RFT WILSON, KELLIUM		RFT & Education I FOX, STEWART, BILLINGER		BABCP ACT Special Interest Group (SIG) WEBSTER		
731	ACT with Resistant, Reluctant, or Oblivious Patients GREGG		ACT in Medical Settings WICKSELL, OLSSON, ROBINSON, STROSAHL		ACT: Treating the Fallout of Trauma WALSER, FOLLETTE, PISTORELLO				
826	Smarties or Beans: Translating ACT/Behaviourism into the Real World MURRELL, ROGERS		Warriors of Compassion: An Experiential Integration of ACT and FAP in Effecting Personal and Client Change TSAI, DAHL		Using ACT with Chronically Suicidal Patients STROSAHL				
739					ACT for Depression ZETTLER				
744									
777									

Wednesday, 26 July									
Room	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15	12:15 - 13:30	13:30 - 15:00	15:00 - 15:15	15:15 - 16:45	16:45 - 17:00	17:00 - 18:00
Jeffrey Hall	Functional Analytic Psychotherapy: Awareness, Courage, and Intimacy in the Therapeutic Relationship R. KOHLENBERG, TSAI		Evaluating the Effectiveness, Impact, and Utility of Training: How Do We Know When it Works? GREGG, WILSON, BATTEN, STROSAHL, DAHL, Y. BARNES-HOLMES		ACT in Private Practice II SONNTAG, MORAN, TANGO, COWELL		Why are Humans so Cruel and What can We do about it? CIARROCHI		Plenary
642	Alliance Building and ACT ROGERS, KELLUM, MURRELL, VAN DYKE		Toward a More Functional Approach to the Training and Dissemination of ACT and other Empirically-Supported Psychotherapies: Models, Data, and Future Directions LUOMA		ACT Across the Developmental Spectrum BALAZS, J. C. WILSON, BUTLER, MAITILA, PANKEY		The Third Wave Therapies in the Context of Chronic and Acute Pain: A Clinical and Research Update VOWLES, WICKSELL, KEOGH, GAUNTLETT		
728	Analysis of Derived Relations and Transformation of Functions LUCIANO, BLACKLEDGE, MANAS, CABELLO, RODRIGUEZ, VALDIVIA	B r e a k	Interacting with Values Differently: Clinical and Theoretical Perspectives VAN DYKE, MURRELL, BIGLAN, ROBB	L U N C H	Canonical Works: The Contextual Behavioural Roots of ACT & RFT WILSON, HAYES, SANDOZ	B r e a k	Third Generation Models of Smoking Cessation Treatment BOLES, HERNANDEZ, BIGLAN, YEARICK, B. KOHLENBERG		Plenary 4: Science and Ancient Ideas of what it Means to be Human: Exploring the Implicit Values Underlying ACT STROSAHL, HAYES, Jeffrey Hall
822	ACT and Behavioural Medicine VOWLES, GREGG, WESTIN, LUNDGREN		Assessing Values in Acceptance & Commitment Therapy BLACKLEDGE, CIARROCHI, PLUMB, SANDOZ, LUNDGREN		Implicit Relational Assessment Procedure: A Measure of Implicit Cognition in Adults and Children COOGAN, ADAMS, D. BARNES-HOLMES, CAMPBELL		ACT & Gestalt BOLDBERSTON, PARLETT, WILSON		
736	ACT & Spiritual Traditions GOMEZ, MOLLAHAN, WEINSTEIN		RFT & Education II FOX, PELAEZ, BILLINGER		Exposure and Acceptance in the Rehabilitation of People with Chronic Debilitating Pain WICKSELL		ACT for Stress in Organizational Settings BOND, FLAXIMAN		
834		Using Mindfulness Techniques in ACT WEBSTER			Psychological Flexibility, Contingency Sensitivity, and Rule-Governed Behavior BOND, GORHAM, KELLUM		The Amazing Infant: Early Learning of Relational Frames PELAEZ		
731		ACT in the Treatment of Psychosis/Serious Mental Illness BACH			Using ACT as a Brief Intervention Model STROSAHL				
826		Integrative Behaviour Couple Therapy CHRISTENSEN			Acceptance and Commitment Therapy in Group Format PISTORELLO, WALSER				
739		We Cannot Walk Alone: Using ACT to Combat Prejudice HAYES, LILLIS, VILARDAGA			Mindfulness: Current Approaches BAER				
744		Acceptance and Commitment Therapy and Supervision WALSER							
777									

Thursday, 27 July									
Room	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15	12:15 - 13:30	13:30 - 15:00	15:00 - 15:15	15:15 - 16:45	16:45 - 17:00	17:00 - 18:00
Room	Sessions		Sessions		Sessions		Sessions		Plenary
Jeffrey Hall	Using the ACT Self-help Books in Clinical Practice HAYES, STORAASLI, CLARKE, DAHL, LILLIS, MOLLAHAN		A Contextual Cognitive Behavioral Approach to Chronic Pain: Eleven Years of Development and Data on Acceptance, Values, and Mindfulness MCCracken		Exploring Facets of Mindfulness in Experienced Meditators BAER		Rival Theories, Flaming Listserves and Empirical Data: The Three-Act Story of Whether Acceptance and Commitment Therapy is Anything New or Different FORMAN		
642	Effectiveness Studies on ACT BIGLAN, LAPPALAINEN, FORMAN		All Shapes and Sizes: An Exploration of Body Image Acceptance and Eating Behaviour SANDOZ, MERWIN, CERNVALL, FOLLETTE, LILLIS, PARLING, FORMAN		Spirituality, Values, and Metaphors--the Role of Spiritual Practice as a Motivational Augment WEINSTEIN, MURRELL, BIGLAN, DAHL		It is What It is: Appreciating Whole, Complete, and Perfect in our Clients, Ourselves, and our Work MURRELL		
728	Understanding and Altering Experiential Avoidance ADAMS, MERWIN, SONNTAG, KOCOVSKI		Measuring the Process of Change in ACT CIARROCHI, WILSON, BOND		ACT for Traumatized Individuals: State of the Emerging Data BATTEN, WALSER, FOLLETTE, TAYLOR		Using the ACBS Web-site LUOMA, FOX		
822	RFT Super-Geeks, Unite!: Using the RAP to Examine Relational Responding DRAKE, D. BARNES-HOLMES, BOLES, SANDOZ, WILSON, ZETTLE, KELLUM, WEINSTEIN		ACT and Skilled Performances WEINSTEIN, RUIZ, THERBACH, LUNDGREN		ACT, Mindfulness, and Social Anxiety Disorder DRAKE, MOREN, WIWE, FORMAN, KOCOVSKI		Using Acceptance and Existential Reinforcement with Involuntary Clients LUNDGREN, DAHL, PAEZ, STEWART		B r e a k
736	The Brief (but longer than you think) History of ACBS FOX		Relational Frame Theory Research on Analogical Reasoning, Coherence and the Interactions Between Relational and Functional Context GOMEZ, LIPKENS		Contextual Behavioural Philosophy SANDOZ, SISTI, VILARDAGA, WILSON		IRAP and Self-relevant Stimuli DRAKE, D. BARNES-HOLMES, MERWIN, SCANLON		B r e a k
834	Putting Boldness into ACT: Implications for Therapy Application and Valued Living WALSER				Derived Relational Responding through Three Topics: Deductive Thought, Conditional Reasoning, and Attributions in Problem-solving VALDIVIA, STEWART, MANAS, CABELLO		The History of ACT/RFT: Observations from an Eyewitness ZETTLE		Plenary 5: Presidential Address: The Heart of ACBS HAYES, WILSON, Jeffrey Hall
731	Teaching ACT Principles More Directly ROBB				Case Conceptualization in ACT BACH, MORAN				
826	Clinical Situations from the Perspective of RFT LUCIANO, TORNEKE				ACT with Chronic Pain in Children and Adults WICKSELL, VOWLES, ROBINSON				
739	ACT at War: Soldiers, Survivors, and Families BATTEN				ACT and DBT in the Treatment of Extreme Emotional Dysregulation: A Sequential Approach PISTORELLO, CLARKE				
744	ACT with Male Sexual Problems HARRIS				ACTing Therapeutically: Relational Frame Theory and ACT Processes in the Therapeutic Relationship BUNTING, LILLIS				
777	Contextual Psychology in the UK BALAZS, GLAISTER				Applied RFT: Language Training and More... BALAZS, STEWART				

Friday, 28 July				
	9:00 - 10:30	10:30 - 10:45	10:45 - 12:15	
Room	Sessions		Sessions	
Jeffrey Hall	A Contextual Behavioural Approach to Emotion in Psychotherapy Supervision BATTEN		Personality Disorders, Psychological Inflexibility, Verbal Regulation and ACT LUCIANO, PAEZ, VALDIVIA, GUTIERREZ, VISDOMINE	
642	The Nature and Impact of Acceptance MURRELL, KEOGH, WESTIN, CALMBRO, FORMAN	B r e a k	ACT and Substance Abuse HAYES, SMOUT, STOTTS	
728	ACT with People with Challenging Needs PANKEY, NOONE, ADAMS, STALBY		The Integration of ACT with CBT (mini-workshop) CIARROCHI, ROBB, MERWIN, BUNTING	
822	DBT & ACT PISTORELLO, KOERNER, CLARKE		Health and Social Problems Treated by Contextual Therapies SANCHEZ, HERNANDEZ, MANAS	
736	Enhancing Effective Leadership with ACT and RFT BOND			
834	Experiential Skills Training via the Supported Role-play Method SONNITAG			
731	Integrating ACT into Educational Systems ROGERS			
826	An ACT Approach to Empowering the Therapeutic Relationship PIERSON			
739	Differences and Similarities in the Third Wave Approaches to Self-destructive Behaviour OVEFELDT, DAHL, LUNDGREN			
744	Defusion: A Skills Building Workshop LUOMA, FLETCHER			
777	ACT & Health Psychology CIARROCHI			
L U N C H				
			Plenary 6: Creating a Home: Who are we, what do we want to be? KELLUM, D. BARNES-HOLMES, HAYES, WILSON, LUCIANO; Panel & Community Meeting, Jeffrey Hall	
			13:30 - 15:30 Plenary	

Session Descriptions – Monday, 24 July

Monday Morning - 9:00-10:30

Opening Session: Welcome to ACBS & WorldCon II

Panel - General

Room: Jeffrey Hall

KELLY G. WILSON, University of Mississippi
DERMOT BARNES-HOLMES, NUI Maynooth
PATRICIA BACH, Illinois Institute of Technology
ERIC FOX, Western Michigan University
JASON LILLIS, University of Nevada, Reno
SONJA V. BATTEN, VA Maryland Health Care System &
University of Maryland School of Medicine
YVONNE BARNES-HOLMES, NUI Maynooth
FRANK W. BOND, Goldsmiths College, University of London

The ACBS Board of Directors and WorldCon II personnel will provide an overview of organization and conference. The program chair will discuss the vision for the conference. Members and officers of the board will outline topics of discussion that will require attention during the first years of operation (e.g., role of students, training issues, connection between research and application, development of web content, diversity and inclusion, training). The panelist will present initial committee structures and challenge the audience to involve themselves in the organization of committees and special interest groups.

Monday Morning - 10:45-12:15

ACT in Private Practice I

Panel - ACT/ Professional Issues

Room: Jeffrey Hall

Chair: JOEL GUARNA, Private Practice, Maine and New Hampshire
PHOEBUS N. TONGAS, Private Practice, Los Angeles
HANK ROBB, Private Practice, Oregon
JASON LUOMA, Private Practice, Oregon
JOEL GUARNA, Private Practice, Maine and New Hampshire

Clinicians in private practice face a wide range of challenges, some of which overlap with the issues faced by their colleagues in other settings, while other issues are unique to working in this setting. Many clinicians will spend at least a portion of their careers working in private practice settings. Despite this fact, academic programs and professional conferences often neglect the particular needs of the private practitioner. The panel will address a range of theoretical and philosophical issues relevant to clinicians in private practice and to ACT therapists and therapists-in-training who may someday work in such settings.

TA: Therapists

Acceptance and Change in Couple Therapy

Invited Address - Contextual Therapies

Room: 642

ANDREW CHRISTENSEN, UCLA

I will describe the methods and substantive findings from a program of research on couple therapy at UCLA and the University of Washington. In this research, 134 chronically and seriously distressed couples were randomly assigned to two types of

behavioral couple therapy: *Traditional Behavioral Couple Therapy* and *Integrative Behavioral Couple Therapy*. All couples received an average of 23 sessions of therapy over an average of 36 weeks. Couples have been followed for two years post therapy. I will summarize data on the impact of behavioral couple therapy, mechanisms of change, predictors of change, and the process of couple therapy.

EO: 1) Methodological strategies for investigating the effects of couple therapy; 2) Substantive findings from the UCLA/UW clinical trial on couple therapy; 3) Implications of current findings on the impact of behavioral couple therapy

TA: Clinicians and researchers interested in couple therapy. Should have an intermediate level of understanding of research and couple therapy

ACT Studies Targeting Stigma and Prejudice

Symposium - ACT/ Stigma

Room: 728

Chair: LINDSAY FLETCHER, University of Nevada, Reno

ACT for Reducing the Impact of Prejudicial Thoughts Among College Students

JASON LILLIS, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno

Acceptance and Commitment Training and Stigma toward People with Psychological Disorders: Developing a New Technology

Akihiko Masuda, University of Texas
Steven C. Hayes, University of Nevada, Reno
LINDSAY FLETCHER, University of Nevada, Reno
Kara Bunting, University of Nevada, Reno
Jason Lillis, University of Nevada, Reno

Acceptance and Commitment Therapy for Self-Stigma and Substance Abuse

BARBARA KOHLENBERG, University of Nevada School of Medicine
Jason Luoma, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno
Lindsay Fletcher, University of Nevada, Reno
Alyssa Rye, University of Nevada, Reno

Acceptance and Commitment Therapy and Multicultural Training for Substance Abuse Counselors

JACQUELINE PISTORELLO, University of Nevada, Reno
Jason Luoma, University of Nevada, Reno
Barbara Kohlenberg, University of Nevada, Reno
Nancy Roget, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno
Cathy Choi, University of Nevada, Reno
Jennifer Plumb, University of Nevada, Reno
Mikaela Hildebrandt, University of Nevada, Reno
Tom Waltz, University of Nevada, Reno
Leslie Steve, Reno, Nevada
Joseph Quinones, City of Portland, Oregon
Melissa Piasecki, University of Nevada, Reno
Stan Sue, University of California, Davis

ACT offers an approach to stigma and prejudice that focuses on defusion and acceptance of difficult stigmatizing or prejudicial thoughts, and movement toward valued actions. This panel includes several studies that have used Acceptance and Commitment Therapy to target stigma and prejudice. Subject

- Monday, 24 July, 2006 -

populations include substance abuse clients and their counselors, and undergraduates who explored stigma towards the mentally ill and racial prejudice. Preliminary results indicate that this is a fruitful and important line of research.

EO: 1) Learn about an ACT approach to stigma and prejudice; 2) Consider issues relating to substance abuse and other populations; 3) Learn about the state of the research in this area

TA: Researchers, clinicians

ACT for Worry and Anxiety

Symposium - ACT/ Empirical/ Brief treatment studies
Room: 822

Chair: M. CARMEN LUCIANO-SORIANO, University of Almería

ACT for Common Problematic Worries: Random Application of a Brief Protocol

Francisco Montesinos, Spanish Cancer Association

M. Carmen Luciano-Soriano, University of Almería

FRANCISCO J. RUIZ-JIMÉNEZ, University of Almería

Acceptance and Commitment Therapy: Adaptation of a Structured Intervention for the Treatment of PTSD

Christi Ulmer, VA Palo Alto Health Care System, California

ROBYN D. WALSER, National Center for PTSD Research and

TLC Consultation Services, California

Darrah Westrup, VA Palo Alto Health Care System, California

David Rogers, VA Palo Alto Health Care System, California

Jennifer Gregg, San José State University, California

Dorene Loew, VA Palo Alto Health Care System, California

The Role of Mindfulness and Acceptance in the Cognitive Model of Social Anxiety

NANCY KOCOVSKI, Wilfrid Laurier University and Centre for Addiction and Mental Health, Canada

Susan Battista, Wilfrid Laurier University, Canada

A Randomized Clinical Trial of Acceptance and Commitment Therapy for OCD

Michael P. Twohig, University of Nevada, Reno

Steven C. Hayes, University of Nevada, Reno

JENNIFER C. PLUMB, University of Nevada, Reno

Larry Pruitt, University of Nevada, Reno

Angie Sailer, University of Nevada, Reno

Marisa Torch, University of Nevada, Reno

This symposium shows different applications of ACT to several anxiety-related problems. Having in common the experiential avoidance dimension, the role of acceptance as the core treatment component will be analyzed.

EO: 1) Consider the several applications of ACT; 2) Learn more about the experiential avoidance dimension common to most of the problems; 3) Analyze the different clinical methods/formats directed towards acceptance

TA: Clinicians/intermediate

Heading West: Gendered Roles and Empowered Choices

Invited Address - ACT/ Training

Room: 736

JENNIFER GREGG, San José State University, California

A large portion of our cultural socialization centers around the roles we adopt based on gender. These roles contribute to our conceptualized self, our context, and our cultural understanding of emotion. This talk will provide a discussion of gender and its

role in the intra- and interpersonal processes employed in ACT, and will serve as a jumping-off point for considering how awareness at the level of self and community influences choice and valued living.

EO: 1) learn about types of self as discussed in ACT; 2) learn about how gender roles interact with conceptualized self; 3) consider role of self-awareness at level of self and community in making valued life choices

Target Audience: All

Hierarchy & Semantic Relational Networks

Symposium - RFT/ Experimental/ Theoretical

Room: 834

Chair: IAN STEWART, NUI Galway

Examination of Nodal-distance Effects in Equivalence Class Formation

LOUISE MCHUGH, University of Wales, Swansea, UK

Robert Whelan, University College Dublin, St. Vincent's

University Hospital

Ting Wang, University of Wales, Swansea, UK

Carla Chatfield, University of Wales, Swansea, UK

Effects of Nodal Distance and Speed Contingencies on Equivalence Class Formation

Robert Whelan, University College Dublin, St. Vincent's

University Hospital

LOUISE MCHUGH, University of Wales, Swansea, UK

Non-Arbitrary Hierarchical Relations and Class Inclusion

Carla Chatfield, University of Wales, Swansea, UK

LOUISE MCHUGH, University of Wales, Swansea, UK

Ian Stewart, NUI Galway

Contextually Controlled Same Different Responding

IAN STEWART, NUI Galway

Gillian Kelly, NUI Galway

Dermot Barnes-Holmes, NUI Maynooth

Traditional cognitive accounts of the organization of knowledge refer to the idea of a hierarchically structured semantic network. This symposium presents a series of papers that present an RFT approach to the two elements that are critical in this domain of investigation: (i) the semantic network and (ii) hierarchical relations. It is envisaged that the investigation of these elements might in time provide the basis for a more comprehensive RFT-based account of a hierarchical semantic relational network. Papers 1 and 2 present work on relational networks. More specifically, they present research into basic equivalence-based models of the semantic relational network and report evidence showing the superiority of a relational operant relative to a mechanistic associative distance account of nodal distance effects in this context. Papers 3 and 4 report research into hierarchical relational responding. Paper 3 presents the results of ongoing work training hierarchical relational responding in children, while Paper 4 lays out the findings from a series of experiments that have modelled contextually controlled same-different relational responding, which is thought to be a very important element underlying the development of hierarchical relations.

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EO: 1) Learn about hierarchical relational responding; 2) Learn about some of the methodologies used to model hierarchical relational responding; 3) Learn about the semantic network

TA: Intermediate, Advanced, Researchers

Defusion, Values, & the Rest of the Hexaflex: Are they Distinct or Interdependent?

Symposium - ACT/ Theoretical/ Hexaflex

One Session

Room: 731

Chair: J. T. BLACKLEDGE, University of Wollongong, Australia
Discussion Leader: NIKLAS TORNEKE, Independent Practice, Kalmar, Sweden

Cognitive Defusion as a Distinct Process

J. T. BLACKLEDGE, University of Wollongong, Australia

The Altogether Intimate Relationship between Values and Defusion

KELLY G. WILSON, University of Mississippi

Defusion and Psychological Flexibility

STEVEN C. HAYES, University of Nevada, Reno

The conceptualisation of cognitive defusion, relative to values, commitment, acceptance, contact with the present moment, and self as context, will be discussed. Can defusion be thought of as a distinct psychological process, or does the instantiation of defusion require a focus on these other ACT processes as well?

EO: 1) Learn a comprehensive conceptualization of cognitive defusion; 2) Learn about the tight interplay between values and defusion in ACT; 3) Learn about the interdependence of all six core processes in ACT

TA: Intermediate & advanced; clinicians; researchers

Integrating ACT into Social and Cultural Psychology

Symposium - ACT/ RFT/ Theoretical/ Contextualism

Room: 826

Chair: LESLIE J. ROGERS, University of Mississippi

Contextualism and Cultural Practices

ANTHONY BIGLAN, Oregon Research Institute

Childhood Sexual Abuse, Rape Fantasies, and Magnified Sexual Scripts

AMY R. MURRELL, University of North Texas

Altruism

CHAD E. DRAKE, University of Mississippi

The purpose of this symposium is to discuss special issues that arise when considering current cultural and social psychological structures and its relationship to New Wave Behavior therapies. Topics to be discussed range from the role of ACT/RFT at the individual level of analysis within a socio-cultural context to a functional contextualistic analysis of current social and cultural structures. Implications of integrating the underlying theory of RFT and ACT principles will also be discussed.

EO: 1) Exploration and Implementation of ACT with regards to cultural/societal practices; 2) Learn about relational frame theory and its application to deviant social behaviours; 3) Learn about the integration of ACT into public policy

TA: Beginner

Using RFT to Create Powerful Therapeutic Metaphors

90 min. Mini-workshop - RFT/ Theoretical/ Clinical
Room: 739

YVONNE BARNES-HOLMES, National University of Ireland, Maynooth

The workshop offers an overview of RFT's conceptualization of the processes of generating and understanding analogy and metaphor. The workshop will primarily focus upon training attendees to abstract the key features of therapeutic metaphors that address clinical questions. Attendees will also learn to harness precise metaphorical features for greater therapeutic outcomes.

EO: 1) Understand RFT conceptualization of metaphor; 2) Apply RFT conceptualization of metaphor to clinical practice; 3) Construct new clinically relevant metaphors using RFT framework.

TA: Intermediate and advanced clinicians and researchers

ACT Across Cultures

Panel - ACT/ General

Room: 744

Chair: TOBIAS LUNDGREN, Uppsala University, Sweden
LAI MOLLAHAN, Norfolk and Waveney Mental Health Partnership NHS Trust, UK

JOANNE DAHL, Uppsala University, Sweden

TOBIAS LUNDGREN, Uppsala University, Sweden

ROGER M. VILARDAGA, University of Nevada, Reno

Alessandra Da Silva Souza, Instituto de Psicologia Aplicada, University of Brazil

Fabio Augusto do N. Calo, Instituto de Psicologia Aplicada, Brazil

Edhen Laura Torquato de Araujo Lima, Instituto de Psicologia Aplicada, University of Brazil

RODRIGO GRASSI de OLIVEIRA, Pós-Graduação da Pontifícia Universidade Católica do Rio Grande do Sul, Brazil

ACT has been developed mainly from the western world mainstream culture. With the growing empirical support for ACT, clinicians will have to develop ACT to suit their own contexts and cultures. The panel will show movies of ACT work from India and South Africa and hear presentation from work in other contexts. Participants in the panel will talk about how they have applied ACT to the specific context they are working in. The audience will be invited for discussions and questions.

Monday Afternoon - 13:30-15:00

Giving it Away Thoughtfully: How Can We Offer Quality ACT Training Across the Globe?

Invited Address - ACT/ Training

Room: Jeffrey Hall

KIRK STROSAHL, Mountainview Consulting, Washington

As ACT has gained growing recognition as a potentially powerful clinical model, the issue of how to train clinicians in a consistent, high quality way has become a major issue. This presentation will review previous, substantial work focused on creating a low cost, high quality training system that can be applied world wide. Attendees will learn about efforts to identify and operationalize core clinical competencies and to develop a train the trainers model of

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dissemination. We will also examine the barriers to implementation of this training model and propose some solutions.

EO: 1) Appreciate the barriers to dissemination of and training in ACT throughout the world; 2) Appreciate the core competencies approach to training new clinical skills; 3) Demonstrate a trainer's model and how it can rapidly disseminate a new technology

TA: All interested attendees, regardless of skill level

Behavioural Control: Depression, Shocks, and Nasty Pictures

Symposium - ACT/ Experimental/ Behavioural control/ Psychopathology

One Session

Room: 642

Chair: DERMOT BARNES-HOLMES, NUI Maynooth

Discussion Leader: SONJA V. BATTEN, VA Maryland Health Care System

Rule-Following: Pliance, Tracking, and Psychopathology

MARIE GORHAM, NUI Maynooth, Ireland

Yvonne Barnes-Holmes, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

Dave McAuliffe, University College Cork, The Chaplaincy Centre, Ireland

Acceptance versus Distraction as Strategies for Increasing Pain Tolerance for Self-Delivered Electric Shocks

JENNY MULLEN, NUI Maynooth, Ireland

Dermot Barnes-Holmes, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

Analysing Experiential Avoidance: Differential Reactions to Aversive Visual Images

ANDY COCHRANE, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

M. Carmen Luciano-Soriano, University of Almería

This symposium brings together three studies that examine differing aspects of behavioural control. The first paper examines the differing patterns of rule following in non-clinical and depressed participants in an experimental context. The theme of rule-following continues with the second paper, which compares acceptance-versus distraction protocols (rule-alone and rule with metaphor/exercise) for increasing pain tolerance. The function of the acceptance metaphor and exercise was to decrease behavioural control functions for thoughts and feelings, and the findings offer support for the mediating role of cognitive defusion. The final paper focuses on the effects of emotional stressors on those predisposed towards acceptance or avoidance. The procedure discriminated between high and low avoiders in a non-clinical sample and the electrophysiological data suggested that the high-EA group engaged in verbal strategies to regulate their emotional responses to aversive visual images.

EO: 1) Learn about experimental methodologies for examining the impact of acceptance on experiential avoidance; 2) Learn about some of the empirical evidence that supports a role for acceptance in

counteracting experiential avoidance; 3) Evaluate both the methodologies and empirical evidence from experimentally-based analog research on acceptance processes

TA: Intermediate to Advanced. Researchers and Clinicians

Integrating ACT in the Treatment of Patients with Disabilities Due to Somatic Disorders

Symposium - ACT/ Clinical/ Behaviour Medicine

Room: 728

Chair: RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm

Behaviour Therapy and ACT in Patients with Refractory Epilepsy

JOANNE DAHL, Uppsala University, Sweden

Tobias Lundgren, Uppsala University, Sweden

Improving Diabetes Self-Management through Acceptance, Mindfulness, and Values: A Randomized Controlled Trial

JENNIFER GREGG, San José State University, California

Glenn M. Callaghan, San José State University, California

Steven C. Hayes, University of Nevada, Reno

ACT and a Behaviour Medicine Model for Patients with Debilitating Somatic Symptoms

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm

A large number of patients within the health care system suffer from refractory and debilitating symptoms, for which traditional pharmacological and psychological strategies are many times insufficient. Rather than focusing on alleviation of unwanted symptoms by using control-oriented techniques, ACT emphasizes acceptance of negative experiences as a means to move toward chosen values. This contextual form of behavior therapy seems particularly promising for patients presenting with therapy resistant somatic conditions, for which untreated symptoms represent major barriers to an active and meaningful life. The symposium seeks to illustrate the application of this approach in the treatment of patients with treatment resistant somatic disorders, such as epilepsy, diabetes, and unclear symptoms and disabilities of neurological character.

EO: 1) Help clients discriminate workability in their efforts to control symptoms; 2) Teach clients to discriminate vitality in alternative strategies for negotiating health care system; 3) Learn how ACT can be applied with patients suffering from debilitating medical conditions

TA: Beginner/Intermediate

Experimental Analogs of Cognitive Defusion

Symposium - ACT/ Experimental/ Cognitive defusion/ Analog

Room: 822

Chair: J. T. BLACKLEDGE, University of Wollongong, Australia

Discussion Leader: RUTH BAER, University of Kentucky

Two Computer Analog Investigations of Cognitive Defusion: Observer Perspective and Description-Evaluation Interventions

J. T. BLACKLEDGE, University of Wollongong, Australia

Jenny Abraham, University of Wollongong, Australia

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Dana Bassett, University of Wollongong, Australia
*A Laboratory Based Investigation into the Process of
Cognitive Defusion*

CLAIRE KEOGH, NUI Maynooth
Yvonne Barnes-Holmes, NUI Maynooth
Dermot Barnes-Holmes, NUI Maynooth

An Experimental Analysis of Cognitive Defusion

Hilary-Anne Healy,
Yvonne Barnes-Holmes, NUI Maynooth
Dermot Barnes-Holmes, NUI Maynooth
CLAIRE KEOGH, NUI Maynooth
Kelly G. Wilson, University of Mississippi
M. Carmen Luciano-Soriano, University of Almeria

*Disrupting Experiential Avoidance: A Relational Frame
Theory Analog of Cognitive Defusion*

Ruth Melia, NUI Maynooth
Bryan Roche, NUI Maynooth
J. T. BLACKLEDGE, University of Wollongong, Australia

The critical importance of cognitive defusion to ACT warrants extensive testing of techniques thought to instantiate this process, and several research labs have begun to focus their attention toward this task. The results of five separate analog cognitive defusion studies will be presented.

EO: 1) Understand how sample defusion preparations were implemented at basic RFT and analog component levels; 2) Learn about the effects of at least three different defusion techniques; 3) Learn about how cognitive defusion can be conceptualized and operationalized

TA: Intermediate & Advanced; clinicians & researchers

Research Analogs of Clinical Processes in ACT

Invited Address – RFT/ Basis of Applied Work
Room: 736

YVONNE BARNES-HOLMES, NUI Maynooth

The session offers an overview of the methodologies and results from a number of research analogs of clinical processes in ACT conducted to date, including acceptance and defusion. I will highlight key areas of difficulty in conducting research of this kind and the types of control measures that are relevant. I will also review the overlap of findings across different research strands.

EO: 1) Understand the aims and objectives of analog research on ACT processes; 2) Learn the necessary control measures for sound analog research; 3) Understand the state of the analog evidence on ACT.

TA: Intermediate and advanced researchers and advanced clinicians

Hey, What about ACT & kids? State of the Child, Adolescent, and Family Research: A Research & Practice Conversation

Discussion Session

Room: 834

Chair: AMY R. MURRELL, University of North Texas

Although ACT and ACT-consistent clinical work with youth and families has been ongoing for many years, the empirical work lags far behind the research on ACT with adults. Some researchers have been successful in studying ACT with children, adolescents, and their families. There is a bit more work on RFT. In

addition, there is ongoing and upcoming work in this area. However, there are challenges in researching these populations that mostly do not exist when studying only adults. This meeting is for researchers who are conducting or wish to conduct empirical work on ACT and/or RFT with youth and families. This meeting will provide a place to discuss challenges and potential ways to overcome them, as well as provide research updates. This open forum is also an ideal place to establish contacts and obtain contact information from researchers working on youth and family projects.

Monday Afternoon Workshops - 13:30-16:45

An Introduction to RFT

Workshop - RFT/ Basis of Applied Work
Room: 731

PATRICIA BACH, Illinois Institute of Technology, IL
D. J. MORAN, Trinity Services, Joliet, IL

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 behaviour. We will discuss, from a behaviour analytic point of view, how people can listen with understanding and speak with meaning. 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 Behaviour analytic endeavors.

We plan to make clear the core assumptions of functional contextual behaviour 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.

Workshop Activities: The workshop will be guided by an animated slide show and will be punctuated with audience participation, and small group participation.

EO: 1) Workshop attendees will be able to list and describe six basic principles of functional contextualism, and also contrast those principles from mainstream psychology principles; 2) Attendees will be able to compare and contrast conditioned discrimination and derived relational responding, in research contexts and in daily use; 3) Attendees will be able to define arbitrary applicable relational responding, along with mutual entailment and combinatorial entailment; 4) Attendees will be able to define "relational frame" in behaviour analytic terms, and give 6 examples of relational frames; 5) Attendees will be able to describe transformation of stimulus functions regarding relational frames; 6)

Attendees will be able to explain an expanded view of "verbal behaviour" using RFT principles; 7) Attendees will generate examples of how to apply RFT principles to their own research or application questions.

TA: This workshop is for people with limited exposure to Relational Frame Theory

Mindfulness-based Cognitive Therapy

Workshop - Contextual Therapies

Room: 826

MARK WILLIAMS, Oxford University

There is a high risk of relapse and recurrence in patients suffering a first episode of major depression. Once an episode has recurred, the risk of a further episode is substantially increased. There is accumulating evidence to suggest that this risk of recurrence is highest for those people who react to small shifts in negative mood with re-triggering of old habits of negative thinking formed during previous episodes.

Mindfulness-based cognitive therapy (MBCT) combines Jon Kabat Zinn's Stress Reduction program with techniques from Cognitive Therapy in an eight week 'class' format for up to twelve patients who are currently in remission. It aims to teach participants how to become aware of early warning signs of relapse, and to reduce tendencies to avoid these early signs. It includes breathing meditation and yoga stretches to help participants become more aware of moment-to-moment changes in the mind and the body. It also includes basic education about depression, and exercises from cognitive therapy that emphasizes the links between thinking and feeling. Preliminary evidence from two randomised controlled trials suggests that MBCT is effective in reducing risk of relapse in patients with three or more previous episodes of major depression, and MBCT is now included in the UK Government's National Institute of Clinical Excellence (NICE) Guidelines for prevention of recurrence in major depression.

EO: The aim is that, by the end of the workshop, participants will be more familiar with: 1) the recent evidence on the nature of cognitive risk for relapse; 2) why a mindfulness-based approach may be an appropriate way to address such risk; 3) the preliminary evidence on efficacy. Participants will have experienced some of the MBCT practices used in the 8-week program and how these are integrated with CBT through dialogue and discussion of the practice.

TA: This is an Introductory workshop especially for those who deal with recurrent depression in their patients. Some previous experience of therapy with depression is desirable, but it may also be of interest to those who wish to apply meditation-based approaches in other healthcare settings

Supercharging your Therapy with Functional Analytic Psychotherapy

Workshop - Contextual Therapies

Room: 739

ROBERT J. KOHLENBERG, University of Washington
MAVIS TSAI, Independent Practice and Clinical Instructor,
University of Washington

BARBARA KOHLENBERG, University of Nevada School of
Medicine

MARY PLUMMER, University of Washington
Glenn M. Callaghan, San José State University

The therapeutic relationship: everyone considers it to be fundamental in bringing about clinical change, but what is it and how do you use it? We will answer these questions by introducing you to Functional Analytic Therapy (FAP). FAP can be used to supercharge almost any type therapy, but given its behavioural underpinnings (Kohlenberg & TSAI, 1991) it has a particular theoretical coherence and compatibility with ACT (Kohlenberg, Hayes, & TSAI, 1993). FAP uses behavioural principles to account for the central role that intimacy plays in the therapist-client relationship in producing change. The major goal of the workshop, then, will be to give you theory and tools develop intense and intimate therapeutic relationships with outpatient psychotherapy clients.

In addition to learning the key concepts, audio and video segments from therapy sessions and experiential exercises will be used to illustrate the principles and to raise fundamental questions about the nature of the change process. You also will be challenged to develop the therapist skills of being, open, vulnerable, honest, and present since these enter into the effective use of FAP.

We will cover examples and illustrations of using FAP to enhance CBT and ACT protocols. The techniques you will learn are applicable to almost any disorder including depression, anxiety, OCD, intimacy issues, and problems of the self.

EO: 1) how to make your clients' learning experiences more powerful by recognizing the subtle ways their daily life problems are brought into the therapeutic relationship; 2) how to use forms and questionnaires to facilitate a focus on the therapist-relationship; 3) how to make your clients' hidden thinking more visible; 4) how to use experiential exercises to help your clients contact deeper feelings and improve interpersonal skills; 5) how to use the one most important rule that guides FAP therapists; 6) how commonly used interventions can either be therapeutic or inadvertently counter-therapeutic and; 7) a brief explanation of the theory that underlies all of the above

TA: Beginner/Intermediate

ACT for Substance Abuse

Workshop - ACT/ Addiction/ACT for Behavioral Disorders

Room: 744

KELLY G. WILSON, University of Mississippi

This workshop will train clinicians to identify the interaction of experiential avoidance on the one hand, and valued living on the other. The workshop will focus on some of the particulars of applying the ACT model to substance abuse. Participants will be introduced experientially to what is being asked of a serious substance dependent client when they let go of substance involvement. Out of that awareness, workshop attendees will learn to question substance

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abuse clients in a way that can facilitate valued, vital life choices.

EO: 1) Identify role of experiential avoidance in substance abuse; 2) Discriminate among functional classes of avoidant behaviors and functional classes of internal and external avoided events; 3) Apply ACT to enhance valued-living in the context of substance abuse

TA: clinicians, researchers, all levels

Monday Afternoon - 15:15-16:45

ACT is Behaviour Therapy: The Place of Psycho Education, Homework, Exposure, and Directive Interventions in ACT

Panel- ACT/ General

Room: Jeffrey Hall

Chair: KIRK STROSAHL, Mountainview Consulting Group, Zillah, WA

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm

LARS-GORAN OST, Stockholm University

KIRK STROSAHL, Mountainview Consulting, Washington

PATTI ROBINSON, Mountainview Consulting Group, Zillah, WA

RAIMO LAPPALAINEN, University of Tampere, Finland

This panel will explore the integration of "novel" ACT clinical methods with more "traditional" behavior therapy methods. The intent of this discussion is to show how an ACT clinical framework can be flexibly applied to address first order change targets. At the same time, the discussion will demonstrate how the contextual approach is used to reframe the function of traditional behavioral methods.

The Implicit Relational Assessment Procedure: Background and Rationale

Invited Address - RFT/ Assessment

Room: 642

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

Relational Frame Theory (RFT) is a modern behavioural approach to human language and cognition, the central postulate of which is that higher-cognitive functioning is composed of relational acts. A recent development in this research area is an RFT-based procedure for measuring implicit relations, termed the Implicit Relational Assessment Procedure (IRAP). Initial studies have shown that the IRAP may be used to measure relational networks or attitudes that individuals are either unaware of or may wish to conceal. The IRAP appears to offer advantages over other methods that use reaction time measures to assess attitudes (e.g. the Implicit Association Test), both in its theoretical rationale and its ability to measure many types of relationships. The current paper presents the conceptual and empirical background to the development of the IRAP.

EO: 1) Learn about the concept of implicit versus explicit attitudes and beliefs; 2) Learn about the implicit relational assessment procedure and how it is being used to study implicit cognition; 3) Examine the theoretical and practical implications of the evidence

gathered thus far and also consider what future research needs to address most urgently

TA: Intermediate to Advanced. Researchers and Clinicians

A Functional Contextualistic Framework for Prevention, Public Health, and Cultural Practices

Invited Address - ACT/ Cultural

Room: 728

ANTHONY BIGLAN, Oregon Research Institute

This presentation will discuss the implications of a functional contextualist perspective for bringing about population wide changes in cultural practices that affect human wellbeing. Prevention science is a branch of public health that focuses on reducing the incidence and prevalence of problems in defined populations. Significant progress has been made in our ability to prevent a wide range of behavioral and psychological problems. It would be naïve, however, to think that human wellbeing can be substantially improved solely through a science focused on the behavior of individuals. Even where a problem involves a high prevalence of people engaging in a particular behavior—such as experiential avoidance—it is unlikely that changes in a significant number of people can be achieved without an effective science of the factors that influence the actions of groups and organizations. A functional contextualist science of the influences on cultural practices is needed. There are existing cogent analyses of the factors that have influenced the evolution of cultural practices, but none has explicated how we could build on current knowledge to develop systematic strategies for *influencing* the further evolution of cultural practices. Core principles involved in the evolution of cultural practices will be presented and their implications for developing strategies for changing the most harmful cultural practices will be discussed. The practices to be discussed include those affecting economic wellbeing, health, crime, security, and child wellbeing. I will examine practices involved in religion, politics and government and propose testable strategies for changing the practices in these areas that endanger our wellbeing.

EO: Participants will: 1) understand the public health perspective and its application to work on acceptance; 2) understand the influence of economic conditions on family wellbeing and child and adolescent development; 3) learn strategies for influencing diverse cultural practices

TA: Clinicians/ General

Promoting ACT and RFT in the Media

Panel - ACT/ Organizational

Room: 822

Chair: STEVEN C. HAYES, University of Nevada, Reno

SONJA V. BATTEN, VA Maryland Health Care System &

University of Maryland School of Medicine

FRANK W. BOND, Goldsmiths College, University of London

The purpose of this session is to consider how to describe ACT / RFT in the popular media, and how to use the media to promote positive practices from within an ACT / RFT model.

EO: 1) Learn ways of describing ACT/RFT in the popular media; 2) Learn common errors in dealing with the media; 3) Learn ways of using the media to promote positive practices from within an ACT / RFT model

TA: Beginner and above

ACT in the World

Invited Address - ACT/ General

Room: 736

JOANNE DAHL, Uppsala University, Sweden

What in the world in ACT doing? The aim of this address is to illustrate some of the pressing health and welfare issues in the world and see examples of what researchers using ACT can and are doing. One of the great tragedies of our time is that we have the capacities, resources and know how to solve most of the devastating health problems for human beings on this earth but we, instead use our resources to solve the unsolvable which, in turn, creates more suffering. Not only are multitudes of people dying unnecessary deaths everyday in the developing countries but we in the western world have created our own unnecessary suffering by putting our resources in solving the unsolvable. Pain, stress related disorders, symptoms created by our overindulgent life styles, impotence, depression, anxiety disorders are complex issues that are probably maintained and in some cases known to be caused by the quick fix solutions offered to us by our health care systems. How the ACT model can be used to empower people in the developing countries to accept what cannot be changed and change what can be changed and take steps to create a vital life for themselves is the message of this address.

EO: Participants will learn: 1) how ACT is being applied to empower clients in developing countries to take charge of their lives and improve quality of life; 2) how ACT can be used to contribute to current world health issues; 3) how ACT can be used as a radical alternative to the current medical model of human suffering

TA: All Beginner, Intermediate, Advanced, clinicians, researchers

Principle versus Technique, Model versus Protocol: How Best to Think About ACT?

Panel - ACT/ Clinical

Room: 834

Chair: JASON LUOMA, University of Nevada, Reno
J. T. BLACKLEDGE, University of Wollongong, Australia
RUTH BAER, University of Kentucky
JENNIFER GREGG, San José State University

This panel will address fundamental issues in the continuing development of and dissemination of ACT. Discussion will include questions such as:

-Is ACT best thought of as a technology or as an organized set of processes; is ACT a model or a method?

-When we expand ACT, how do we do it? How do we determine when the model has fundamentally changed, for example, if we add new techniques that fit with the model, is that new? If we add, remove, or

modify processes in the model, how do we decide when to do that?

-Who decides these changes and how? Does the data decide?

The audience will also be invited to participate in the discussion of these questions.

Trauma Research Discussion Group

Discussion Group

Room: 777

Chair: VICTORIA M. FOLLETTE, University of Nevada, Reno

Researchers and clinicians who would like to discuss issues related to doing ACT/RFT research with trauma survivors are welcome to this informal discussion group. The participants will discuss ongoing research as well as methodological issues.

TA: People at all phases of development in this process are invited to be involved in this group.

Monday Afternoon Plenary - 17:00-18:00

Relational Frame Theory - The Current State of the Evidence

Invited Address - RFT/ Theory

Room: Jeffrey Hall

IAN STEWART, NUI Galway

Dermot Barnes-Holmes, NUI Maynooth

Relational Frame Theory is a functional analytic approach to language and cognition that conceptualizes generalized abstract relational responding (relational framing [RF]) as the core of human language and cognition. There is now a wealth of evidence in favour of this approach garnered through a vibrant and expanding program of research into diverse areas of complex human behaviour. This presentation will provide an overview of this research program including the development and training of RF; links between RF and language; novel RF-based methodologies for the examination of complex human behavior; and RF-based models of diverse aspects of cognition including, for example, metaphor, rule governed behaviour, problem solving, motivation and perspective taking.

EO: 1) Learn basic principles of relational conditioning; 2) Discriminate relational operants from other operants; 3) Learn about the latest research being conducted on Relational Frame Theory

TA: Beginner, Intermediate, Advanced, clinicians, researchers, etc.

Acceptance & Commitment Therapy: The Current State of the Evidence

Invited Address - ACT/ Theory

Room: Jeffrey Hall

BARBARA KOHLENBERG, University of Nevada School of Medicine

The current state of the evidence pertinent to Acceptance and Commitment Therapy will be considered. Scientific, cultural, and personal contexts related to the emergence of ACT will also be reviewed. A historical perspective on the emergence of this treatment will also be offered.

- Monday, 24 July, 2006 -

EO: 1) Become familiar with the kinds of research conducted to test and understand ACT; 2) Develop an appreciation for how this treatment emerged; 3) Develop a perspective on reasons for its staying power

TA: Beginner, Intermediate, Advanced, clinicians, researchers, etc.

Session Descriptions - Tuesday, 25 July

Tuesday Morning - 9:00-10:30

What Does This Mean? The Whether, What and Why of Changes in the Behavioural and Cognitive Therapies

Panel - Contextual Therapies

Room: Jeffrey Hall

Chair: STEVEN C. HAYES, University of Nevada, Reno
MARK WILLIAMS, Oxford University
WINDY DRYDEN, Goldsmiths College, University of London
ADRIAN WELLS, University of Manchester
LARS-GORAN OST, Stockholm University

The purpose of this session is to consider examine what is occurring in the behavioral and cognitive therapies and to consider whether what we are seeing is new, and if so how.

We will deal with what have not changed; and we will discuss ways of keeping developments positive and productive rather than purely political

EO: 1) Learn what the key differences are between traditional behavior therapy, traditional CBT, and the new methods of CBT; 2) Learn what is common about each; 3) Learn ways to test key differences

TA: Beginner and above

Comparing Acceptance- and Distraction-based Interventions Using Analogues for Pain and Anxiety

Symposium - ACT/ Experimental/ Psychopathology/ Analog studies

Room: 642

Chair: ANDY COCHRANE, M.Ed., NUI Maynooth
Discussion Leader: ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California
Comparing Acceptance- and Control- Based Coping Strategies on Tolerance for Experimentally Induced Radiant Heat Pain

ANNE KEHOE, NUI Maynooth
Dermot Barnes-Holmes, NUI Maynooth
Yvonne Barnes-Holmes, NUI Maynooth
Ian Stewart, NUI Galway

Developing a Behavioural Approach Test: Comparing Acceptance- versus Control-Based Strategies for Coping with Fear of Spiders

ANDY COCHRANE, M.Ed., NUI Maynooth
Dermot Barnes-Holmes, NUI Maynooth
Yvonne Barnes-Holmes, NUI Maynooth
Ian Stewart, NUI Galway

"Were there really spiders in there"? Acceptance- and Control-Based Strategies for Coping with Fear of Spiders

ANDY COCHRANE, M.Ed., NUI Maynooth
Dermot Barnes-Holmes, NUI Maynooth
Yvonne Barnes-Holmes, NUI Maynooth
Ian Stewart, NUI Galway

This symposium is concerned with the development and refinement of experimental procedures to examine the relative efficacy of acceptance-versus control-based interventions on behavioural and subjective responses to (i) a painful stressor and (ii) anxiety provoking stimuli (fear of spiders). Automated procedures were developed for the presentation of

both the pain- and spider-related tasks. Participants controlled the presentation of the acceptance- and control-based protocols via digitised video clips. The acceptance-based protocol attempted to disconnect any pain or spider related thoughts from literal action. The distraction-based protocol focused on replacing pain or spider-related thoughts with images of a pleasant scene. The findings of both the pain and spider studies were consistent with previous work in that the acceptance intervention increased tolerance for the aversive tasks. The issues related to the development of these new experimental procedures and other methodological concerns will be discussed.

EO: 1) learn about developing analogue research protocols; 2) consider issues related to experimental control; 3) learn about use of new technologies for analogue research

TA: Researchers, beginners/intermediate

The Bridge between Functional Analysis of Behaviour and Relational Learning: The Basic-applied Dimension and What We Gain in Understanding and Controlling behaviour?

Invited Address - RFT/ Basis of Applied Work

Room: 728

M. CARMEN LUCIANO-SORIANO, University of Almería
The advantages of the relational learning approach for both the understanding of human behavior and the improvement of the Applied Behavior Analysis tools will be presented. The author will bridge the gap between the research where contingencies are directly managed and the more recent applications where the verbal control is the core strategy.

EO: 1) learn more about the basic foundations of the research on relational learning; 2) show the advantages of considering the research on verbal responding; 3) discuss the new and more subtle ways of behavioral control.

TA: beginners and intermediate. Researchers

ACT and Severe Psychopathology

Symposium - ACT/ Clinical/ Psychosis

Room: 822

Chair: PATRICIA BACH, Illinois Institute of Technology
Discussion Leader: GINA LIPKENS, Sancta Maria Psychiatric Hospital, Sint-Truiden, Belgium

Acceptance and Psychosis

PATRICIA BACH, Illinois Institute of Technology
Frances Shawyer, Mental Health Research Institute of Victoria

ACT Early: Using Acceptance and Commitment Therapy to Assist Recovery from a First Episode of Psychosis

ERIC MORRIS, South London & Maudsley NHS Trust, UK

Mindfulness Based Cognitive Approaches for Acute Psychiatric Inpatients with Psychotic Symptoms: A Work in Progress

GORDON MITCHELL, Fife Primary Care NHS Trust
Susan Ross
Robbie Bennett
Nancy Galloway

Trixy Heather

ACT with Individuals with Psychosis and Developmental Disabilities

JULIEANN PANKEY, University of Nevada, Reno

ACT is increasingly being applied to the treatment of persons with serious mental illness, including psychotic disorders and multi-problem clients. In this symposium recent applied research on ACT in the treatment of psychosis will be reviewed. Presenters will discuss research findings; describe their to modifications to ACT for successful application with clients with serious mental illness; discuss limitations and challenges in using ACT with clients with serious mental illness; suggest future directions for ACT in the treatment of serious mental illness.

EO: 1) Become familiar with recent applied research on ACT in the treatment of serious mental illness; 2) Learn which ACT strategies have been found to be most useful with clients with serious mental illness; 3) Identify challenges in working with clients with serious mental illness and troubleshooting problems; 4) Identify further directions for applied and basic research on ACT with serious mental illness

TA: Intermediate/advanced; clinicians

The Implicit Relational Assessment Procedure (IRAP) I

Symposium - RFT/ Empirical/ IRAP/ Assessment
Room: 736

Chair: IAN STEWART, NUI Galway

The Implicit Relational Assessment Procedure (IRAP)

I: Is the IRAP Sensitive to Explicit Preferences for Popular and Unpopular

Claire Owens, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

The Implicit Relational Assessment Procedure (IRAP)

II: Do We Really Hate Americans?

Patricia Power, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

The Implicit Relational Assessment Procedure (IRAP)

III: Can You Fake the IRAP?

Ian McKenna, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

Relational Frame Theory (RFT) is a modern behavioural approach to human language and cognition, the central postulate of which is that higher-cognitive functioning is composed of relational acts. A recent development in this research area is an RFT-based procedure for measuring implicit relations, termed the Implicit Relational Assessment Procedure (IRAP). Initial studies have shown that the IRAP may be used to measure relational networks or attitudes that individuals are either unaware of or may wish to conceal. The IRAP appears to offer advantages over other methods that use reaction time measures to assess attitudes (e.g. the Implicit Association Test),

both in its theoretical rationale and its ability to measure many types of relationships. This symposium commences with the conceptual and empirical background to the development of the IRAP and then three further papers which report recent IRAP-based research including the employment of the IRAP as a tool to investigate national stereotyping, the analysis of the relational properties of the IRAP, and the 'fakeability' of IRAP performance.

EO: 1) Learn about implicit measures of cognition and their relevance to RFT research; 2) Learn how the IRAP is different from other implicit measures; 3) Examine and evaluate recent data relevant to the psychometric properties of the IRAP.

TA: Intermediate, Advanced, Researchers

Tuesday Morning Session - 9:00-12:15

Comparing and Contrasting ACT with Other Therapies

Symposium (3 hour paper session) - ACT/ Clinical Room: 834

Chair: BARBARA KOHLENBERG, University of Nevada School of Medicine

The Strategy of the Symptom is the Strategy Used in Therapy: ACT as Compared to Strategic Brief Therapy (SBT) for Anxiety

GERNOT HAUKE, Bavarian Academy for Psychotherapy BAP
Serge Sulz, Bavarian Academy for Psychotherapy BAP

ACT and Interpersonal / Dynamic Therapy

BARBARA KOHLENBERG, University of Nevada School of Medicine

ACT and Motivational Interviewing

MATTHEW F. SMOUT, Drug and Alcohol Services South Australia

ACT and Pharmacotherapy

RAINER SONNTAG, Psychiatrist, Olpe, Germany

ACT and Psychodrama

BERNARD PARKER, Calvary Hospital, Canberra, Australia

ACT and Eye Movement Desensitization and Reprocessing (EMDR)

GRAHAM TAYLOR, Independent Practice, Perth, Australia

ACT and Gottman Method

DAVID BRICKER, Private Practice, New York

This session will provide an overview of many different therapies, including Motivational Interviewing, EMDR, Couples Therapy (The Gottman Method), Interpersonal Psychotherapy, Psychodrama, Pharmacotherapy, and Strategic Therapy. These therapies will be considered in light of their compatibility and incompatibility with ACT. Both conceptual and technical aspects of these therapies will be discussed in light of ACT sensibilities.

EO: 1) Learn about the concepts and technical aspects of seven different therapies; 2) Learn how these treatments converge and diverge with ACT therapy; 3) Explore how clinicians work toward bringing together diverse approaches to behavior change.

TA: Open to all

Tuesday Morning Workshops - 9:00-12:15

Behaviour Analysis for Clinicians: From Basic Principles to RFT

Workshop - RFT/ Basis of Applied Work

Room: 731

KELLY G. WILSON, University of Mississippi

KAREN KATE KELLUM, University of Mississippi

The primary purpose of this workshop is to train clinicians in the relationship between basic behavioral principles and ACT intervention strategies. We will train clinicians to identify contextual variables organizing the client's behavior from the client's point of view. We will learn to apply that same analysis to the behavior of the working clinician. Special attention will be paid to the role of strong antecedent control, relational responding, and their effects on client and therapist behavior. Participants will learn to apply these sensibilities to clinical settings and beyond.

EO: 1) Discriminate between the stimulating of the environment and the responding of the organism; 2) Distinguish between behavior under strong antecedent stimulus control and behavior sensitive to broader contextual variables (including, but not limited to consequences); 3) Apply behavioural principles in clinical settings

TA: Clinicians, researchers, all levels

ACT with Resistant, Reluctant, or Oblivious Patients

Workshop - ACT/ General

Room: 826

JENNIFER GREGG, San José State University, California

Many patients who would benefit from psychological treatment are not aware of the potential gains of such treatment, and may be put off by perceived stigma related to mental health. Contexts such as physical health, schools, and occupational settings may provide opportunities for encountering such individuals, and services at this level may serve as secondary or tertiary prevention. One challenge faced in this area is motivating potential patients or clients to engage at this early level. Acceptance and Commitment Therapy, with its focus on ideographic values, may provide a helpful tool in intervening at this level, and may assist in targeting individual movement toward enhanced functioning. This workshop will explore the use of ACT interventions to enhance motivation for treatment, and discuss ACT-based strategies for use with resistant, reluctant, or oblivious patients.

EO: 1) Gain awareness of factors influencing resistance to treatment; 2) Develop capacity to discriminate personal reactions to resistant or reluctant patients; 3) Learn about a values-based approach to initiating treatment with resistant, reluctant, and oblivious patients.

TA: Clinicians of all levels

ACT in Medical Settings

Workshop - ACT/ Behaviour Medicine

Room: 739

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm

GUNNAR OLSSON, Astrid Lindgren Children's Hospital, Karolinska Hospital, Stockholm

PATTI ROBINSON, Mountainview Consulting Group, Zillah, WA

KIRK STROSAHL, Mountainview Consulting Group, Zillah, WA

ACT and RFT are stimulating numerous ideas for making changes to the delivery of health care services in multiple medical settings. The miracle medicine approach of recent decades offers little to many problems in health care that are increasing at alarming rates, including chronic diseases and other health problems related to lifestyle behaviors. Biomedical approaches often leave clinical providers and patients struggling, rather than dancing, in the medical care setting. These circumstances result in patient dissatisfaction and difficulties filling medical positions. This workshop will address these issues with presentations concerning use of ACT in a variety of settings, such as a pediatric pain clinic in Sweden and a community health care centers family medicine residency programs in the United States.

Activities: 1) Power Point presentations; 2) Experiential Exercises; 3) Role Play.

EO: 1) Learn about a model for integrating delivery of ACT services into primary care settings; 2) Consider approaches to interacting with medical providers about ACT strategies; 3) Learn how to apply ACT as a member of a multi-disciplinary team; 4) Learn about ACT-based interventions with a variety of medical patients; 5) Consider ways to measure the impact of ACT on large groups of medical patients

TA: General and healthcare workers

Smarties or Beans: Translating ACT/Behaviourism into the Real World

Workshop - ACT/ General

Room: 744

AMY R. MURRELL, University of North Texas

LESLIE J. ROGERS, University of Mississippi

Given the inevitable divide between theory and practice, it is often a challenge to translate behavioural principles into clinical and other applied settings. This difficulty is evident in situations that utilize basic modification techniques. The challenge may be even greater when a complex treatment model, such as Acceptance and Commitment Therapy, is used. Clinicians and consultants frequently enter service settings with elaborate plans of action. These plans, however, may not be practical. In addition, they may be inadequately sensitive to the needs of the individual or organization. As a result, responsiveness to the plans is low and effectiveness is decreased. An accurate and broadly construed functional analysis is crucial to improving the likelihood of receptivity and behavioural engagement. Awareness of proximal and distal contextual factors will be the primary target of this training. In addition, this workshop will focus on

other topics (such as communication with non-mental health professionals) relevant to the utilization of ACT in applied settings.

EO: 1) Learn how to foster communication with non-mental health professionals; 2) Identify broad and distal contextual factors that increase effectiveness of analysis and treatment; 3) Implement ACT in impoverished environments

TA: Intermediate (some familiarity with ACT); Practitioners, especially those working in schools and other community settings

Warriors of Compassion: An Experiential Integration of ACT and FAP in Effecting Personal and Client Change

Workshop - ACT/ General

Room: 777

MAVIS TSAI, Independent Practice and Clinical Instructor, University of Washington

JOANNE DAHL, Uppsala University, Sweden

While most of us prefer practices and interactions that do not cause discomfort, in order for us to help others, we must first heal ourselves. In this workshop we will address how the principles of ACT (Acceptance and Commitment Therapy) and FAP (Functional Analytic Psychotherapy) relate to 1) the importance of compassion for ourselves and others, and 2) potent methods we can use to bring forth our own and our clients' best selves and act in true valued directions. We will be challenging you to be more open, vulnerable, aware and present as we focus on all aspects of your experience, including mind, body, feelings, and spirit.

EO: 1) you will learn a conceptual understanding of the basic principles of ACT and FAP so that you can more effectively facilitate growth and change—your own, as well as your clients'; 2) you will experience powerful techniques and exercises that can help you (and your clients) to stay open and to move forward compassionately in your lives by: a) getting in touch with your values, longings, purpose and vision; b) going to places that scare you within yourself with acceptance and validation; c) embracing the discomfort of not knowing, of unpredictability, of impermanence; d) focusing on how to overcome obstacles to change

TA: Beginner, Intermediate and Advanced Clinicians

Tuesday Morning - 10:45-12:15

Mindfulness and the Prevention of Depression

Invited Address - Contextual Therapies

Room: Jeffrey Hall

MARK WILLIAMS, Oxford University

There is a high risk of relapse and recurrence in patients suffering episodes of major depression. There is accumulating evidence to suggest that this risk of recurrence is highest for those people who react to small shifts in negative mood with re-triggering of old habits of negative thinking formed during previous episodes. Preliminary evidence from two randomised controlled trials of Mindfulness-based cognitive

therapy (MBCT) suggests that it is effective in reducing risk of relapse in patients with three or more previous episodes of major depression.

EO: 1) By the end of the talk, listeners will know the recent evidence on the nature of cognitive risk for relapse; 2) why a mindfulness-based approach may be an appropriate way to address such risk the preliminary evidence on efficacy

TA: Beginner and above

Innovating and Evaluating your ACT Training

Panel - ACT/ Training

Room: 642

Chair: JASON LUOMA, University of Nevada, Reno

PATRICIA BACH, Illinois Institute of Technology

ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

M. CARMEN LUCIANO-SORIANO, University of Almería, Spain

KELLY KOERNER, Private Practice, Seattle

A panel discussion on how the panelists and others are innovating and evaluating their ACT training. Audience participation is encouraged in a discussion about how to improve and evaluate one's training skill. The focus of discussion will include how trainers are evaluating their own training and impact. Questions for discussion include, how are you innovating your training? What innovations have worked and what hasn't worked? How do you evaluate your training? What is it that our trainees need to know? How do we know they're 'getting it'? Given that there is no certification, how can trainees evaluate their own ACT competency? What impact is the growing awareness of ACT having on training? How do you adapt training to meet the needs of non-beginner trainees? How can we work together (beyond annual meetings like this!) to have a community of the highest quality trainers and training effectiveness?

Metacognitive Therapy: What is It and Does It Work?

Invited Address - MCT/ Therapy

Room: 728

ADRIAN WELLS, University of Manchester

Metacognitive Therapy (MCT) aims to modify the factors that appraise and control thinking. It is based on an information processing model (Wells & Matthews, 1994) of how the mind becomes locked into unhelpful patterns of perseverative negative thinking and unhelpful coping behaviours that impede change. MCT focuses on changing cognitive processes rather than the content of thoughts that is the focus of traditional CBT. To this end a range of techniques such as Attention Training and formulation-based treatment packages have been developed. The basic principles of MCT and evidence of its effectiveness in a range of disorders (e.g. GAD, PTSD, OCD, Depression) will be presented.

EO: 1) Learn about the nature and techniques of MCT; 2) Learn about the effectiveness of MCT across several disorders; 3) Discover about available treatment manuals

TA: Clinicians and researchers at all levels

Acceptance from a Rational Emotive Behaviour Therapy perspective

Invited Address - Contextual Therapies

Room: 822

WINDY DRYDEN, Goldsmiths College, University of London

The Implicit Relational Assessment Procedure (IRAP) II

Symposium - RFT/ Empirical/ IRAP/ attitudes/ assessment

Room: 736

Chair: IAN STEWART, NUI Galway

The Implicit Relational Assessment Procedure (IRAP) IV: How Reliable is the IRAP?

Michelle Kelly, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

YVONNE BARNES-HOLMES, NUI Maynooth

Ian Stewart, NUI Galway

Claire Cullen, NUI Maynooth

The Implicit Relational Assessment Procedure (IRAP) V: How Malleable is an IRAP Performance?

Claire Cullen, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

The Implicit Relational Assessment Procedure (IRAP) VI: How Reliable is the IRAP with Socially Sensitive Stimuli?

IAN STEWART, NUI Galway

Niamh O'Dowd, NUI Galway

Dermot Barnes-Holmes, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Relational Frame Theory (RFT) is a modern behavioural approach to human language and cognition, the central postulate of which is that higher-cognitive functioning is composed of relational acts. A recent development in this research area is an RFT-based procedure for measuring implicit relations, termed the Implicit Relational Assessment Procedure (IRAP). Initial studies have shown that the IRAP may be used to measure relational networks or attitudes that individuals are either unaware of or may wish to conceal. The IRAP appears to offer advantages over other methods that use reaction time measures to assess attitudes (e.g. the Implicit Association Test), both in its theoretical rationale and its ability to measure many types of relationships. This symposium is the second of a pair whose theme is IRAP-based research. The first and fourth papers present work concerned with the reliability of the IRAP, the second presents IRAP-based research on attitudes to self and others in prisoner and non-prisoner populations and the third examined the malleability of the IRAP.

EO: 1) Learn about the IRAP methodology; 2) Learn about some of the latest IRAP-based research; 3) Examine and evaluate recent data relevant to the psychometric properties of the IRAP.

TA: Intermediate, Advanced, Researchers

Tuesday Afternoon - 13:30-15:00

Using Mindfulness in Therapy

Panel - Contextual Therapies

Room: Jeffrey Hall

Chair: KELLY G. WILSON, University of Mississippi

MARK WILLIAMS, Oxford University

RUTH BAER, University of Kentucky

KELLY G. WILSON, University of Mississippi

KELLY KOERNER, Private Practice, Seattle

JUDITH SOULSBY, Centre for Mindfulness Practice and Research, Bangor Wales

This panel will examine and discuss the use of mindfulness as a practice and in clinical practice. Discussion will include: (1) empirical studies, (2) mindfulness components (3) the relationship of mindfulness to mental health, (4) assessment procedures, and (5) methods of incorporating mindfulness in clinical practice. Panel members include experts in Mindfulness Based Cognitive Therapy, Dialectical Behavior Therapy, and Acceptance and Commitment Therapy. It will be cool.

TA: clinicians, researchers, all levels

Clinical Issues in ACT

Symposium - ACT/ Clinical/ Assessment/ Theoretical/ Special needs clients

Room: 642

Chair: EMILY K. SANDOZ, University of Mississippi

Discussion Leader: JONATHAN WEINSTEIN, University of Mississippi

Ideas for an Investigator-based Assessment of ACT Processes in Clinical Practice

RAINER SONNTAG, Psychiatrist, Olpe, Germany

When it Hurts to Help: Inflexibility in Intervention when Practical or Ethical Obstacles Exist I

Emily Sandoz, University of Mississippi

TONY BALAZS, Behavioural Learning Consultant, London, UK

When it Hurts to Help: Inflexibility in Intervention when Practical or Ethical Obstacles Exist II

EMILY K. SANDOZ, University of Mississippi

Tony Balazs, Behavioural Learning Consultant, London, UK

The principles on which ACT is based have been argued to apply to normal human functioning across a variety of contexts. For example, many issues emerge for the clinician in the context of clinical work that can be effectively addressed using the ACT model. This session will explore several practical applications to common clinical issues.

EO: 1) Explore advantages of and possibilities for a simple measure of ACT principles; 2) Provide understanding of how ACT can help therapists to work beyond common ethical and practical challenges in treatment of Deaf individuals; 3) Provide understanding of how ACT can help therapists & educators to work beyond common ethical and practical challenges in education of children with Autism

TA: Clinicians, Beginner through Advanced

Bridging the Gap Between RFT and Clinical Work: The Role of Deictic Frames and Perspective-taking

Panel - ACT/ RFT/ Basis of Applied Work
One Session

Room: 728

Discussion Leader: RHONDA MERWIN, Duke University
Medical Center

ROGER M. VILARDAGA, University of Nevada, Reno,
JENNIFER C. PLUMB, B.S., University of Nevada, Reno
PATRICIA BACH, Illinois Institute of Technology
YVONNE BARNES-HOLMES, NUI Maynooth

Our overall goal is to explore the possibilities of an RFT analysis of clinical situations, and elaborating on the link between RFT and clinical work. We would like to examine deictic frames as a form of derived relational responding and to what degree perspective-taking in particular can be applied to existing interventions. For example, this RFT framework could be useful in increasing empathy in both clients and clinicians, resulting in improved effectiveness of interpersonal relationships. The panel will be organized in the following way: 1) we will brainstorm and share ideas and successful uses of any perspective-taking exercises with clients or among therapists, 2) we will practice them through experiential exercises and role-plays, and 3) we will discuss the clinical "problems" that may benefit from these techniques the most.

Using ACT in the Schools

Symposium - ACT/ Empirical/ Education

Room: 822

Discussion Leader: MARTHA PELAEZ, Florida International
University

ACT for the Prevention of Stress and Anxiety in High School –A Randomized Trial and Two Year Follow Up
FREDRIK LIVHEIM, Uppsala University, Sweden

ACT and Stress in school: A Two Year Follow Up on the Intervention

Carola Jakobsson, Uppsala University, Sweden
JENNIFER WELLIN, Uppsala University, Sweden

ACT and Yoga for Stress

JASON LILLIS, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno
Alison Pratte, University of Nevada, Reno
Claudia Drossel, University of Nevada, Reno

ACT for Teachers

ANTHONY BIGLAN, Oregon Research Institute
GEORGIA LAYTON, Early Education Program, Inc., Oregon
Richard Farmer, Oregon Research Institute

This symposium will present data from studies examining the use of ACT with high school-aged students and teachers. Together these papers demonstrate the broad applicability of ACT to large-scale organizations (e.g., students and teachers), and flexibility for integration with other therapeutic modalities (i.e., yoga). These studies indicate promising results across a number of important clinical and occupational outcomes such as anxiety, depression, acute stress, burnout, and general health. Presenters will discuss the challenges of implementing

ACT in school settings and the particular obstacles overcome delivering ACT to students and teachers.

EO: 1) Discuss methods for implementing ACT in school settings; 2) Modify ACT to meet the specific needs and concerns of students and teachers; 3) Suggest improvements over current service delivery of ACT and seek suggestions for further extensions of ACT in school settings

TA: Clinical and Research

Acceptance Analysis through Several Experimental Protocols: The Valued Meaning of Pain

Symposium - ACT/ Experimental/ Behaviour Medicine/
Values/ Pain

One Session

Room: 736

Chair: M. CARMEN LUCIANO-SORIANO, University of Almería
Discussion Leader: DERMOT BARNES-HOLMES, NUI
Maynooth

The Rebound Effect of the Suppressed Pain Experience
MARISA PÁEZ-BLARRINA, Spanish Cancer Association
M. Carmen Luciano-Soriano, University of Almería
Olga Gutiérrez-Martínez, University of Granada, Spain

*An Experimental Analysis of Acceptance of Pain:
Finding Out What Gives Pain Meaning*

Marisa Páez-Blarrina, Spanish Cancer Association
OLGA GUTIÉRREZ-MARTÍNEZ, University of Granada, Spain
M. Carmen Luciano-Soriano, University of Almería

*Coordination and Opposition Relations Between
Aversive Functions and Valued Actions*

M. CARMEN LUCIANO-SORIANO, University of Almería
Dermot Barnes-Holmes, NUI Maynooth
Francisco Molina, University of Almería
Yvonne Barnes-Holmes, NUI Maynooth
Miguel Rodríguez-Valverde, University of Almería
Olga Gutiérrez-Martínez, University of Granada, Spain
Sonsoles Valdivia-Salas, University of Almería

*A Brief ACT Protocol Applied to Altering Problematic
Rule-following*

Javier Hilinger-Sánchez, University of Almería
M. Carmen Luciano-Soriano, University of Almería
FRANCISCO J. RUIZ-JIMÉNEZ, University of Almería

This symposium has several presentations, each of them focused in altering the function of pain by contextual changes where personal values are the heart of the scene. Acceptance of pain or discomfort can not occurred without a valued meaning and consequently controversies have to take into account the meaning of experimental protocols as much as the functional analysis of chronic pain with limited life has to take into account. This symposium presents several experiments in the sequence in which they were generated and with different aversive stimulation as analogue of discomfort. First, rebound effect of suppressed pain experience is analyzed through two strategies: suppression and sensory monitoring. The second presentation described several experiments concerning acceptance-cognitive/control protocols. The third presentation involved several conditions where the discomfort of pain is evaluated according to rigid control rule-following or acceptance following. The last presentation involved the implementation of

an ACT experimental protocols and impact was also evaluated in problematic rule-following.

EO: 1) identify some of the components underlying ACT in the lab context; 2) analyze the role of some clinical methods used in ACT; 3) learn more about the basic research conducted for the improvement and refinement of ACT

TA: Intermediate research and clinicians

RFT & Education I

Symposium - RFT/ Empirical/ School setting

Room: 834

Chair: ERIC FOX, Western Michigan University

Using RFT to Train Generative Verbal Behaviour in Early Intensive Behavioural Intervention

IAN STEWART, NUI Galway

Derived Relational Responding after Matching-to-sample Procedures in Classroom Settings

STEFAN BILLINGER, Örebro University, Sweden

Björn Lyxell, Linköping University, Sweden

Ata Ghaderi, Uppsala University, Sweden

Derived Relational Responding and Cross-modal Transfer in a Classroom Setting

STEFAN BILLINGER, Örebro University, Sweden

Björn Lyxell, Linköping University, Sweden

Ata Ghaderi, Uppsala University, Sweden

Derived Relational Responding and Impulsivity after Matching-to-sample Procedures in a Teaching Situation

STEFAN BILLINGER, Örebro University, Sweden

Björn Lyxell, Linköping University, Sweden

Ata Ghaderi, Uppsala University, Sweden

This symposium will explore some implications and applications of Relational Frame Theory for educational settings. Techniques for using RFT to build generative verbal repertoires in early intensive behavioral intervention will be described, and data from studies examining derived relational responding in connection to matching-to-sample procedures and cross-modal transfer will be reported.

Research on derived relational responding and impulsivity in a teaching situation will also be presented.

EO: 1) Learn the basic principles and concepts of Relational Frame Theory; 2) Consider approaches for enhancing derived relational responding in educational settings; 3) Learn recent findings on teaching derived relational responding in educational settings

TA: Beginner, educators, clinicians

Tuesday Afternoon Workshops - 13:30-16:45

ACT: Treating the Fallout of Trauma

Workshop - ACT/ Applications for Behavioural Disorders

Room: 731

ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

VICTORIA M. FOLLETTE, University of Nevada, Reno

JACQUELINE PISTORELLO, University of Nevada, Reno

Acceptance and Commitment Therapy (ACT) is a behavioral intervention emphasizing acceptance of

internal experience while also maintaining a focus on positive behavior change. This approach was designed to address maladaptive avoidance and thus lends itself well to the functional analysis of trauma-related problems and the sequelae of trauma. Many individuals who have been diagnosed with PTSD, for instance, are struggling to control internal experience such as traumatic memories, painful feelings and unwanted thoughts. These control efforts have a powerful and often negative impact. Acceptance of internal experience can create a new context from which the trauma survivor may view the world and the self and free the survivor to choose valued life directions. We will present the theory and application of ACT as it applies to individuals with trauma related problems. In addition, we will complete experiential exercises to demonstrate application

EO: Describe the theoretical underpinnings of ACT as it applies to diagnoses following a traumatic event, to include co-morbidities; 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.

TA: Clinicians, Intermediate

Using ACT with Chronically Suicidal Patients

Workshop - ACT/ Applications for Behavioural Disorders

Room: 826

KIRK STROSAHL, Mountainview Consulting Group, Zillah, WA

Few clinical problems are more difficult technically and challenging psychologically than the patient with multiple problems and chronic suicidality. Such patients tend to evoke both the best and the worst of us as clinicians; the best when things are going well and the worst when the patient is engaging in suicidal behavior despite our best interventions. This workshop will expose participants to an ACT approach to suicidal behavior as a learned problem solving behavior that is based in emotional avoidance and cognitive fusion. Participants will learn a four phase clinical sequence for working with this type of patient. Topics will include understanding the genesis of suicidal behavior from a contextual perspective, case and crisis management strategies and how to apply ACT interventions at specific stages of treatment. A video tape demonstration with a chronically suicidal borderline patient will be used to highlight both the "best and worst" of interventions. Participants will also have the opportunity to engage in a "dealing with downers" training exercise, as well as a role play case vignette.

Activities: 1) PowerPoint didactic presentation; 2) Dyadic exercises using role playing vignette; 3) Video tape demonstration; 4) Large group exercise.

EO: 1) Learn the various forms of suicidal behavior and their prevalence; 2) Appreciate the dilemmas in predicting suicidal outcomes using existing risk assessment systems; 3) Understand a contextual model of suicidal behaviour; 4) Learn a four phase

approach to working with the chronically suicidal patient; 5) Appreciate how to organize a case management and crisis management plan for a chronically suicidal patient.

TA: Intermediate to Advanced level of familiarity with ACT

ACT for Depression

Workshop - ACT/ Applications for Behavioural Disorders

Room: 739

ROBERT ZETTLE, Wichita State University

This workshop will combine both didactic and experiential elements to familiarize attendees on adjustments to make in the application of ACT to presenting problems of unipolar depression. An initial overview of how ACT for depression differs from other empirically-supported approaches such as cognitive therapy, mindfulness-based cognitive therapy, and behavioural activation will be provided. A case conceptualization approach and accompanying experiential exercises subsequently will be presented in guiding the implementation and integration of ACT-related treatment components and techniques.

EO: 1) Learn how to adjust the basic model upon which ACT is based in applying it in treatment of depression; 2) Learn how to conceptualize cases of presenting depression from an ACT-consistent perspective; 3) Learn how to apply strategies and techniques within ACT consistent with a case-conceptualization approach

TA: Intermediate

Tuesday Afternoon – 15:15-16:45

Efficacy of the Third Wave of Cognitive and Behavioral Therapies: A Review of the Evidence

Invited Address- ACT/FAP/ DBT/CBASP

Room: Jeffrey Hall

LARS-GORAN OST, Stockholm University

During the last 5 years there has been a surge of interest in the so called "Third wave of CBT" but what does the empirical evidence for these treatments look like? In this presentation a critical review and meta-analysis is done of the following new treatments, both concerning treatment outcome and mechanisms of change: Acceptance and Commitment Therapy (ACT), Dialectical Behavior Therapy (DBT), Cognitive Behavioral Analysis System of Psychotherapy (CBASP), and Functional Analytic Psychotherapy (FAP). Of these ACT and DBT have the most studies, whereas CBASP and FAP only have one each. The conclusion that can be drawn of this review is that the treatment results are not unequivocally impressive and better than traditional CBT treatments in the short- or long-term. Even if DBT is already considered an empirically supported treatment for Borderline Personality Disorder this can be questioned due to methodological flaws in most studies. ACT, CBASP and FAP still have a long way to go in order to fulfill the APA Task force criteria for empirically supported treatments. The presentation ends with some

recommendations for future research in order for the 3rd wave therapies to be included on the list of evidence based treatments.

EO: 1) Learn about the current evidence base for ACT, DBT, CBASP and FAP; 2) Become aware of the methodological flaws often present in these studies; 3) Discuss suggestions on how to improve future studies in order to reach the status of evidence based treatment

TA: Clinicians and researchers

Functional Contextualism: A Wikipedia Approach

Planning Session - Theoretical/ Functional contextualism

Room: 642

Chair: ANTHONY BIGLAN, Oregon Research Institute

Functional Contextualism

DERMOT BARNES-HOLMES, NUI Maynooth

Outline of a Proposed Book on Functional Contextualism

STEVEN C. HAYES, University of Nevada, Reno

Open-Source Solutions for Academic Collaboration

ERIC FOX, Western Michigan University

Facilitated Discussion of Open Source Production of a Book on Functional Contextualism

ANTHONY BIGLAN, Oregon Research Institute

The symposium will present a plan for writing a book on Functional Contextualism using the approach that has been developed for writing Wikipedia, the open source encyclopedia. We will begin with an introduction to functional Contextualism, the philosophy that underpins RFT and ACT. We will then describe the outline of the book that we propose to write. Then an open source strategy, patterned after Wikipedia will be described. Finally, ample time will be available for a facilitated discussion of the proposal for the book and planning of concrete steps toward its completion. (The book will probably exist at the ACBS website.)

RFT Analysis of Clinical Procedures other than ACT

Symposium - RFT/ Theory

Room: 728

Chair: D. J. MORAN, Trinity Services, Joliet, IL

An RFT analysis of Cognitive Practice and Confrontation of the Evidence

M. CARMEN LUCIANO-SORIANO, University of Almeria, Spain

Rational Emotive Behaviour Therapy & Relational Frame Theory: What Do You Think

D. J. MORAN, Trinity Services, Joliet, IL

Can Relational Frame Theory Account for Cognitive Disputing Techniques?

HANK ROBB, Private Practice, Oregon

Relational frame theory can provide an account for more than just ACT. Because it is a theory about language and cognition, it can speak to other clinical theories and practices as well. Cognitive behavior therapy interventions show empirical support and despite their effectiveness, the basic human language processes that participate in these therapies has not

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been well explicated. An RFT analysis of these approaches will be discussed.

EO: 1) Workshop attendees will be able to list and describe six basic principles of functional contextualism, and also contrast those principles from cognitive psychology principles; 2) Attendees will be able to compare and contrast cognitive behavior therapy interventions and clinical behavior analysis interventions; 3) Attendees will be able to describe transformation of stimulus functions regarding relational frames, and how disputation may effect the transformation; 4) Attendees will generate examples of how to apply RFT principles to their own research or application questions

TA: Intermediate

Applications of Acceptance-based Strategies to the Intervention and Prevention of Different Health Problems

Symposium - ACT/ Empirical/ Behaviour Medicine/ Health outcomes study

Room: 822

Chair: OLGA GUTIÉRREZ-MARTÍNEZ, University of Granada, Spain

Discussion Leader: YVONNE BARNES-HOLMES, NUI Maynooth

The Influence of Psychological Processes on Neurological Symptoms: A Brief ACT-based Treatment in Multiple Sclerosis Patients

LAURA C. SANCHEZ-SANCHEZ, University of Almería

M. Carmen Luciano-Soriano, University of Almería

The effect of a brief ACT protocol in post-surgery recovery

M. Dolores Fernández-Rodríguez, Hospital Torrecárdenas- University of Almería

M. Carmen Luciano-Soriano, University of Almería

SONSOLES VALDIVIA-SALAS, University of Almería

Analysis of the Efficacy of Some Components to Prevent HIV Among Adolescents

OLGA GUTIÉRREZ-MARTÍNEZ, University of Granada

M. Carmen Luciano-Soriano, University of Almería

M. P. Bermúdez-Sánchez, University of Granada

Gualberto Buela-Casal, University of Granada

The application of acceptance-based strategies to the intervention and prevention of several health problems is explored. Three papers are presented where the benefits of ACT interventions among multiple sclerosis patients, post-surgery patients and adolescents potentially at risk for the HIV infection are analyzed. All these studies suggest that ACT shows promising applications, especially in the context of health chronic conditions.

EO: 1) Learn about a model for integrating delivery of ACT services into primary care settings; 2) Consider approaches to interacting with medical providers about ACT strategies; 3) Consider ACT-based approaches into health prevention settings

TA: Advanced, clinicians, researchers, health staff

ACT & Literature

Symposium - ACT/ Theoretical/ Literary theory

Room: 736

Chair: KELLY G. WILSON, University of Mississippi

ACT, RFT and Literary Theory

RAINER SONNTAG, Psychiatrist, Olpe, Germany

ACT-Consistent Children's Literature

AMY R. MURRELL, University of North Texas

Christina Sercu, University of North Texas

That Place between Doing and Not Doing: Exquisite Hesitations in Life and Literature

KELLY G. WILSON, University of Mississippi

ACT in Literature & the Movies

RAGNAR STORAASLI, University of Denver, Colorado

This symposium will discuss themes of contact with the present moment, valued-living, and acceptance in literature and movies. Presenters will suggest ways to use literature to develop metaphors, facilitate discrimination of vitality and non-vitality, and enhance committed action. Presenters will discuss examples where literature and movies have aided in the discrimination of ACT relevant themes for use in clinical practice.

EO: 1) Identify themes of contact with the present moment, valued-living, and acceptance in literature and movies; 2) Use themes to develop metaphors facilitate discrimination of vitality and non-vitality in therapy; 3) Use themes from literature and movies to draw parallels between public and private events.

TA: Clinicians, researchers, all levels

BABCP ACT Special Interest Group (SIG)

Discussion/ Organizational Session

Room: 834

Discussion Leader: MARK WEBSTER, SWEST, Bournemouth, UK

Special interest group being formed, led by Mark Webster. All are welcome.

Tuesday Afternoon Plenary – 17:00-18:00

Third Generation Behavioral and Cognitive Therapies: Similarities and Differences

Panel

Room: Jeffrey Hall

MARK WILLIAMS, Oxford University

ANDREW CHRISTENSEN, UCLA

STEVEN C. HAYES, University of Nevada, Reno

ROBERT J. KOHLENBERG, University of Washington

KELLY KOERNER, Private Practice, Seattle

The purpose of this session is to consider examine what is occurring in the behavioral and cognitive therapies and to consider the similarities and differences among these new therapists, including ACT, NMCT, DBT, FAP, and IBCT.

EO: 1) Learn what the key differences are between ACT, NMCT, DBT, FAP, and IBCT; 2) Learn what is common about each; 3) Learn ways to test key differences

TA: Beginner and above

Tuesday Evening – 19:00-Midnight

Social and Program Exposition

Royal National Hotel

-Tuesday, 25 July 2006-

See *Items of Note, Evening Events* section in the front of this program for more information.

Session Descriptions - Wednesday, 26 July

Wednesday Morning - 9:00-10:30

Functional Analytic Psychotherapy: Awareness, Courage, and Intimacy in the Therapeutic Relationship

Invited Address - Contextual Therapies

Room: Jeffrey Hall

ROBERT J. KOHLENBERG, University of Washington
MAVIS TSAI, Independent Practice and Clinical Instructor,
University of Washington

We will discuss the rules of FAP and recent interpretations and implementations of these rules in a way that challenges therapists to be fully involved in a therapeutically intimate relationship. We will provide a behavioral rationale for why a therapist who is aware, struggles, is genuine, and loves, creates increased contact and decreased avoidance in the moment, thereby providing an optimal therapeutic environment.

EO: 1) Learn the basic rules for doing FAP; 2) Learn about recent re-interpretations of these rules; 3) Learn how these reinterpretations challenge the therapist to be more present during treatment sessions.

TA: Beginner/Intermediate

Alliance Building and ACT

Panel - ACT/ Theory & Application/ General

Room: 642

Chair: LESLIE J. ROGERS, University of Mississippi
LESLIE J. ROGERS, University of Mississippi
KAREN KATE KELLUM, & Chad E. Drake, University of
Mississippi

AMY R. MURRELL, University of North Texas
JESSIE VAN DYKE, University of Mississippi

Building working alliances with individuals in psychological and social settings is oftentimes a daunting task for the practicing clinician, teacher, or scientist. Difficulties arise from failure to consider the operant and respondent contingencies under which the individual/system is operating. The purpose of this panel is to provide a theoretical analysis of the term "making space", to describe some of the conditions under which space occurs, and to discuss the clinical implications of these analyses. "Making space" is a bit of verbal behavior that appears with some frequency among ACT clinicians, and has been, on occasion, met with criticism. It is likely that this criticism is due to the lack of a clear definition. This panel will provide analyses of "making space" as a bit of verbal behavior and of space-making as a functional class of behaviors. More specifically, the panel will attempt to identify the conditions under which "making space" is emitted as verbal behavior, propose a function-based definition of space-making behavior, describe the topography of some behaviors which can be called space-making, and highlight applied and clinical issues that arise when individuals are responsive to space-making.

Analysis of Derived Relations and Transformation of Functions

Symposium - RFT/ Experimental/ Relational learning
One Session

Room: 728

Chair: M. CARMEN LUCIANO-SORIANO, University of Almería
Discussion Leader: J. T. BLACKLEDGE, University of
Wollongong, Australia

Comparing Two Methods in the Formation of Equivalence Relations: Stimuli Animation by Movement and Matching to Sample

ISRAEL MANAS-MANAS, University of Almería

Dermot Barnes-Holmes, NUI Maynooth

M. Carmen Luciano-Soriano, University of Almería

A Functional Analysis of the Role of Verbal Behaviour on Relational Responding through the Silent Dog Method

FRANCISCO CABELLO-LUQUE, University of La Rioja

M. Carmen Luciano-Soriano, University of Almería

Dermot Barnes-Holmes, NUI Maynooth

Transformation of Avoidance Evoking Functions and Conditioned Autonomic Responses

MIGUEL RODRIGUEZ-VALVERDE, University of Almería

M. Carmen Luciano-Soriano, University of Almería

Dermot Barnes-Holmes, NUI Maynooth

An Experimental Analysis of the Alteration of the Motivational Function by Verbal Means

SONSOLES VALDIVIA-SALAS, University of Almería

Michael J. Dougher, University of New Mexico

M. Carmen Luciano-Soriano, University of Almería

The present symposium aims to present four experimental studies to advance in the analysis of relational learning, all of them providing relevant and well controlled information in controversial areas as the relational learning methods; the implication of verbal content during learning relations and testing for derived ones; the transformation of functions in avoidance and autonomic behavior, and, finally, in the area of motivation by means other than direct ones. The first compared two methods (stimuli animation by movement and matching-to-sample) in the emergent of equivalence. The second analyzes the formation of equivalence relations across different sensory modalities in the context of the silent-dog methods to isolate the impact of verbalizations relations. The third is an experimental preparation to advance in the transformation of function regarding in the avoidance-evoked functions and the conditioned autonomic responses. Finally, the last paper presents experimental evidence of altering-motivational functions by relational means.

EO: 1) learn more about the design of lab research by utilizing the paradigms within the RFT perspective; 2) explore the transformation of functions across several phenomena; 3) consider the different applications of the basic research on verbal processes

TA: Beginners and intermediate; Researchers

ACT and Behavioural Medicine

Symposium - ACT/ Empirical/ Diabetes, Tinnitus & Epilepsy

Room: 822

Discussion Leader: KEVIN VOWLES, Royal National Hospital for Rheumatic Diseases & University of Bath, UK

Impact of Ethnicity on Avoidance Coping In Diabetes Mellitus

Priscilla Almada, San José State University, California
JENNIFER GREGG, San José State University, California

The effects of acceptance versus thought suppression for dealing with the intrusiveness of tinnitus

Rickard Östergren, Linköping University, Sweden
VENDELA WESTIN, Linköping University, Sweden
Gerhard Andersson, Linköping University, Sweden

Evaluation of a brief ACT model intervention for the treatment of refractory epilepsy in South Africa

TOBIAS LUNDRGREN, Uppsala University, Sweden
JoAnne Dahl, Uppsala University, Sweden
Lennart Melin, Uppsala University, Sweden
Bryan Kees, Department of Neurology, University of Cape Town, South Africa

The application of third-wave principles seems particularly suited to many chronic health conditions, given the ongoing experience of aversive thoughts, feelings, and sensations that appear so inherent in the ongoing experience of poor health. The present series of talks will outline how these principles apply to three diverse health conditions: Diabetes Mellitus, tinnitus, and epilepsy. Each of the speakers will provide an outline of how the health condition can be approached from a contextual treatment perspective, provide a brief review of the extant literature, and discuss emerging data which serve to enhance our understanding of treatment.

EO: 1) Learn about how the principles of third wave approaches apply to chronic health conditions; 2) Gain a broader understanding of how physical illness and emotional distress related to that illness can be approached from a contextual treatment perspective; 3) Consider approaches that can be used in the case conceptualization and treatment of individuals with chronic health conditions.

TA: Beginner

ACT & Spiritual Traditions

Symposium - ACT/ Religion

Room: 736

Chair: JONATHAN WEINSTEIN, University of Mississippi

Buddhism, Zen and Acceptance and Commitment Therapy. A conceptual Analysis

SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Buddhism and ACT

LAI MOLLAHAN, Norfolk and Waveney Mental Health Partnership NHS Trust, UK

Quaker Practice and ACT

JONATHAN WEINSTEIN, University of Mississippi
Kelly G. Wilson, University of Mississippi

This symposium will examine the role of spiritual practice from several perspectives with a view towards explaining ways in which various spiritual

traditions have supported varieties of acceptance, mindfulness, and valued-living.

EO: 1) Discuss varieties of acceptance, mindfulness, and valued-living inherent in different spiritual traditions; 2) Consider the role of spiritual practice in the explanatory model of culturally different clients; 3) Incorporate ACT concepts to fit with a variety of spiritual practices and traditions

TA: Beginner to Advanced

Wednesday Morning Workshops - 9:00-12:15

Using Mindfulness Techniques in ACT

Workshop - ACT/ General

Room: 834

MARK WEBSTER, SWEST, Bournemouth, UK

The workshop will allow participants to experience a wide range of mindfulness exercises. Drawing on existing clinical applications we will look at how these can be integrated into the Self as Context part of ACT. Application of mindfulness to different clinical subgroups will be considered within a model of incremental learning. Common difficulties in using mindfulness with clients will be discussed as well as the wider context of spirituality.

EO: 1) Learn a simple model for working with mindfulness; 2) Develop a range of mindfulness exercises; 3) Build understanding of Self as Context

TA: Standard, intermediate

ACT in the Treatment of Psychosis/Serious Mental Illness

Workshop - ACT/ Applications for Behavioural Disorders

Room: 731

PATRICIA BACH, Illinois Institute of Technology

ACT can be successfully applied to the treatment of serious mental illness. In this workshop participants will learn how to use ACT in the treatment of persons experiencing symptoms of psychosis through a combination of didactic presentation, role plays and demonstrations, and group exercises. Using ACT with involuntary clients, and in inpatient and multidisciplinary settings will also be discussed.

EO: 1) Identify which ACT exercises and metaphors have been found to be most useful with clients with serious mental illness; 2) Learn strategies for applying ACT to involuntary clients; 3) Learn how to modify/simplify ACT for use with 'cognitively impaired'/lower functioning' clients; 4) Identify exercises to use - and to avoid - for addressing the stigma that often accompanies serious mental illness; 5) Identify strategies for using ACT successfully in the context of an interdisciplinary team

TA: Intermediate/advanced; clinicians

Integrative Behaviour Couple Therapy

Workshop - Contextual Therapies

Room: 826

ANDREW CHRISTENSEN, UCLA

In an effort to improve the outcome of couples therapy, Andrew Christensen of UCLA and the late Neil Jacobson of the University of Washington developed Integrative Behavioural Couples Therapy (IBCT), which integrates strategies for promoting acceptance in couples with the traditional behavioural strategies for promoting change in couples.

'Acceptance work' focuses on turning problems into vehicles for promoting intimacy and increasing couples' tolerance for what they see as each other's negative behaviour. As couples let go of the struggle to change one another, change often occurs in response to natural contingencies.

Although this workshop will describe behavioural approaches to couple therapy, the primary focus will be on IBCT. Assessment, feedback, and treatment strategies of IBCT will be described and illustrated, often with video clips from treatment sessions. The results of the UCLA/University of Washington clinical trial comparing IBCT with traditional behavioural couple therapy will be described.

Workshop Activities: The workshop will include a PowerPoint slide presentation, video clips of couples in therapy, and group discussion.

EO: You will learn: 1) the theoretical and empirical basis for IBCT; 2) how to conduct an evaluation in IBCT; 3) the treatment strategies of IBCT; 4) the empirical support for IBCT

TA: This workshop is for clinicians who have some familiarity with behavioural approaches to therapy and are interested in couple therapy.

We Cannot Walk Alone: Using ACT to Combat Prejudice

Workshop - ACT/ Social and Educational Issues

Room: 739

STEVEN C. HAYES, University of Nevada, Reno

JASON LILLIS, University of Nevada, Reno

ROGER M. VILARDAGA, University of Nevada, Reno

Behavior therapy is relevant not just to the needs of victims of stigma, prejudice, and terrorism, but also to understanding and modifying psychological processes that lead to the perpetration of hateful acts. Human prejudice is defined as the objectification and dehumanization of people as a result of their participation in evaluative verbal categories. Prejudice is difficult to deal with because (a) the same verbal processes that give rise to prejudice are massively reinforced in dealing with the external environment; (b) virtually all cultures openly amplify this process with stigmatized groups; (c) humans are historical beings and verbal/ cognitive networks, once formed, tend to maintain themselves; and (d) many of the things humans do to change or eliminate undesirable verbal categorical processes are either inert or prone to making these processes more resistant to change. Mindfulness, cognitive defusion, acceptance, and valued action are suggested as alternative methods of fighting the war behaviour therapy needs to help human society win; a war on prejudice. ACT training for prejudice emphasizes the recognition and

awareness of the ongoing processes of judgment and evaluation, helping individuals attend less to the content of their thoughts and feelings while creating more behavioural flexibility. These methods will be discussed in terms of how to design and implement training programs to combat racism in any institutional setting (e.g. college campus or work setting), as well as how to train other individuals to design and implement programs based on these methods.

EO: 1) Learn about a behavioral analytic conceptualization of prejudice from an ACT/ RFT perspective; 2) Understand the issues involved in researching prejudice from an ACT/ RFT perspective; 3) Learn how to design a brief protocol and a research study on prejudice

TA: Intermediate to advanced researchers and clinicians

Acceptance and Commitment Therapy and Supervision

Workshop - ACT/ General

Room: 744

ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

Supervision and training in Acceptance and Commitment Therapy (ACT) can be challenging. A context for establishing willingness to experience is vital. 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. Role play and experiential exercises will also be included as part of this workshop.

EO: 1) Describe how to work with supervisees to help them develop a sense of personal wholeness (creating self-as-context) as a means to relate that same sense to the client; 2) Describe how to focus on acceptance of emotion and thoughts, both as how it relates to the supervisees experience and to the clients experience; 3) Describe how to help supervisees assess the cost of avoidance as it relates to their own and to their client's lives

TA: Intermediate, clinicians

Wednesday Morning - 10:45-12:15

Evaluating the Effectiveness, Impact, and Utility of Training: How Do We Know When it Works?

Panel - ACT/ Training

Room: Jeffrey Hall

Chair: JENNIFER GREGG, San José State University, California

KELLY G. WILSON, University of Mississippi

SONJA V. BATTEN, VA Maryland Health Care System &

University of Maryland School of Medicine

KIRK STROSAHL, Mountainview Consulting, Washington

JOANNE DAHL, Uppsala University, Sweden

YVONNE BARNES-HOLMES, NUI Maynooth

As ACT trainers deliver more and more workshop training sessions worldwide, the need for a systematic mechanism for evaluating training impact, effectiveness, and utility becomes clear. Core competencies, web- and telephone-based training, and follow-up impact reports all provide possible pathways for training evaluation, and need to be explored in efforts to systematize such evaluation across trainers. Panel members will discuss the role of evaluation in training, and share ideas, mechanisms, and methodologies for training evaluation.

Toward a More Functional Approach to the Training and Dissemination of ACT and Other Empirically-Supported Psychotherapies: Models, Data, and Future Directions

Invited Address - ACT/ Training

Room: 642

JASON LUOMA, University of Nevada, Reno

The most dominant model for psychotherapy development, the FDA stage model, promises more effective outcomes for clients based on therapist use of empirically-supported treatment manuals. Ultimately, this entire enterprise depends upon the ability of systems of care to train and maintain adequate implementation of manuals by practitioners. However, little research has been conducted into how this training and supervision might most effectively be conducted and whether this critical link in the chain can be achieved in a cost effective manner. Furthermore, this model provides little direction on how to conduct this research. This presentation reviews theories of training and dissemination and how such research might result in evidence-based principles of training and supervision and inform psychotherapy development. Behavioral principles that relate to the dissemination and training of ACT will be suggested and relevant data presented. Ideas for future directions in research on training and dissemination of ACT and other evidence-based technologies will be presented.

EO: 1) Participants will gain a better understanding of scope of past research on training and its relevance to therapy development; 2) Participants will understand new model of dissemination and training of empirically supported therapies; 3) Participants will learn new behavioral principles that might inform their efforts to disseminate and train ACT.

TA: Researchers and Trainers

Interacting with Values Differently: Clinical and Theoretical Perspectives

Symposium - ACT/ Theoretical/ Values

Room: 728

Chair: JESSIE VAN DYKE, University of Mississippi

Discussion Leader: AMY R. MURRELL, University of North Texas

ACT: Applied Contextualist Therapy

ANTHONY BIGLAN, Oregon Research Institute

What's the Value of Values?

HANK ROBB, Private Practice, Oregon

Complexities, Assessment, and Treatment of Valuing and Valuing Behaviour

JESSIE VAN DYKE, University of Mississippi

Leslie Rogers, University of Mississippi

Kelly G. Wilson, University of Mississippi

Facilitating and assessing behavioral engagement in valued living domains have been a central interest of ACT clinicians and scientists. Difficulty often arises in the assessment of client values and valued activity. Some issues concerning values are written and verbal assessment, discriminating topography and their behavioral correlates, and engagement across valued living domains. Problems in measurement and verbal reporting as well as therapist's beliefs about client values make the assessment of valued living activity difficult. Additionally, when the functionality of valued activity is difficult to discern, clinicians are often faced with gauging behavior based on topography. Due to variability in behavior, it may be difficult to assess the value in which the client is acting in the service of. Lastly, complexities and theoretical issues in relation to flexibility of client activity across multiple domains will be discussed.

EO: 1) Assessment and treatment of values when behavior is difficult to discern; 2) Consider theoretical issues about facilitating valued behavioral flexibility and engagement; 3) Exploring and implementing values at the societal/ organization level

TA: Intermediate, clinicians/researchers

Assessing Values in Acceptance & Commitment Therapy

Symposium - ACT/ Experimental/ Values assessment

Room: 822

Chair: J. T. BLACKLEDGE, University of Wollongong, Australia

Initial Validation of the Social Values Survey and Personal Values Questionnaire

JOSEPH CIARROCHI, University of Wollongong, Australia

J. T. BLACKLEDGE, University of Wollongong, Australia

Values Clarification and Values-Based Activity as Predictors of Outcome in Treatment for Depression

JENNIFER C. PLUMB, University of Nevada, Reno

Mikaela Hildebrandt, University of Nevada, Reno

Steven C. Hayes, University of Nevada, Reno

Lindsay M. Martin, University of Nevada, Reno

Robert Zettle, Wichita State University

Measuring Values: The Validation of the Valued Living Questionnaire (VLO)

EMILY K. SANDOZ, University of Mississippi

Kelly G. Wilson, University of Mississippi

Jenny Kitchens, University of Mississippi

Miguel Roberts, University of Mississippi

How do we measure therapeutic success? Validation of the Values Bulls-eye

TOBIAS LUNDGREN, Uppsala University, Sweden

JoAnne Dahl, Uppsala University, Sweden

Lennart Melin, Uppsala University, Sweden

Validation studies for four separate ACT-relevant values assessment instruments (the Personal Values Questionnaire, Social Values Survey, Valued Living Questionnaire, and Values Bullseye) will be presented, and the rationale behind the development and use of each instrument will be discussed as appropriate.

EO: 1) Understand how values are conceptualized from an ACT perspective; 2) Understand the specific details of four different values assessment measures currently under development; 3) Gain a basic understanding of the suitability of each assessment measure for various research & clinical tasks.

TA: Basic, Intermediate & advanced; clinicians; researchers

RFT & Education II

Symposium - RFT/ Empirical/ School setting

Room: 736

Chair: ERIC FOX, Western Michigan University

ACT & RFT to Develop Critical Thinking

ERIC FOX, Western Michigan University

RFT & IQ

MARTHA PELAEZ, Florida International University

Derived relational responding after matching-to-sample procedures in special school classroom settings

STEFAN BILLINGER, Örebro University, Sweden

Björn Lyxell, Linköping University, Sweden

Ata Ghaderi, Uppsala University, Sweden

Complex derived relational responding after matching-to-sample procedures in classroom settings

STEFAN BILLINGER, Örebro University, Sweden

Björn Lyxell, Linköping University, Sweden

Ata Ghaderi, Uppsala University, Sweden

This symposium will explore some implications and applications of Relational Frame Theory for educational settings. Techniques for using RFT to build generative verbal repertoires in early intensive behavioral intervention will be described, and data from studies examining derived relational responding in connection to matching-to-sample procedures and cross-modal transfer will be reported.

Research on derived relational responding and impulsivity in a teaching situation will also be presented.

EO: 1) Learn the basic principles and concepts of Relational Frame Theory; 2) Consider approaches for enhancing derived relational responding in educational settings; 3) Learn recent findings on teaching derived relational responding in educational settings.

TA: Beginner, educators, clinicians

Wednesday Afternoon - 13:30-15:00

ACT in Private Practice II

Panel - ACT/ Professional Issues

Room: Jeffrey Hall

Chair: RAINER SONNTAG, Psychiatrist, Olpe, Germany

RAINER SONNTAG, Psychiatrist, Olpe, Germany

D. J. MORAN, Trinity Services, Joliet, IL

GERMANO TANGO, Psychologist, Canary Islands, Spain

PETER COWELL, Clinical Psychologist, Private Practice, Miranda, Australia

Clinicians in private practice face a wide range of challenges, some of which overlap with the issues faced by their colleagues in other settings, while other issues are unique to working in this setting. Many clinicians will spend at least a portion of their careers

working in private practice settings. Despite this fact, academic programs and professional conferences often neglect the particular needs of the private practitioner. The panel will address a range of theoretical and philosophical issues relevant to clinicians in private practice and to ACT therapists and therapists-in-training who may someday work in such settings.

ACT Across the Developmental Spectrum

Symposium - ACT/ Empirical/ Experiential avoidance/ Elderly/ Kids

Room: 642

Discussion Leader: TONY BALAZS, Behavioural Learning Consultant, London, UK

Avoidance in Teenagers

JANET CLARE WILSON, University of Portsmouth, UK

Cristina Gageiro, University of Kent, UK

Louise Hellyer, University of Kent, UK

Eleanor Whitty, University of Kent, UK

Acceptance and Quality of Life in the Elderly

JODIE BUTLER, University of Wollongong

Joseph Ciarrochi, University of Wollongong, Australia

Introducing ACT through Play Therapy for Children

DANIEL MATTILA, Cognitive Therapy Center of New York

Emotional Avoidance and the Process of Complicated

Grieving in a Center for the Elderly

JULIEANN PANKEY, University of Nevada, Reno

Steven C. Hayes, University of Nevada, Reno

This symposium illustrates some of the client groups for which behavioural services are available. For these and other groups, behavioural interventions for emotional distress, such as grieving, and other painful private events, may be considered generally rudimentary and sometimes nonexistent. This is especially true when considering how language plays such a critical role in the development and maintenance emotional pain or low levels of personal satisfaction. ACT-based analyses and interventions for children, teenagers and the elderly will be discussed.

EO: 1) Learn about issues facing children, teenagers and the elderly that may be effectively addressed through ACT; 2) Learn about developing and incorporating ACT-based interventions in centers for the elderly and in play therapy for children; 3) Learn how to present ACT to other members of a multidisciplinary team and apply it with them.

TA: Clinical

Canonical Works: The Contextual Behavioural Roots of ACT & RFT

Discussion Session - ACT/ RFT/ Theory

Room: 728

KELLY G. WILSON, University of Mississippi

STEVEN C. HAYES, University of Nevada, Reno

EMILY K. SANDOZ, University of Mississippi

RFT and ACT claim parentage in the behavior analytic tradition. This is not always apparent, however, in form of the current work. Therefore, this session will explore this heritage by examining classic work in behavior analysis for the roots of what has emerged as RFT and ACT.

EO: 1) Summarize classic behavior analytic articles; 2) Point to the sensibilities of RFT/ACT evident in those articles; 3) Provide an understanding of the foundations of RFT/ACT in behavior analysis
TA: General, Beginner through Advanced

Implicit Relational Assessment Procedure (IRAP): A Measure of Implicit Cognition in Adults and Children

Symposium - RFT/ Experimental/ IRAP
One Session

Room: 822

Chair: FODHLA COOGAN, NUI Maynooth

Discussion Leader: CATHERINE ADAMS, University of Mississippi

Using the Implicit Relational Assessment Procedure to Measure the Attitudes of Children Regarding Nationality

FODHLA COOGAN, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

The IRAP: Do White Irish Students Find Black Men with Guns More Dangerous than White Men with Guns?

Suzanne Comerford,

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

The Implicit Relational Assessment Procedure (IRAP): The Impact of Faking Instructions on the IRAP

Michelle Kelly, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

The Implicit Relational Assessment Procedure (IRAP): Exploring its Clinical Utility

CLAIRE CAMPBELL, National University of Ireland, Maynooth

Angela Kelly, National University of Ireland, Maynooth

Yvonne Barnes-Holmes, National University of Ireland, Maynooth

Dermot Barnes-Holmes, National University of Ireland, Maynooth

The IRAP was built out of Relational Frame Theory, a modern behavioural approach to human language and cognition. Initial studies have shown that the IRAP may be used to measure relational networks or beliefs that are not readily accessible to the researcher or perhaps even the participant. The IRAP appears to offer advantages over other methods that use reaction time measures to assess beliefs or attitudes (e.g. the Implicit Association Test; IAT), both in its theoretical rationale and its ability to measure many types of relationships. The research papers listed below are concerned with the employment of the IRAP as a tool to assess self esteem in young children (Paper 1); attitudes of children regarding nationality (Paper 2); attitudes to black and white males who are depicted holding either guns or innocuous objects (Paper 3); and the reliability and fakeability of the IRAP (Paper 4). Future implications of the studies will be discussed.

EO: 1) Enhance understanding of the IRAP as a methodology; 2) Understanding the IRAP as a tool for

looking at race; 3) Looking at the relevant statistical analysis and data presentation of the IRAP 4) Exploring the reliability of the IRAP

TA: Researchers

Exposure and Acceptance in the Rehabilitation of People with Chronic Debilitating Pain

Invited Address - ACT/ Behaviour Medicine

Room: 736

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm

Despite recent advantages, chronic pain still results in debilitating effects for many patients. Traditional pharmacological and psychological strategies are many times insufficient in reducing symptoms and facilitating recovery. In developing a behaviour medicine treatment for young people with chronic pain, it was hypothesized that avoidance of pain-related stimuli is central to disability and possibly generates an increase in the patient's pain sensitivity. Rather than focusing on alleviation of pain and distress by using control-oriented techniques, acceptance of pain and distress is emphasized as a means to facilitate exposure towards activities that are meaningful although possibly painful. In the current presentation, the development of the clinical model will be described, illustrating how ACT provides a frame for working with a shift in perspective from symptom alleviation to an increase in valued living. Core components and clinical experiences will be addressed and supported by data from recent studies on children and adults. Psychological flexibility as the possible mechanism of change as well as implications for future research and development will be discussed.

EO: 1) Learn how ACT can be applied in the treatment of patients with chronic debilitating pain; 2) Consider the application of ACT as a multi-disciplinary team approach; 3) Learn about a model for integrating delivery of ACT services into primary care settings 4) Learn about ACT-based interventions with pain patients

TA: Beginner

Psychological Flexibility, Contingency Sensitivity & Rule-Governed Behaviour

Symposium - Research/ Rule-governed

Room: 834

Chair: FRANK W. BOND, Goldsmiths College, University of London

Review, Replication and Extension of Contingency-shaped vs. Rule-Governed Behavior Experiments by Catania and Colleagues.

Michael R. Johnston, University of Nevada, Reno

KAREN KATE KELLUM, University of Mississippi

Linda J. P. Hayes, University of Nevada, Reno

Establishing Pliance in Experimental and Clinical Contexts

MARIE GORHAM, NUI Maynooth, Ireland

Yvonne Barnes-Holmes, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

The Relationship Between Psychological Flexibility and Contingency Sensitivity

FRANK W. BOND, Goldsmiths College, University of London
Dermot Barnes-Holmes, NUI Maynooth

When Knowing You are Doing Well Hinders Performance: Exploring the Interaction Between Rules and Feedback

Joseph R. Haas, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno
FRANK W. BOND, Goldsmiths College, University of London

This session considers research on the impact that rules have on people's ability to take effective action. In addition, it looks at laboratory research that shows that higher levels of psychological flexibility are associated with greater sensitivity to contingencies of reinforcement. Implications for enhancing performance and well-being are discussed.

EO: 1) Learn about the impact of rule-governed behaviour on effective action; 2) Consider findings on how psychological flexibility can help bring actions under the greater control of contingencies of reinforcement; 3) Learn about the impact of rules and psychological flexibility on job performance and other work-related actions

TA: Intermediate and applied psychologists

Wednesday Afternoon Workshops - 13:30-16:45

Using ACT as a Brief Intervention Model

Workshop - ACT/ General

Room: 731

KIRK STROSAHL, Mountainview Consulting Group, Zillah, WA

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 general health care, schools or occupational settings. 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 video demonstration of a brief intervention will be used to demonstrate 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.

EO: 1) Learn the empirical literature supporting the utility of brief interventions; 2) Learn the basic organizing principles of brief, strategic therapy; 3) Learn how to modify ACT interventions to fit the brief, rapid response approach

TA: Intermediate to advanced level of familiarity with ACT

Acceptance and Commitment Therapy in Group Format

Workshop - ACT/ General

Room: 826

JACQUELINE PISTORELLO, University of Nevada, Reno
ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

EO: 1) Summarize past and current efforts on adapting ACT to groups; 2) Identify advantages to delivering ACT in group format; 3) Describe ACT group dynamics and processes from a group perspective 4) Conduct experiential exercises to demonstrate group processes.

TA: Intermediate to advanced

Mindfulness: Current Approaches

Workshop - Contextual Therapies

Room: 739

RUTH BAER, University of Kentucky

This workshop will provide an overview of mindfulness skills, practices, and exercises used by the leading empirically supported mindfulness-based interventions, including acceptance and commitment therapy (ACT), dialectical behaviour therapy (DBT), mindfulness-based cognitive therapy (MBCT), and mindfulness-based stress reduction (MBSR). Similarities and differences in conceptualizing and teaching mindfulness skills will be highlighted. Opportunities to practice and discuss a selection of mindfulness exercises will be provided. General principles that may explain how the cultivation of mindfulness skills leads to symptom reduction and improved well-being will be discussed.

EO: 1) Become familiar with a range of mindfulness exercises and practices that are used in empirically supported mindfulness-based interventions; 2) Learn about similarities and differences in how mindfulness skills are conceptualized and taught in mindfulness-based interventions; 3) Become familiar with how mindfulness is integrated with change-based procedures in several mindfulness-based interventions

TA: Beginner to intermediate, clinicians or researchers

Wednesday Afternoon - 15:15-16:45

Why are Humans So Cruel and What Can We Do about It?

Invited Address - ACT/ Social Issues

Room: Jeffrey Hall

JOSEPH CIARROCHI, University of Wollongong, Australia

Why do humans behave so badly towards one another, in the absence of any obvious deprivation or threat? Most importantly, what can we practitioners do about it? My talk will look at the pervasiveness of cruelty and aversive interpersonal behavior, which ranges from the common and mundane (A husband trying to "hurt" his wife with words.) to the extraordinary (e.g., the holocaust). Situationist, evolutionary, and cognitive theories provide valuable insights into the problem, but fall short in two ways. First, they explain a relatively limited range of aversive interpersonal behavior, and/or second, they

provide limited accounts of how to reduce such behavior. I then illustrate how an ACT/RFT model provides a more comprehensive account of how to predict-and-reduce aversive interpersonal behavior. Finally, I will provide some concrete examples of how an ACT practitioner might go about reducing cruelty and promoting kindness.

EO: 1) Learn about how ACT can be used to promote positive social behaviours; 2) Learn how to use ACT to improve interpersonal relationships, and resolve interpersonal problems; 3) Learn how basic social psychological findings can inform clinical practice

TA: intermediate

The Third Wave Therapies in the Context of Chronic and Acute Pain: A Clinical and Research Update

Symposium - ACT/ Experimental/ Theoretical/
Behaviour Medicine/ Pain

Room: 642

Chair: KEVIN VOWLES, Royal National Hospital for
Rheumatic Diseases & University of Bath, UK

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital,
Karolinska University Hospital, Stockholm

Experimental Approaches to the Investigation of Acceptance and Pain

EDMUND KEOGH, University of Bath & Royal National
Hospital for Rheumatic Diseases, UK

Chronic Pain in Children and Young People: The Measurement of Parental Acceptance and its Relationship to Distress and Functioning

JEREMY GAUNTLETT-GILBERT, Royal National Hospital for
Rheumatic Diseases & University of Bath

Lance M. McCracken, University of Bath, U.K.

Hannah Connell

Jacqui Clinch, Royal National Hospital for Rheumatic
Diseases, U.K.

Christopher Eccleston, University of Bath, U.K.

Patient Functioning and Catastrophizing in Chronic Pain

KEVIN VOWLES, Royal National Hospital for Rheumatic
Diseases & University of Bath, UK

Lance M. McCracken, University of Bath, U.K.

Christopher Eccleston, University of Bath, U.K.

Exposure and Acceptance Strategies for Patients with Chronic Debilitating Pain: Evaluation of Two Randomized Controlled Trials

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital,
Karolinska University Hospital, Stockholm

Josefin Ahlqvist, Astrid Lindgren Children's Hospital,
Karolinska University Hospital

Lennart Melin, Uppsala University, Sweden

Gunnar L. Olsson, Astrid Lindgren Children's Hospital,
Karolinska University Hospital

The occurrence of chronic and acute pain is widespread and costly. For instance, it is estimated that 25% of individuals experience at least one episode of pain lasting 3 months or longer at some point during adolescence (Perquin et al., 2000) with estimated average direct and indirect costs of £8000 (approx. \$14,000) per adolescent per year (Sleed et al., 2005). The experience of pain can also result in significant suffering and decreased freedom in living (e.g., McCracken & Vowles, 2006).

The third wave therapies, with their focus on acceptance, values, mindfulness, and cognitive defusion seem uniquely poised to assist with the many problems inherent in the experience of pain, including all of the difficult psychological content that often accompanies it. The first studies of acceptance and pain occurred almost 15 years ago (e.g., Geiser, 1992). The field therefore has had opportunities to mature and develop relative to other settings where the third wave therapies have more recently expanded. Thus, in addition to being of interest to those involved in the study of pain, the present series of talks may be of interest to those involved in other clinical settings, particularly where chronic health conditions are involved.

This set of presentations will serve to review where the field stands currently, discuss recent findings, and suggest promising potential directions for the future. Dr. Edmund Keogh will highlight the role of experimental pain induction procedures in aiding contemporary understanding of the pain process generally and as it specifically applies to the use of emerging third wave interventions specifically. Dr. Jeremy Gauntlett-Gilbert will next discuss the findings of an assessment project aimed at quantifying acceptance in adolescents with chronic pain and their parents. The influence of parental acceptance of the pain being experienced by their child on the child's functioning will be a primary focus of the presentation. The third presentation by Dr. Kevin Vowles will consider how patient ratings of acceptance of chronic pain alter the relations among catastrophic thinking about pain and patient functioning. Finally, Dr. Rikard Wicksell will detail the outcomes of two randomized controlled trials of Acceptance and Commitment Therapy; One with children and adolescents experiencing persistent pain and the second with adults suffering from chronic whiplash-associated pain. Each speaker will also specifically discuss how these data move the field forward empirically and where future potentials for experimentation lie.

EO: 1) Gain an understanding of the application of Acceptance and Commitment Therapy to a variety of health conditions involving chronic and acute pain; 2) Consider how the third-wave therapies conceptualize and approach the treatment of pain from both laboratory-based and clinical study; 3) Be exposed to recent relevant data and learn where new directions lie for experimentation.

TA: Beginner

Third Generation Models of Smoking Cessation Treatment

Symposium - ACT/ Empirical/ Theory
One Session

Room: 728

Chair/Discussion Leader: SHAWN BOLES, Oregon Research
Institute

*Change processes involved in two treatments oriented
to smoking cessation: ACT vs. CBT*

MONICA HERNANDEZ-LOPEZ, University of Valladolid, Spain
Jesús Gil, University of Almería
M. Carmen Luciano-Soriano, University of Almería

ACT and smoking cessation for adolescents: A pilot study

ANTHONY BIGLAN, Oregon Research Institute
COLEEN YEARICK, Oregon Research Institute

The Acceptance and Relationship Context Model in Smoking Cessation: An Initial Evaluation of a Novel Treatment Combining ACT, FAP and Bupropion

Elizabeth Gifford, Center for Health Care Evaluation, et al.
BARBARA KOHLENBERG, University of Nevada School of Medicine

This symposium consists of three presentations of empirical evaluations of third generation models of smoking cessation, including an analysis of the change processes involved in two different treatments aimed at smoking-cessation. The symposium will include discussion of analogue and applied research methods for evaluating and comparing smoking cessation models.

EO: 1) Discuss efficiency of third generation models of smoking cessation; 2) Examine research methods for comparing smoking cessation treatments; 3) Compare change processes in ACT and CBT

TA: Clinicians, researchers, all levels

ACT & Gestalt

Panel - Contextual Therapies

Room: 822

Chair: HELEN BOLDERSTON, Clinical Psychologist, U.K.
MALCOM PARLETT
KELLY G. WILSON, University of Mississippi
HELEN BOLDERSTON, Clinical Psychologist, U.K.

Panelists will comment on the intellectual tradition of both Gestalt and ACT and note areas of overlap and distinction. This panel will discuss parallels and themes that link ACT with Gestalt and explore the potential for integration between these traditions.

TA: Clinicians, researchers, all levels

ACT for Stress in Organizational Settings

Symposium - ACT/ Empirical/ Organizational/ Clinical training session

Room: 736

Chair: FRANK W. BOND, Goldsmiths College, University of London

ACT for stress in Organizational Settings: Clinical Training Session

FRANK W. BOND, Goldsmiths College, University of London

ACT and Stress Inoculation Training at Work: Investigating the Mediators of Change

PAUL FLAXMAN, Goldsmiths College, University of London
Frank Bond, Goldsmiths College, University of London

Acceptance and Commitment Therapy (ACT) and Stress Inoculation Training (SIT) at Work: Paper 2

PAUL FLAXMAN, Goldsmiths College, University of London
Frank Bond, Goldsmiths College, University of London

Over the past 9 years, a programme of research has studied how ACT can be used effectively in the workplace, not only to improve the mental health of employees but also their job performance. The

findings from this research are presented, and specific intervention techniques and strategies are discussed. Lessons learned about implementing ACT at work will be discussed, and delegates will have ample opportunity to ask questions and consider relevant issues.

EO: 1) Hear how ACT has been tailored for use in the workplace; 2) Learn which ACT intervention techniques and strategies have been shown to be effective in worksite stress management interventions; 3) Understand what issues you need to consider when implementing ACT at work

TA: Intermediate, clinicians, work psychologists

The Amazing Infant: Early Learning of Relational Frames

Invited Address - RFT/ General

Room: 834

MARTHA PELAEZ, Florida International University

Research has shown that relational frames and derived relational responding tasks vary with language ability. A number of studies have already attempted to establish stimulus equivalence, a type of derived relational performance, in young subjects. For example, Devany, Hayes and Nelson (1986) and Barnes, McCullagh, and Keenan (1990) found that equivalence responding was absent in language disabled children and Pelaez, Gewirtz, Sanchez and Mahabir (2000) found similar effects with pre-linguistic infants, although they got symmetry. Also, in a longitudinal study, Lipkens, Hayes and Hayes (1993) tracked the emergence of a simple repertoire of derived relational responding in a single child and their findings suggested that such responding showed a developmental trend similar to language.

Few studies, however, have examined the early precursors of learning social relational frames. In this presentation I will report a series of studies with young infants that involved the training and development of early behavior-context relations. I will suggest that these type of relations are often learned in social contexts and are necessary precursors for the establishment of RFT. Results from research on infant conditional discrimination learning (differential responding) in two contexts, that of maternal departures (A) and maternal separations (B) Following two different signals (cues) will illustrate this. I will also report results from research where the training of infant social referencing involved these relational frames under the control of two different cues signaling different contexts. Future research and applied directions will be part of the following discussion.

EO: 1) Learn about the precursors and early development of relational frames in infancy; 2) Learn how to establish early patterns of communication that signal different contexts; 3) Consider interventions for interactions between parents/caregivers and young children with RFT strategies

TA: Intermediate-Advanced, experimental researchers, clinical psychologists

Wednesday Afternoon Plenary - 17:00-18:00

**Science and Ancient Ideas of what it Means to
be Human: Exploring the Implicit Values
Underlying ACT**

Invited Addresss – ACT/Values

Room: Jeffrey Hall

Chair: KIRK STROSAHL, Mountainview Consulting Group,
Zillah, WA

STEVEN C. HAYES, University of Nevada, Reno

The purpose of this address is to examine the implicit values of ACT. I will argue that ACT contains within it a focus on love and compassion, communication, consciousness, and social responsibility -- and will show why these flow from an ACT model.

EO: 1) Learn what the key aspects are of an ACT approach; 2) Learn the basis of these aspects in RFT; 3) Learn how these contain implicit values that can guide ACT work

TA: Beginner and above

Session Descriptions - Thursday, 27 July

Thursday Morning - 9:00-10:30

Using the ACT Self-help Books in Clinical Practice

Discussion - ACT/ Clinical/ General

Room: Jeffrey Hall

Chair: STEVEN C. HAYES, University of Nevada, Reno
RAGNAR STORAASLI, University of Denver, Colorado
SUSAN CLARKE, University of Southampton, UK
JOANNE DAHL, Uppsala University, Sweden
JASON LILLIS, University of Nevada, Reno
LAI MOLLAHAN, Norfolk and Waveney Mental Health Partnership NHS Trust, UK

The purpose of this session is to consider examine how to use self-help books to promote effect practice in ACT.

EO: 1) Learn the variety of way that self-help books can be used in ACT; 2) Learn common errors in the use of self-help books; 3) Learn ways to test these ideas

TA: Beginner and above

Effectiveness Studies on ACT

Symposium - ACT/ CBT/ Empirical/ Effectiveness study/ Emotions

Room: 642

Chair/Discussion Leader: ANTHONY BIGLAN, Oregon Research Institute

The Impact of CBT and ACT Models using Psychology Trainee Therapists: A Preliminary Controlled Effectiveness Trial

RAIMO LAPPALAINEN, University of Tampere, Finland
Tuula Lehtonen, University of Tampere, Finland
Eerika Skarp, University of Tampere, Finland
Eija Taubert, University of Tampere, Finland
Markku Ojanen, University of Tampere, Finland
Steven C. Hayes, University of Nevada, Reno

Results from a Randomized Controlled Trial comparing ACT and CBT for Mixed Mood and Anxiety

EVAN M. FORMAN, Drexel University
James D. Herbert, Drexel University
Jason E. Chapman, Medical University of South Carolina
Peter Yeomans, Drexel University
Katherine McGrath, Drexel University
Ethan Moitra, Drexel University
Kimberly Hoffman, Drexel University
Kathleen Marquez, Drexel University

Support for the Theory that Improved Acceptance is Important for the Therapeutic Change: Comparing ACT and ACT + Traditional CBT

RAIMO LAPPALAINEN, University of Tampere, Finland
Henna Toumela, University of Tampere, Finland
Tuula Lehtonen, University of Tampere, Finland
Hanna Heinonen, University of Tampere, Finland
Steven C. Hayes, University of Nevada, Reno

It has been suggested that Acceptance and Commitment Therapy (ACT) might work through different change processes than "traditional" Cognitive Behaviour Therapy (CBT). Presenters will discuss research designs and empirical data to compare the effectiveness of ACT and CBT. Results will address the implications for future studies that compare ACT and CBT.

EO: 1) Compare and contrast the effects of traditional CBT and ACT; 2) Review the design of studies comparing treatment efficacy; 3) Discuss implications of future effectiveness studies

TA: Intermediate Clinicians, Researchers

Understanding and Altering Experiential Avoidance

Symposium - ACT/ RFT/ Avoidance

Room: 728

Chair: CATHERINE ADAMS, University of Mississippi

Experiential Avoidance Mediates the Relationship between Sexual Victimization and Psychological Distress in a Sample of Ethnic Minority Women

RHONDA MERWIN, Duke University Medical Center

M. Zachary Rosenthal, Duke University Medical Center

From Mechanism to Functionalism, or: What is Avoided in Emotional Avoidance? An ACT/RFT Perspective on Emotion

RAINER SONNTAG, Psychiatrist, Olpe, Germany

Mindfulness: Effect on Social Anxiety, Negative Thoughts, Self-Focused Attention, and Safety Behaviours During a Speech Task

Sheena Noel, Wilfrid Laurier University, Canada

NANCY KOCOVSKI, Wilfrid Laurier University and Centre for Addiction and Mental Health, Canada

Experiential avoidance is a process by which experiences are avoided often due to negative thoughts, feelings, and memories associated with them. This set of papers will demonstrate the role of experiential avoidance in a variety of difficulties. In addition, it will provide recent research findings to support ideas presented.

EO: Attendees will learn about: 1) the role of experiential avoidance in psychological distress; 2) distinguishing between mechanistic and functional contextualist perspectives on avoidance of emotions; 3) the role of mindfulness in alleviating anxiety and negative thoughts

TA: Intermediate, Clinical

RFT Super-Geeks, Unite!: Using the IRAP to Examine Relational Responding

Discussion - RFT/ Research

Room: 822

Chair: CHAD E. DRAKE, University of Mississippi
DERMOT BARNES-HOLMES, NUI Maynooth
SHAWN BOLES, Oregon Research Institute
EMILY K. SANDOZ, University of Mississippi
KELLY G. WILSON, University of Mississippi
ROBERT ZETTLE, Wichita State University
KAREN KATE KELLUM, University of Mississippi
JONATHAN WEINSTEIN, University of Mississippi

The Implicit Relational Assessment Procedure (IRAP) is a promising new tool for research on relational stimulus control. This promise is revealed not only in the growing body of studies surrounding it, but also in its continuing refinement as a research instrument. This panel consists of experimenters currently engaged in IRAP research. Our experience has shown that a variety of small procedural adjustments can

have a significant impact on the results of our studies. These adjustments can influence outcomes by decreasing unwanted variability, improving adherence to the requirements of the task, and increasing the sensitivity of the procedure. We have also found that there is more than one useful strategy for examining IRAP data. This panel will present its most current findings on these and related issues, in the hope that others who are planning IRAP research will be better equipped to achieve their own research goals. The panel will also discuss some as-yet-unexplored directions in IRAP research, in the hope that others will join us in our nerdy quest. The most recent versions of IRAP software will be available.

The Brief (but longer than you think) History of ACBS

Invited Address - ACT/ Foundations

Room: 736

ERIC FOX, Western Michigan University

This paper will explore the social, intellectual, technological, and practical factors that led to the formation of the Association for Contextual Behavioral Science. Some of the intellectual and philosophical reasons ACT and RFT researchers and practitioners have pursued a community somewhat distinct from behavior analysis or cognitive behavior therapy will be discussed. The early stages of the formation of the community will be described, including the initial establishment of the RFT and ACT electronic mailing lists and websites.

Early gatherings of the community and their evolution into world conferences will be examined. The vital role technology has played in the development of the community, from early mailing lists and websites to the current ACBS website, will be described. Finally, data revealing the growth of the community and its resources will be reported.

EO: 1) Learn the intellectual, philosophical, and practical reasons for the formation of ACBS as a distinct professional organization; 2) Learn about the history and growth of ACBS; 3) Consider the role technology can play in the establishment of scientific communities.

TA: Beginner, general

Contextual Psychology in the UK

Discussion - Contextual Psychology/ Research/ Practice

Room: 777

Chair: TONY BALAZS, Behavioural Learning Consultant, London, UK

Discussion Leader: BRIAN GLAISTER, Private Practice, U.K.

Psychology in the UK is dominated by the cognitive model and behavioural psychology is out on the fringes. Many features of contextual psychology may help us communicate with the cognitivists in ways that traditional behaviourists have not tried or managed to do. We will discuss how best to approach the questions of presenting contextual psychology to the mainstream, of increasing interest and involvement in it nationally, and ultimately of

influencing the way psychology is researched and practised in the UK.

Thursday Morning Workshops - 9:00-12:15

Putting Boldness into ACTION: Implications for Therapy Application and Valued Living

Workshop - ACT/ General

Room: 834

ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

One of the key features of Acceptance and Commitment Therapy (ACT) is the focus on living personal values. Valued living sometimes requires being bold. Boldness has a number of qualities, but is conceptualized here as willingness to experience while taking a risk that is consistent with a value. Putting boldness into action can promote movement in personal life directions and in therapy application. Translating boldness into the application of ACT with clients helps to solve one of the problems in learning a protocol based intervention. A potential problem in training therapists how to use ACT involves the rule-bound nature of following a protocol therapy. Getting stuck in verbal rules can hinder creativeness and authenticity. This workshop will address these issues as applied to personal values and application of ACT. Experiential exercises will be conducted.

EO: 1) Describe how boldness fits the ACT model of intervention; 2) Explore issues of confidence and authenticity as it applies to conducting ACT treatment; 3) Conduct boldness exercise designed to clarify how ACT is implemented in promoting valued living

TA: Intermediate, clinicians

Teaching ACT Principles More Directly

Workshop - ACT/ General

Room: 731

HANK ROBB, Private Practice, Oregon

This workshop will show participants how basic ACT principles can be taught more directly. The specific protocol will be demonstrated in the first hour. Participants will practice in the second hour and discuss their experiences in the last hour. An opportunity to move between second and third wave CBT will also be included.

EO: 1) Participants will be able help clients distinguish thoughts, images and sensations; 2) Participants will be able to show clients three different perspectives on thoughts, images and sensations; 3) Participants will be able to show clients that their thoughts, images and sensations need not directly control what they do with their hands, arms, feet and mouth

TA: All Mental Health Professionals interested in more directly teaching the basic ACT approach to clients

Clinical Situations from the Perspective of RFT

Workshop - RFT/ Basis of Applied Work

Room: 826

M. CARMEN LUCIANO-SORIANO, University of Almeria, Spain
NIKLAS TORNEKE, Independent Practice, Kalmar, Sweden

The aim of the workshop is to provide a basic understanding of psychopathology and clinical methods in ACT, from a functional-contextual standpoint. The workshop will have three parts. In the first part we will give an overview of some basic RFT concepts which are needed for understanding clinical problems/solutions. The second part is focused on going deeper into fusion/defusion and rule following. Both blessing and curse with these human abilities will be stressed. A special emphasis will be put on development of self-knowledge. The third part of the workshop will consist of using the covered theoretical material to understand central ACT techniques, especially values clarification and defusion. In this third part we expect the attendees to participate in the analysis with examples and suggestions as to what techniques should be discussed.

EO: 1) identify the clinical methods in ACT; 2) consider the basic findings from the RFT perspective; 3) analyze the clinical methods in ACT from the RFT perspective

TA: intermediate researchers and clinicians

ACT at War: Soldiers, Survivors, and Families Workshop - ACT/ Applications for Behavioural Disorders

Room: 739

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

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.

EO: Participants will be able to: 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

TA: Intermediate, Advanced, Clinicians, Researchers

ACT with Male Sexual Problems

Workshop - ACT/ Applications for Behavioural Disorders

Room: 744

RUSSELL HARRIS, Independent Practice, Australia

The aim of this half-day workshop is to illustrate how ACT can be used effectively with male sexual problems. The workshop focuses mainly on erectile dysfunction (ED), briefly on low libido (LL), and very briefly on premature ejaculation (PE).

The workshop will mainly be didactic, using power-point presentation – but it will also be very interactive, and at times participants will be asked to think through the aetiology of these sexual problems from an ACT perspective, and to suggest appropriate ACT interventions.

We will look at the physical and psychological components of ED, LL & PE, and how to identify when a physician's input is required. Then we will go through detailed step-by-step psychological treatment of ED using the ACT model (then briefly do the same for LL and PE).

Case studies will be used to illustrate the interventions, and handouts will be provided. By the end of the workshop, participants should be able to 1) identify the core pathological processes underlying ED, LL and PE, 2) adapt common ACT interventions to the treatment of these conditions

EO: 1) Learn about a model for treating male sexual dysfunction with ACT; 2) Learn the common physical and psychological factors responsible for male sexual problems; 3) Learn how to adapt, modify, and design new ACT interventions to suit a variety of male sexual dysfunction issues

TA: Clinicians (intermediate and advanced)

Thursday Morning - 10:45-12:15

A Contextual Cognitive Behavioral Approach to Chronic Pain: Eleven Years of Development and Data on Acceptance, Values, and Mindfulness

Invited Address - Behaviour Medicine

Room: Jeffrey Hall

LANCE MCCRACKEN, University of Bath, U.K.

Formal psychological approaches to chronic pain began with operant methods in the 1960's. These methods expanded with the development of the cognitive behavioral approach based during the early 1980's. Most work by psychologists in pain management today falls broadly within this cognitive behavioral tradition. In 1995 we began a series of

studies that, as we have come to hope, might integrate the operant and cognitive behavioral approaches of the past, and expand the methods of chronic pain treatment around a contextual and functional behavioral framework. We have now completed eleven studies of acceptance of pain, one study of values in chronic pain sufferers, have done two studies of treatment outcome, and have preliminary data on mindfulness. In retrospective and prospective studies of chronic pain sufferers acceptance of pain is associated with less depression, anxiety, avoidance, physical and psychosocial disability, and healthcare use. Results regarding patients' values suggest that patients who suffer with chronic pain hold important values but are not effectively guided by these values, and suffer greater emotional distress and disability as a result. These analyses also demonstrate significant unique roles of both acceptance and values-related variables in the prediction of patient functioning. Our treatment outcome studies support the effectiveness of contextual cognitive behavioral methods in highly distressed and disabled cases at levels that are both statistically and clinically significant, with average effects sized of .75 to .77, and several large effects sizes, at 1.0 or greater, for psychosocial disability, depression, and particular physical performances. Finally, our latest challenge has been to take on the measurement of mindfulness in sample of 90 individuals seeking treatment for chronic pain. Preliminary results show strong negative correlations ($r = -.50$ or higher) between mindfulness and measures of depression, fear and avoidance, and disability. This talk will briefly describe a contextual, ACT and mindfulness-based, approach to chronic pain, highlight key empirical findings over the years, and present our latest data.

EO: 1) See how an ACT-based framework can be applied to chronic pain; 2) Understand the place of this approach as an integration of previous behavioral and cognitive approaches; 3) Review the results of research supporting an ACT-based model of suffering and disability from chronic pain.

TA: Researchers/clinicians

All Shapes and Sizes: An Exploration of Body Image Acceptance and Eating Behaviour

Symposium - ACT/ Clinical/ Body image/ Eating behaviour

Room: 642

Chair: EMILY K. SANDOZ, University of Mississippi

Discussion: RHONDA MERWIN, Duke University Medical Center

Body Image Acceptance Questionnaire: Embracing the "Normative Discontent"

EMILY K. SANDOZ, University of Mississippi

Kelly G. Wilson, University of Mississippi

The significance of implicit attitudes in the maintenance of anorexia nervosa

Thomas Parling, Uppsala University, Sweden

MARTIN CERNVALL, Uppsala University, Sweden

Ata Ghaderi, Uppsala University, Sweden

Acceptance and Commitment Therapy (ACT) as an Intervention for Disordered Eating Among College Women

Adria Pearson, University of Nevada, Reno

VICTORIA M. FOLLETTE, University of Nevada, Reno

Linda Craighead, University of Colorado

Acceptance and Commitment Therapy for the Treatment of Obesity-related Stigma and Weight maintenance

JASON LILLIS, University of Nevada, Reno

Steven C. Hayes, University of Nevada, Reno

Kara Bunting, University of Nevada, Reno

Ainsley McPherson, University of Nevada, Reno

Developing contact with the present moment and self as context in a step wise manner: experiences from treatment of individuals with Anorexia Nervosa

THOMAS PARLING, Uppsala University, Sweden

A Comparison of Acceptance- and Control-based Strategies for Coping with Food Cravings: An Analog Study of Dieting

EVAN M. FORMAN, Drexel University

Kimberly Hoffman, Drexel University

Michael R. Lowe, Drexel University

Lynn Brandsma, Chestnut Hill College

James D. Herbert, Drexel University

Kathleen Marquez, Drexel University

Katherine McGrath, Drexel University

Ethan Moitra, Drexel University

Peter D. Yeomans, Drexel University

John A. Zebell, Drexel University

Negative thoughts and feelings about body shape and/or weight have frequently been associated with rigid and disordered eating behavior (Bruch, 1973; Fairburn & Cooper, 1984). Commonly referred to as negative body image, these thoughts and feelings have even been proposed to have a causal role in the development of disordered eating (Polivy & Herman, 2002), resulting in the focusing of interventions on the manipulation of these thoughts and feelings (Wilson, 2005). Another possibility is that negative body image is an extremely common and unsurprising, if not expected, outcome of being alive in Western culture. After all, Rodin, Silberstein, and Streigel-Moore (1985) identified body dissatisfaction twenty years ago as a "normative discontent." Further, it may be that the problem is not negative body image, but the pursuit of positive body image. If this is the case, than acceptance of thoughts and feelings regarding body and weight should be associated with healthier, more flexible patterns of eating and improved quality of life.

This session will explore, didactically and experientially, the ways that our histories cause inflexibility with regard to our bodies and the bodies of others. These papers will be presented on measuring body image acceptance and acceptance-based interventions with disordered eating. These papers will be interspersed with experiential exercises directed toward the acknowledgement and acceptance of negative body image and body-related stigma.

EO: 1) Provide general orientation to an ACT conceptualization of eating and its disturbance; 2) Review ACT-based assessment of behaviors thought

related to disordered eating; 3) Explore the application of ACT to disordered eating

TA: General, Beginner through Advanced

Measuring Process of Change in ACT

Research Discussion - ACT/ Assessment

Room: 728

Chair: JOSEPH CIARROCHI, University of Wollongong, Australia

JOSEPH CIARROCHI, University of Wollongong, Australia

KELLY G. WILSON, University of Mississippi

FRANK W. BOND, Goldsmiths College, University of London

The third wave of therapies, including ACT, have led to the creation of a new wave of measures, designed to capture what is unique about the new therapies. The present session will review what has been done so far, and uncover what still needs to be done.

On the practical side, the session will identify a set of measures that best captures the processes targeted in ACT, and can be recommended to practitioners.

The workshop will first discuss the assumptions of traditional measurement research, and how these assumptions might be reconciled (or not) with the assumptions underlying ACT (functional contextualism). Then, we will review current measures, as they relate to each of the core ACT processes. We will identify potential strengths and weakness, and what is missing. Finally, we will identify concrete directions for future research.

ACT and Skilled Performances

Symposium - ACT/ Empirical

Room: 822

Chair: JONATHAN WEINSTEIN, University of Mississippi

Working with Athletes Using ACT

REGINA THIERBACH, Centre of Integrative Psychotherapy and the Bavarian Academy for Psychotherapy, Munich, Germany

ACT and chess-players performances

FRANCISCO J. RUIZ-JIMÉNEZ, University of Almería

M. Carmen Luciano-Soriano, University of Almería

Applications of ACT for Athletes

TOBIAS LUNDRÉN, Uppsala University, Sweden

The purpose of this symposium is to examine how ACT can be harnessed to improved performance in competitively demanding environments. Applications of ACT to enhance athletic performance will be presented as well as data concerning an intervention for competitive chess players. The role of experiential avoidance as it appears in each of these setting will be presented alongside its complementary ACT-based intervention strategy.

EO: 1) Discriminate the role of experiential avoidance as it occurs in competitive settings and how it influences behaviour; 2) Apply ACT strategies to temper the aversive aspects of competitive settings; 3) Identify sources of aversive control in familiar competitive settings and ways to apply ACT to increased valued-living

TA: Beginner to Advanced

Relational Frame Theory Research on Analogical Reasoning, Coherence and the Interactions between Relational and Functional Context

Symposium - RFT/ Experimental/ Relational learning
Room: 736

Chair: SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Discussion Leader: GINA LIPKENS, Sancta Maria Psychiatric Hospital, Sint-Truiden, Belgium

An Experimental Study of Coherence from an RFT Perspective

M. José Garro Espin, University of Almería, Spain

SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Dermot Barnes-Holmes, NUI Maynooth

Generalized Transformation of Emotional Functions Based on Analogy

Francisca López Ríos, University of Almería, Spain

SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Hilario Mesa Manjón, University of Almería, Spain

Dermot Barnes-Holmes, NUI Maynooth

Research on Analogy between Multiple-Stimulus Relations

Hilario Mesa Manjón, University of Almería, Spain

SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Dermot Barnes-Holmes, NUI Maynooth

Effects of Different Variables on Cfunc and Crel Control in Simple Relational Networks

Silvia Lazo Sampér, University of Almería, Spain

SERAFÍN GÓMEZ MARTÍN, University of Almería, Spain

Dermot Barnes-Holmes, NUI Maynooth

This symposium presents experimental research within the context of Relational Frame Theory with important clinical implications. Three topics are researched, relational coherence, analogical reasoning and the interaction of functional and relational contexts within relational networks. In each paper experimental and clinical issues will be outlined.

EO: 1) Learn about basic RFT research with clinical implications; 2) Learn how to investigate cognitive phenomenon with RFT; 3) Learn about important clinical phenomenon.

TA: Intermediate, clinicians, researchers

Thursday Afternoon - 13:30-15:00

Exploring Facets of Mindfulness in Experienced Meditators

Invited Address - ACT/ General

Room: Jeffrey Hall

RUTH BAER, University of Kentucky

Previous research on the assessment of mindfulness suggests that mindfulness may consist of several component skills: observing, describing, acting with awareness, non-judging of inner experience, and non-reactivity to inner experience. In student samples, these facets of mindfulness have been shown to be related in interesting ways to many psychological variables, including emotional intelligence, emotion regulation, thought suppression, experiential avoidance, and openness to experience, among others. As mindfulness is often cultivated through the practice of meditation, it is important to examine the relationships between mindfulness and other variables

in samples with a wide range of meditation experience. This talk will summarize recent findings from a sample of experienced meditators who completed measures of mindfulness and a wide range of variables expected to be related to mindfulness and influenced by meditation practice. Questions to be addressed include the effects of meditation on psychological functioning and levels of mindfulness, and whether cultivation of mindfulness skills is responsible for the apparent beneficial effects of meditation practice.

EO: 1) Discuss recent finding in mindfulness; 2) Understand the beneficial effects of meditation; 3) Learn about the correlation of psychological functioning, mindfulness and meditation

TA: General

Spirituality, Values, and Metaphor--the Role of Spiritual Practice as a Motivative Augmental

Symposium - ACT/ Theoretical/ Functional contextualism

Room: 642

Chair: JONATHAN WEINSTEIN, University of Mississippi
Discussion Leader: AMY R. MURRELL, University of North Texas

Spirituality, Values, and Metaphor-- the Role of Spiritual Practice as a Motivative Augmental

JONATHAN WEINSTEIN, University of Mississippi
Chad E. Drake, University of Mississippi
Karen Kate Kellum, University of Mississippi
Kelly G. Wilson, University of Mississippi
Sonja J Hunter, California State University - Stanislaus

The Importance of Promoting Shared Societal Values

ANTHONY BIGLAN, Oregon Research Institute
The ART of Values in ACT
JOANNE DAHL, Uppsala University, Sweden

Some of the earliest theoretical work on relational stimulus control grew out of an impetus to understand the functions of Spiritual practice (Hayes, S.C., 1984). A particular feature of Spiritual practice concerns its power to influence behavior in such a way as to make it insensitive to direct contingencies, an outcome that potentially provides benefits to the culture but perhaps not to the individual. If spiritual practice is but a particular form of relational stimulus control, from a functional contextualist standpoint, how might these venerable spiritual and cultural traditions be harnessed to address contemporary problems? An experimental analysis of different spiritual phenomena may inform us of ways to befriend the challenge of living among clashing cultural traditions and their fallout—social categorization, stigma, and prejudice. The purpose of this symposium is to examine the potential of stories, allegories, and metaphors to enhance value-consistent living in the face of existential annihilation.

EO: 1) Discuss the functions of spiritual practice and how they can be viewed as a particular form of stimulus control; 2) Consider the importance of an experimental analysis of spiritual practices and their effects on behavior from a functional contextualistic perspective; 3) Examine data relevant to this

proposed analysis involving a social categorization task (i.e., IRAP) and an intervention based on a biblical allegory; 4) Propose alternative ways of exploring this phenomenon from a variety of perspectives and traditions

TA: Intermediate; Researchers

ACT for Traumatized Individuals: State of the Emerging Data

Symposium - ACT/ Empirical/ Trauma

Room: 728

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

ACT for Men and Women in Treatment for Military-Related PTSD

ROBYN D. WALSER, National Center for PTSD Research and TLC Consultation Services, California

The Relationship of Experiential Avoidance and PTSD: Empirical Findings and Clinical Implications

Kathleen M. Palm, Brown University, RI
VICTORIA M. FOLLETTE, University of Nevada, Reno

A Brief Intervention with Holdup Victims

GRAHAM TAYLOR, Independent Practice, Perth, Australia,
Chris Lee, Psychology Department, Murdoch University

Several clinical programs around the world have been working to apply ACT for the treatment of individuals who have experienced traumatic events. It has only been more recently that systematic data have been collected to support an avoidance based conceptualization of posttraumatic problems in living and the efficacy of ACT-based treatment approaches for PTSD and Acute Stress Disorder. This symposium will bring together researchers from around the globe to share their studies on 1) the role of avoidance in the experience of PTSD, 2) an ACT treatment of PTSD and Acute Stress Disorder in individual therapy, and 3) an ACT treatment for military veterans in group therapy for PTSD. It is hoped that this symposium will lead to the generation of future research goals related to ACT and PTSD.

EO: 1) Describe the role of avoidance in the development and maintenance of PTSD; 2) Identify targets for brief intervention with trauma survivors; 3) Describe the evidence for treatment of PTSD with ACT in a group therapy setting

TA: All levels, clinicians, researchers

ACT, Mindfulness, and Social Anxiety Disorder

Symposium - ACT/ Empirical/ Social anxiety

Room: 822

Chair: CHAD E. DRAKE, University of Mississippi

A Randomised Controlled Trial Comparing Acceptance and Commitment Therapy & Cognitive Behavioural Therapy for Social Anxiety Disorder

KRISTINA MOREN, Uppsala University, Sweden
CAMILLA WIWE, Uppsala University, Sweden
JoAnne Dahl, Uppsala University, Sweden

Acceptance and Commitment Therapy for Generalized Social Anxiety Disorder: A Pilot Study

Kristy L. Dalrymple, Brown Medical School
James D. Herbert, Drexel University
EVAN M. FORMAN, Drexel University

Mindfulness and Acceptance-Based Group Therapy for Social Anxiety Disorder

NANCY KOCOVSKI, Wilfrid Laurier University and Centre for Addiction and Mental Health, Canada
Jan Fleming, Centre for Addiction and Mental Health and University of Toronto
Anxiety Disorders Clinic
Neil Rector, Centre for Addiction and Mental Health and University of Toronto
Anxiety Disorders Clinic

Social Anxiety Disorder (SAD) is the third largest mental health problem in the world today and the largest among the anxiety disorders. There are several empirically validated Cognitive Behavioural Therapy (CBT) treatments available for SAD. However, many individuals do not respond to treatment or are still impaired or relapse post-treatment. The common denominator for most of these CBT treatments is to regard symptom reduction as the primary goal of treatment, and the therapy is usually focused on the client gaining control of anxiety, fear, and associated symptoms. Recently, treatments that focus on acceptance and mindfulness as opposed to control and symptom reduction, commonly referred to as third wave therapies, have emerged. This symposium contains three studies comparing ACT and related third wave therapies with CBT on the treatment of SAD.

EO: 1) Review the design of studies comparing treatment efficacy; 2) Identify distinguishing features of third-wave therapies; 3) Discuss the current status of psychotherapeutic effectiveness of treating SAD.

TA: Beginner/clinicians/researchers

Contextual Behavioural Philosophy

Symposium - Contextualism/ Philosophy

Room: 736

Chair: EMILY K. SANDOZ, University of Mississippi

Values in Utilitarianism and Functional Contextualism
MARK SISTI, Suffolk Cognitive-Behavioral, PLLC

Parallelisms and Similarities between Nietzsche's Philosophy and Acceptance and Commitment Therapy

ROGER M. VILARDAGA, University of Nevada, Reno
Steven C. Hayes, University of Nevada, Reno

The Case Against Foundationalism: Swearing Off Ontology One Day at a Time

KELLY G. WILSON, University of Mississippi

The assumptions that are used to generate and evaluate theory and knowledge inevitably guide the scientific endeavor in any discipline. It is rare, however, that these assumptions are clearly stated, which can lead to misunderstandings and unproductive debate across philosophical systems. This session will address the philosophical system on which ACT and RFT are based, Functional Contextualism, through comparison and contrast to other well-known philosophies.

EO: 1) Explore the role of values in Utilitarianism and Contextualism; 2) Compare and contrast the philosophy of Nietzsche and Functional Contextualism; 3) Explore the alternative to ontology

TA: General, Beginner through Advanced

Derived Relational Responding through Three Topics: Deductive Thought, Conditional Reasoning and Attributions in Problem-solving

Symposium - RFT/ Experimental/ Theoretical

Room: 834

Chair: SONSOLES VALDIVIA-SALAS, University of Almería

Discussion Leader: IAN STEWART, NUI Galway

Comparing the Latency of Response between Combinatorial, Mutual and Trained Relations: A RFT Account to the Three-term Problems

ISRAEL MANAS-MANAS, University of Almería

M. Carmen Luciano-Soriano, University of Almería

Conditional Reasoning, Human Logic, and Derived Relational Responding

FRANCISCO CABELLO-LUQUE, University of La Rioja

Dermot Barnes-Holmes, NUI Maynooth

M. Carmen Luciano-Soriano, University of Almería

Transfer and Change of Complex Stimulus Functions Regarding Locus of Control

J. Carmelo Visdómine, University of Almería

M. Carmen Luciano-Soriano, University of Almería

SONSOLES VALDIVIA-SALAS, University of Almería

José Ortega, National University of Distance Education, Spain
Olga Gutiérrez-Martínez, University of Granada

The papers in this symposium present an alternative behavioral account based on the concept of derived relational responding of different research topics typically investigated by basic psychologists. First, the findings of two experiments about deductive reasoning, one to basic level and another to applied level, are presented. Second, it is presented other experiment about conditional reasoning that supports an account of logical responding depending upon verbal relational functions brought by the relevant contextual cues. Lastly, a third experiment aimed at showing the actualization, transference and reversal of loci attributions and difficulty estimations in relation to a series of problem-solving situations is presented. The role of verbal relations and transformation of functions on every these basic phenomena, as well as some applied implications, are discussed.

EO: 1) Illustrate the design of experimental analogues for some of the topics in mainstream psychology; 2) Learn more about the applications of the RFT for the understanding of complex human behavior; 3) Consider the scope of research on verbal learning and responding

TA: intermediate and advanced researchers

Applied RFT: Language Training and more

Discussion/ Organizational Session

Room: 777

Chair: TONY BALAZS, Behavioural Learning Consultant, London, UK

Discussion Leader: IAN STEWART, NUI Galway

Language training for people with developmental disabilities is often hampered by a lack of behavioural understanding. Even within ABA, analysis and implementation are often very unsophisticated and may take no account of Skinner's analysis of verbal behaviour (VB). And of course VB is itself a pre- RFT analysis. Most experience of teaching language on

behavioural programmes is limited to very early skills. We will discuss how RFT can inform the teaching of both these basic, and more advanced, language skills in the developmentally delayed population. If time and interest allow, we will discuss RFT and teaching languages more generally.

Thursday Afternoon Workshops - 13:30-16:45

Case Conceptualization in ACT

Workshop - ACT/ General

Room: 731

PATRICIA BACH, Illinois Institute of Technology, IL
D. J. MORAN, Trinity Services, Joliet, IL

This workshop will provide a step-by-step framework for functionally conceptualizing client behaviour problems, and will discuss selection and application of specific ACT interventions. The workshop will also help attendees develop their own ACT consistent interventions, exercises, and metaphors.

The workshop will also discuss first order and second order therapeutic approaches, and help the attendees discriminate when to use the appropriate therapeutic intervention. This workshop will be based on content from the forthcoming publication *Case Conceptualization in Acceptance and Commitment Therapy*, (Moran and Bach, in preparation, New Harbinger).

Workshop Activities: 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.

EO: 1) Workshop participants will 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 behaviour analytic perspective; 2) Workshop participants will be able to conceptualize clinically relevant behaviours as functional response classes, and discriminate when they are amenable to an ACT approach; 3) Workshop participants will be able to select ACT interventions appropriate for addressing specific core principles; 4) Workshop participants will learn how to apply specific ACT interventions based on the case formulation; 5) Workshop participants will be able to distinguish Crel and Cfunc interventions and practice applying both types of interventions to specific problems; 6) Workshop participants will 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; 7) Workshop participants

will learn methods of assessing effectiveness of interventions

TA: This workshop is suitable to clinicians with novice to intermediate exposure to ACT who would like to learn how to apply ACT broadly. It is also suitable for participants who have attended ACT experiential workshops and would like to improve their skill in functional contextual case formulation and deciding when to apply specific ACT interventions.

ACT with Chronic Pain in Children and Adults

Workshop - ACT/ Behaviour Medicine

Room: 826

RIKARD K. WICKSELL, Astrid Lindgren Children's Hospital, Karolinska University Hospital, Stockholm
KEVIN VOWLES, Royal National Hospital for Rheumatic Diseases & University of Bath, UK
PATTI ROBINSON, Mountainview Consulting Group, Zillah, WA

To a large number of people, chronic pain results in major disabilities and decreased quality of life. A large number of studies indicate that CBT is effective for a wide range of pain related outcomes. However, the process by which it is effective is still rather unclear. Recently, an approach that promotes acceptance (e.g. ACT) of pain and distress has been suggested. In this workshop, it will be discussed how ACT can be applied in the work with chronic pain across various populations (children and adults) and settings (individual, group, outpatient, residential). Also, a model for integrating ACT into primary care settings will be described.

EO: 1) Learn how ACT can be applied in the treatment of patients with chronic debilitating pain; 2) Consider the application of ACT as a multi-disciplinary team approach

TA: Intermediate

ACT and DBT in the Treatment of Extreme Emotional Dysregulation: A Sequential Approach

Workshop - Contextual Therapies

Room: 739

JACQUELINE PISTORELLO, University of Nevada, Reno
SUSAN CLARKE, University of Southampton, UK

The facilitators will first compare and contrast ACT and DBT in terms of philosophical and applied domains, followed by a discussion of the use of ACT with severe emotional regulation. The specific topics within this area will include: deciding when to use ACT with these presentations, switching from DBT to ACT, incorporating ACT into DBT treatment, and identifying potential pitfalls of using ACT and one is also DBT-trained. The workshop facilitators will propose a sequential model of treatment of severe emotional dysregulation, starting out with DBT until client is out of DBT Stage I (chronic suicidality and self-injury) and then switching to ACT for Stage II work.

EO: 1) Know some of the commonalities and differences between ACT and DBT; 2) Know how to resolve apparent inconsistencies between these two approaches; 3) Be able to recognize factors that

might lend support for the use of ACT vs. DBT strategies with a particular case

TA: Advanced. This workshop is only for clinicians who have been trained in both ACT and DBT.

ACTing Therapeutically: Relational Frame Theory and ACT Processes in the Therapeutic Relationship

Workshop - RFT/ Basis of Applied Work
Room: 744

KARA BUNTING, University of Nevada, Reno
JASON LILLIS, University of Nevada, Reno

The therapeutic relationship has long been considered an important element of treatment. Some aspects of the ACT therapeutic stance have been addressed explicitly and in depth, others aspects may not have been as fully elucidated. For example, one assumption based in Relational Frame Theory that underlies the ACT work is that ordinary language processes, common to both therapist and client, can lead to psychopathology. The application of this assumption can result in leveling experiences in which a commonality between client and therapist may be used to facilitate the work. Other aspects of the therapeutic stance may be implicit in or consistent with the ACT work, but have not always been explicitly indicated. This workshop will address higher level implications of Relational Frame Theory and the Hexaflex model of ACT for the therapeutic relationship and their creative application in therapeutic practice.

This workshop will examine the relevance of relational frame theory and the Hexaflex model of ACT to the therapeutic relationship and explore how the resulting stance can be used creatively to affect change in therapy. This workshop will involve conceptual discussion, experiential exercises, and role plays.

EO: 1) Understand more fully how to approach the therapeutic relationship from an ACT stance; 2) Understand unique features of the ACT stance; 3) Understand common difficulties in finding and maintaining this stance; 4) Have tools for implementing this new knowledge and being able to discriminate the ACT stance; 5) Have strategies for getting "unstuck" in your own clinical work

TA: Intermediate to advanced clinicians

Thursday Afternoon - 15:15-16:45

Rival Theories, Flaming Listserves and Empirical Data: The Three-ACT Story of Whether Acceptance and Commitment Therapy is Anything New or Different

Invited Address - ACT/ General

Room: Jeffrey Hall

EVAN M. FORMAN, Drexel University

Both CBT and ACT lay out specific theoretical and even philosophical accounts of their respective perspectives. This invited address reviews the major similarities and differences that are apparent between the two approaches. In addition, it considers the recent heated listserve exchanges surrounding the question whether ACT is justified in its claims that it

offers something new and different from traditional CBT approaches. Points and counterpoints are considered, as is empirical evidence which speaks to differences in technique and mechanisms of action.

EO: 1) Understand how theoretical accounts of ACT and CBT differ from one another; 2) Understand recent controversies regarding conceptual and practical differences between ACT and CBT; 3) Learn about empirical evidence for differences between ACT and CBT

TA: General

It Is What It Is: Appreciating Whole, Complete, and Perfect in our Clients, Ourselves, and our Work

Invited Address - ACT/ General

Room: 642

AMY R. MURRELL, University of North Texas

As scientists and clinicians guided by functional contextualism, we study whole organisms interacting in and with their history and current events. From this perspective, behavior is dynamic and inextricably linked to the purpose it serves in particular contexts. By definition, then, behavior in the present moment is highly important. Internal and external events deemed abnormal in one moment may be considered the norm in another. Thus, it is not useful to label behavior or organisms as ubiquitously "bad" or "good." Successful prediction and influence of behavior are contingent upon functional assessment, and often result in this realization-it is what it is. Success, for a functional contextualist, is not about discovering the ultimate truth. It is about reaching some psychological end. We recognize, therefore, that the scientist or practitioner cannot be excluded from the analysis. This nonjudgmental and symbiotic relationship is reflected in the therapeutic stance taken in Acceptance and Commitment Therapy. A clinician doing ACT displays a radical trust that the client is capable of moving from unworkable solutions to effective and valued-driven activities. Such clinicians work from a posture that conveys that clients have everything that they need- that they are whole, complete, and perfect. Perfection does not refer to flawlessness, and this posture does not discount the need for external education and support. However, clinicians who see whole, complete, and perfect clients appreciate the extraordinary things of which all humans are capable; we do not attempt to rescue, convince, or fix clients from a one-up position. At times, this stance comes rather naturally. Other times, given that the clinician is human, it is very difficult. The same indirect learning processes that trouble clients affect clinicians. In the process of comparing and evaluating, many of us will doubt our abilities to make a difference and, indeed, doubt our worth altogether. We will lose faith in our clients' abilities. We will become disillusioned with respect to our work. Given that we are verbal and social beings, this is inevitable. In this talk, I will discuss my own struggles with, and lessons learned from, this stance. I will mention some ways in which I think we might

lessen the verbal and social control in our views of ourselves, our clients, and our work. Finally, I will talk about the broad implications that may result from this appreciation.

EO: 1) Learn how to recognize that we and our clients have what we need AND have work to do or need help; 2) Identify key components of the posture that is reflective of functional contextualism, RFT and ACT; 3) Develop further awareness of own role in research and treatment process and outcome

TA: All levels of training; Researchers and Practitioners

Using the ACBS web-site

Discussion Session and Tutorial - ACBS

Room: 728

JASON LUOMA, University of Nevada, Reno

ERIC FOX, Western Michigan University

This session will provide an overview of the ACBS website (contextualpsychology.org) and a step-by-step tutorial in using all the functions of the ACBS website. It will cover such topics as how to add and download documents, how to add webpages, how to become a member, how to best participate in the forums, how to use the blogging function, and other topics that will increase your ability to utilize the full interactivity of the website. Additional discussion will center around increasing the capacity of the website to build community and serve as a dissemination vehicle for third-wave technologies, research, and theory.

Using Acceptance and Existential Reinforcement with Involuntary Clients

Symposium - ACT/ Clinical

Room: 822

Chair: TOBIAS LUNDGREN, Uppsala University, Sweden

Existential reinforcement

JOANNE DAHL, Uppsala University, Sweden

Avoidance, Self-Seeking and Selflessness

TOBIAS LUNDGREN, Uppsala University, Sweden

Working ACT With FAP In Rigid And Chronic Patterns Of Behaviours

MARISA PÁEZ-BLARRINA, Spanish Cancer Association

M. Carmen Luciano-Soriano, University of Almería, Spain

Values from an RFT Perspective

IAN STEWART, NUI Galway

The aim of this symposium is to discuss and demonstrate a way of using operant psychology and ACT when clients have associated closeness to human beings with emotional pain and suffering. Presenters will discuss, develop and demonstrate concepts from ACT adjusted to the context of self-destructive female adolescents. Values from an RFT perspective, Existential reinforcement, selflessness, self seeking FAP combined with ACT will be presented as a way to help humans to engage in valued activities.

EO: Participants will learn: 1) how values can be conceptualized from a RFT perspective; 2) a model of reinforcement that includes values; 3) how to conceptualize and apply existential reinforcement in

the application of adolescents with self-destructive behaviour; 4) how ACT and FAP can be combined for clients with rigid patterns of behavior

TA: Beginner, Intermediate, Advanced

IRAP and Self-Relevant Stimuli

Symposium - RFT/ Empirical/ Theoretical

Room: 736

Chair/Discussion Leader: CHAD E. DRAKE, University of Mississippi

The Implicit Relational Assessment Procedure: Self-Esteem in Prisoners

Nigel Vahey, NUI Maynooth

DERMOT BARNES-HOLMES, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

Ian Stewart, NUI Galway

Claire Cullen, NUI Maynooth

Self-judgment and the Flexibility and Rigidity of Relational Responding

RHONDA MERWIN, Duke University Medical Center

The Implicit Relational Assessment Procedure: Assessing Self-Esteem in Young Children

GER SCANLON, NUI Maynooth

Dermot Barnes-Holmes, NUI Maynooth

Yvonne Barnes-Holmes, NUI Maynooth

The Implicit Relational Assessment Procedure (IRAP) has recently emerged as a means of assessing implicit relational terms among sets of stimuli. In this symposium, data will be presented from three studies examining implicit responding among self-relevant stimuli. The studies provide results from a diverse collection of participants (prisoners, clinical patients, and children).

EO: 1) Outline the methodology of IRAP research; 2) Discuss an RFT view of self and stigma; 3) Speculate about future directions in RFT research on self esteem

TA: Beginner/researchers

The History of ACT/RFT: Observations from an Eyewitness

Invited Address - ACT/ Foundations

Room: 834

ROBERT ZETTLE, Wichita State University

Historical, conceptual, philosophical, and empirical developments beginning in the early 1980s until the present that have contributed to the emergence of ACT and RFT and their interrelationship will be presented from a participant-observer perspective.

EO: 1) Learn about what processes, issues, and concerns were instrumental in the development of comprehensive distancing as a functional contextualistic approach to psychotherapy with verbally-skilled adults; 2) Learn about what processes, issues, and concerns were instrumental in the development of RFT as an alternative to Skinner's *Verbal behavior* in accounting for human language and cognition; 3) Learn about what processes, issues, and concerns were instrumental in RFT serving as the model of human language and cognition upon which contemporary ACT is based.

TA: All Audiences

-Thursday, 27 July 2006-

Thursday Afternoon Plenary - 17:00-18:00

ACBS Presidential Address: The Heart of ACBS

Room: Jeffrey Hall

Chair: STEVEN C. HAYES, University of Nevada, Reno
KELLY G. WILSON, University of Mississippi

ACBS was formed out of a coalescing need for a pragmatic science that speaks to the deepest of human concerns. As an emerging organization, ACBS has the potential to create a unique scientific community. We don't live forever, at least not this life. What lasts is our contribution. This means our intellectual contribution, but it means, every bit as much, the love we contribute. How do we create a science that is both robust and living? We are not aware of any good models of a scientifically oriented groups with this mission. There is no one who can tell us how to do it. I have been told that this is not possible. I refuse to accept that answer. If you are moved to do so, I will ask you to join us in the effort

to create a community that holds its humanity close as it performs its work.

EO: 1) identify the core issues that created the need for the formation of an organization for contextual behavioral science; 2) identify potential modifications to current behavioral science development models that might facilitate a more useful science of behavior; 3) identify reasons that the community of clinicians and basic scientists must work together to facilitate the production of a robust and relevant science of behavior

TA: Clinicians, researchers, all levels

Thursday Evening - 20:30

Follies

Guy's Bar, King's College London

See *Items of Note, Evening Events* section in the front of this program for more information.

Session Descriptions - Friday, 28 July

Friday Morning - 9:00-10:30

A Contextual Behavioural Approach to Emotion in Psychotherapy Supervision

Invited Address - ACT/ Training

Room: Jeffrey Hall

SONJA V. BATTEN, VA Maryland Health Care System and University of Maryland School of Medicine
Victoria M. Follette, University of Nevada, Reno

Topics of discussion for this invited talk are: 1) How important is the experience and expression of emotion in supervision to the ACT/FAP/DBT therapeutic process? 2) How do we assess and shape the ability of therapists in training to willingly experience and express emotion? 3) What are the constraints of the supervisory boundaries, and how do we distinguish supervision around topics that are emotional for the trainee from therapy? 4) How can supervisors model appropriate emotional experiencing and expression in supervision?

EO: 1) Discuss the theoretical basis for including emotions in the psychotherapy supervision process; 2) Identify the role of supervisor modeling of emotional expression in supervision; 3) Identify the factors that guide whether emotional content is more appropriate for supervision or the therapist's own therapy

TA: Clinicians, all levels, supervisors, trainees

The Nature and Impact of Acceptance

Symposium - ACT/ Empirical

Room: 642

Discussion Leader: AMY R. MURRELL, University of North Texas

Acceptance, Control and the Experience of Pain in Healthy Adults

EDMUND KEOGH, University of Bath & Royal National Hospital for Rheumatic Diseases, UK
Cate Barlow, University of Bath, UK
Charlotte Mounce, University of Bath, UK
Frank W. Bond, Goldsmiths College, University of London
Will Acceptance Make a Difference? The Role of Acceptance in Predicting Tinnitus Distress
VENDELA WESTIN, Linköping University, Sweden
Gerhard Andersson, Linköping University, Sweden

Avoid, Seek, and Accept: Behaviours Towards Emotions

RIKARD CALMBRO, Gothenburg University, Sweden
Using Session-by-Session Outcomes to Delineate Differential Mediating Mechanisms of Acceptance and Commitment and Cognitive Behavioural Therapies
EVAN M. FORMAN, Drexel University
Jason E. Chapman, Medical University of South Carolina
Peter D. Yeomans, Drexel University
James D. Herbert, Drexel University
Ethan Moitra, Drexel University
Katherine McGrath, Drexel University
Kimberly Hoffman, Drexel University
Kathleen Marquez, Drexel University

Acceptance of private events (and unchangeable external events) involves the active choosing of experience, without attempts to change its content (or

avoid). In the ACT model, this choice is often made in the service of one's values. There are now several correlational studies that show that increased acceptance, along with action, (as measured by the AAQ) is related to positive outcome. In addition, analogue component studies have shown that acceptance is related to increased tolerance for symptoms of anxiety and pain. This group of presentations will focus on the role of acceptance in various clinical presentations.

EO: 1) Evaluate the empirical evidence comparing acceptance to control; 2) Identify ways to investigate mediating mechanisms through outcome studies; 3) Discuss the role of acceptance in pain and tinnitus

TA: Intermediate (some familiarity with ACT); Practitioners and researchers, especially those interested in or conducting work on core ACT components/processes

ACT with People with Challenging Needs

Symposium - ACT/ Empirical

One Session

Room: 728

Discussion Leader: JULIEANN PANKEY, University of Nevada, Reno

Building the Psychological Resilience of Careers of People with Challenging Needs

STEVE NOONE, University of Wales, Bangor, UK
Richard P Hastings, University of Wales, Bangor, UK

ACT-oriented Horticulture Therapy for People with Intellectual Disabilities

CATHERINE ADAMS, University of Mississippi
Jonathan Weinstein, University of Mississippi
Jana Graham, University of Mississippi
Christal Gammage, University of Mississippi
Karen Kate Kellum, University of Mississippi
Kelly G. Wilson, University of Mississippi

Making a Group to be about Something – a Case of Valued Based Team Development

MAGNUS STALBY, Psykoloppartners W & W, Sweden

Individuals with disabilities face multiple challenges in adaptive living skills. Those with cognitive and physical impairments may have difficulty across domains, such as obtaining and maintaining employment and developing relationships/social skills. In this session, discussion will evolve around assisting these individuals with understanding values-based decisions, helping them defuse from tightly held thoughts or beliefs about what they may or may not be able to accomplish, creating workable solutions across daily living skills, and making commitments to action.

EO: 1) Understand how ACT technology can be applied with this population; 2) Learn about challenges/barriers clinicians may face when working with this population; 3) Learn how to integrate ACT into these individuals' existing support systems

TA: Clinicians interested in working with individuals with disabilities, all levels

DBT & ACT

Panel-Contextual Therapies

Room: 822

Chair: JACQUELINE PISTORELLO, University of Nevada, Reno
JACQUELINE PISTORELLO, University of Nevada, Reno
KELLY KOERNER, Private Practice, Seattle
SUSAN CLARKE, University of Southampton, UK

This will be an informal panel discussion about ACT and DBT. Each panelist will briefly describe her experience with both approaches, as well as any history, expectations, or concerns with combining or not combining ACT and DBT. After this short introduction, the floor will be open to the audience for questions.

Enhancing Effective Leadership with ACT and RFT

Invited Address - ACT/ Organizations

Room: 736

FRANK W. BOND, Goldsmiths College, University of London

Effective leaders generate excitement about working towards a common goal, and they can do this most successfully by acting in a way that is consistent with core ACT and RFT principles. This address discusses the behaviours that make a good leader, and it shows how ACT, RFT, and behaviour analysis can be used to establish and shape those effective leadership behaviours.

EO: 1) Learn what constitutes an effective leader; 2) Understand how ACT and RFT can promote successful leadership behaviours; 3) Learn which ACT techniques may be most effective when coaching leaders

TA: Intermediate, clinical, work psychology

ACT & Health Psychology

Discussion Group - ACT

Room: 777

Chair: JOSEPH CIARROCHI, University of Wollongong, Australia

The main purpose of this discussion is to identify the ACT and health psychology research being conducted worldwide, and to build collaborative links. We will discuss the possibility of forming a special interest group within the wider ACT community, and the possibility of sharing protocols and intervention materials. The session will also be a chance for like-minded researchers to plan future research together.

Friday Morning Workshops - 9:00-12:15

Experiential Skills Training via the Supported Role-play Method

Workshop - ACT/ General

Room: 834

RAINER SONNTAG, Psychiatrist, Olpe, Germany

The supported role-play method (SRPM) is an experiential skills training. Its goals are: (1) to integrate a more direct method of teaching how ACT may be used in therapy while at the same time preserving an experiential way of training; (2) to provide an opportunity to experiment with different ways of dealing with problematic therapeutic

situations in a safe environment; (3) to play with and exercise ACT specific skills with respect to concrete treatment cases in a group.

The procedure has two roots. One goes back to the psychoanalyst Michael Balint who devised a method to train general practitioners how to work with clients with psychological difficulties and attend more efficiently to the doctor-patient relationship. The second root is a paper by Rosenfarb Linehan (1989). Rather than training social skills by presenting predetermined topographies of appropriate social behaviours and giving instructions and performance feedback they devised a method to train clients through direct, experiential feedback without specifying particular topographies.

In the workshop participants are invited to present examples of difficult therapy situations which are ACTively examined in role-plays. The group supports the role-players through experiential feedback and suggestions on useful therapeutic moves.

EO: 1) to integrate a more direct method of teaching how ACT may be used in therapy while at the same time preserving an experiential way of training; 2) to provide an opportunity to experiment with different ways of dealing with problematic therapeutic situations in a safe environment; 3) to play with and exercise ACT specific skills with respect to concrete treatment cases in a group

TA: Clinicians with intermediate knowledge of ACT

Integrating ACT into Educational Systems

Workshop - ACT/ Social and Educational Issues

Room: 731

LESLIE J. ROGERS, University of Mississippi

Integrating ACT into educational systems poses a wide variety of obstacles for the practicing clinician. Oftentimes clinicians are faced with the complex dilemma of integrating conflicting systems and infusing an ACT consistent treatment model at both the individual and organizational level. Objectives of this workshop are to discuss and train special issues that arise when infusing ACT into the educational system.

EO: 1) Learn how to apply ACT model across varying clinical presentations in school settings; 2) Developing working alliances with teachers, parents; 3) Learn how to create ACT consistent behavioral plans

TA: Clinicians, researchers interested in integration of ACT into educational systems; intermediate, advanced

An ACT Approach to Empowering the Therapeutic Relationship

Workshop - ACT/ General

Room: 826

HEATHER PIERSON, VA Palo Alto Health Care System, CA

The Acceptance and Commitment Therapy (ACT) model can lead to more empowering therapeutic relationships whether the therapy being used is ACT or another modality. The ACT model of pathology and treatment can be applied to the therapeutic relationship at three different levels: the therapist, the

process, and the client. The level of the therapist involves the therapist's own personal history and reactions that are brought into the therapeutic interactions. The level of process involves the qualities of therapeutic interactions, and the level of the client involves the client's targeted processes. Using the ACT model of pathology, we will discuss how each element (i.e. experiential avoidance, cognitive fusion, fusion with conceptualized self, loss of contact with the present moment, and lack of valued action) creates barriers to an empowered relationship, and how ACT therapeutic elements (i.e. acceptance, defusion, self, present moment, values, commitment, and flexibility) help to overcome barriers and build more empowered relationships. The current workshop will involve walking through how each of the above elements is applied to the three levels. Examples, role-plays, and experiential exercises will also be used throughout the workshop to help illustrate and create a functional understanding of how to use ACT elements to empower therapeutic relationships. At the end of this workshop participants will be able to define, from an ACT perspective, what constitutes an empowered relationship. In addition, participants will have a better understanding of the role of each of the ACT elements in empowering the therapeutic relationship and be able to identify the barriers to that type of relationship from the ACT model.

EO: 1) Learn how to apply the ACT model of pathology and treatment to the therapeutic relationship; 2) Learn how to use the ACT model to create more empowered therapeutic relationships; 3) Be able to identify barriers to an empowered relationship from an ACT model

TA: Intermediate, clinicians

Differences and Similarities in the Third Wave Approaches to Self-destructive Behaviour

Workshop - Contextual Therapies

Room: 739

KARIN OVEFELDT, Uppsala University, Sweden
JOANNE DAHL, Uppsala University, Sweden
TOBIAS LUNDRÉN, Uppsala University, Sweden

With learning theory as a common underpinning, ACT and DBT approach clients with self-destructive behavior in different ways. This seminar aims to illustrate similarities and differences. Self-destructive behavior can take different forms like cutting, self-starvation, drugs, substance abuse, prostitution, self-blame and sabotaging important relationships. Specific cases will be illustrated in different ways to show how typical issues in this client group are conceptualized and treated with ACT and DBT methods. Role play, letters will be shown. This seminar will be experiential and participants will have the chance to experience and practice each therapy form.

EO: 1) learn how self-destructive behavior can be conceptualized and treated in ACT, DBT and a combined model of both; 2) what is different and what is common in the conceptualization and treatment of clients who present with self-destructive,

suicidal behavior and; 3) similarities and differences in the specific treatment of adolescents with self-destructive behavior within closed treatment settings.

TA: Intermediate

Defusion: A Skills Building Workshop

Workshop - ACT/ General

Room: 744

JASON LUOMA, Private Practice, Oregon
LINDSAY FLETCHER, University of Nevada, Reno

This workshop will attempt to improve attendees' skills at utilizing the core ACT process of defusion. Participants will further understand the process of defusion through a theoretical overview of defusion, a discussion of how defusion fits into ACT work from the beginning to end of treatment, and how defusion relates to the therapeutic relationship. Experiential exercises will help participants contact a defused space, while role plays will allow participants to try out and obtain feedback on new defusion techniques

EO: 1) Participants will improve their skill at utilizing the core ACT process of defusion; 2) Participants will better understand defusion at a conceptual level and better understand how to integrate defusion into other ACT processes; 3) Participants will have the experience of contacting a defused ACT space through experiential exercises.

TA: Beginner to Intermediate Clinicians

Friday Morning - 10:45-12:15

Personality Disorders, Psychological Inflexibility, Verbal Regulation and ACT: Theoretical/Functional Approach to Personality Development

Discussion - ACT/ Applications for Behavioural Disorders

Room: Jeffrey Hall

Discussion Leader: M. CARMEN LUCIANO-SORIANO, University of Almería, Spain
M. CARMEN LUCIANO-SORIANO, University of Almería, Spain
MARISA PÁEZ-BLARRINA, Spanish Cancer Association
SONSOLES VALDIVIA-SALAS, University of Almería, Spain
OLGA GUTIÉRREZ-MARTÍNEZ, University of Granada, Spain
J. CARMELO VISDÓMINE, University of Almería, Spain

This presentation aims to discuss the implications of a functional approach to the formation of personality, involving the formation of flexible and cognitive schemata. In this context, the rigid pattern of behaving which characterized all personality disorders will be analyzed as problematic verbal regulation with emphasis in values and how they are established. This analysis extends to see the functional relationship between several of the personality disorders identified as different in the DSM system or the taxonomy of mental disorders. This approximation will be evaluated according to its value for prevention and treatment. In the treatment area, the implication of a functional analysis of personality disorders will be seen to understand what might be the difficulty in treatment disorders identified in axis I but having detected the presence of axis II. An approach as ACT could be very well adjusted to such analysis and

would provide benefit to contextually alter the whole class of behavior into a flexible one. We present the case for improving benefits by incorporating FAP and ACT.

ACT and Substance Abuse

Symposium - ACT/ Empirical

Room: 642

Chair: STEVEN C. HAYES, University of Nevada, Reno
Acceptance and Commitment Therapy for Substance Abuse and Substance Abuse

Therapists: A Brief Review of the Evidence

STEVEN C. HAYES, University of Nevada, Reno

A Preliminary Investigation of Acceptance and Commitment Therapy as a Treatment for Marijuana Dependence in Adults

Michael P. Twohig, University of Nevada, Reno
Deacon Shoenberger, University of Nevada, Reno
STEVEN C. HAYES, University of Nevada, Reno

Psychotherapy for methamphetamine abuse: an empirical comparison of relapse prevention skills training and acceptance and commitment therapy

MATTHEW F. SMOUT, Drug and Alcohol Services South Australia

Marie C. Longo, Drug and Alcohol Services South Australia
Sonia Kransikow, Drug and Alcohol Services South Australia
Rinaldo Minniti, Drug and Alcohol Services South Australia
Sharon Cahill, Drug and Alcohol Services South Australia
Jason M. White, University of Adelaide

The Workability of Methadone Detoxification: Can ACT Help?

ANGELA L. STOTTS, University of Texas-Houston Medical School

Akihiko Masuda, University of Texas-Houston Medical School
Kelli L. Wright, University of Texas-Houston Medical School
William D. Norwood, University of Houston-Clear Lake

The purpose of this session is to examine some of the recent research on ACT for substance abuse.

EO: 1) Learn how ACT is being applied to substance abuse; 2) Learn how the ACT model can be used to foster specific aspects of the recovery process; 3) Learn ways to avoid problems in using ACT for substance abuse problems

TA: Beginner and above

The Integration of ACT with CBT (90 min. Mini-workshop)

Workshop - ACT/ CBT/ Clinical

Room: 728

JOSEPH CIARROCHI, University of Wollongong, Australia
HANK ROBB, Private Practice, Oregon
RHONDA MERWIN, Duke University Medical Center
KARA BUNTING, University of Nevada, Reno

ACT and traditional CBT often start from different theoretical and philosophical positions, and these differences can appear irreconcilable. In this workshop, we illustrate how the two approaches might be fruitfully united. We argue that methods of either approach can be used together as long as the methods are driven by a common philosophical framework (functional contextualism) and a common theoretical framework (relational frame theory). The majority of the workshop will be spent engaging

in role-play exercises that allow the participants to experience the difference between an ACT and a traditional CBT intervention, and to practice integrating the two.

EO: 1) Learning how to integrate skills derived from ACT and traditional CBT; 2) Learning how to apply a philosophical and theoretical framework (relational frame theory) in clinical practice; 3) Developing expertise in delivering ACT based interventions

TA: Intermediate

Health and Social Problems Treated by Contextual Therapies

Symposium - Contextual therapies/ Clinical/ Case study

Room: 822

Chair: LAURA C. SANCHEZ-SANCHEZ, University of Almería, Spain

Application of a Brief ACT-based Treatment to Quit Smoking: A Case Study

MONICA HERNANDEZ-LOPEZ, University of Valladolid
M. Carmen Luciano-Soriano, University of Almería
Jesús Gil, University of Almería

A Case Study of Intimate Partner Violence by Contextual Therapies

ISRAEL MANAS-MANAS, University of Almería
Laura Sánchez-Sánchez, University of Almería, Spain

Acceptance and Commitment Therapy on Muscular Atrophy: Case Study

LAURA C. SANCHEZ-SANCHEZ, University of Almería, Spain
Israel Manas-Manas, University of Almería

Hypersexual Behaviour in a Multiple Sclerosis Patient Treated with Acceptance and Commitment Therapy

LAURA C. SANCHEZ-SANCHEZ, University of Almería, Spain

This symposium aims to show the results of four case studies that were treated by contextual therapies. The case studies were: an Application of a Brief ACT-based Treatment to Quit Smoking; one case study of Intimate Partner Violence (IPV) treated by contextual therapies; one adult with Spinal Muscular Atrophy (SMA) and another case of Hypersexual Behaviour in a Multiple Sclerosis Patient both treated by an ACT intervention.

This data is an example of the effectiveness of contextual therapies and of the expansion of their application to different problems of health and other kinds of problems, such as Intimate Partner Violence, that is nowadays considered as an important public health problem and a serious social problem.

EO: 1) Application of ACT to several social health problems; 2) Links between different contextual therapies; 3) Making new protocols for specific disorders

TA: Students, researchers, clinicians, etc.

Friday Afternoon Plenary - 13:30-15:30

Creating a Home: Who are We, What do We Want to Be???

Panel & Community Meeting

Room: Jeffrey Hall

Chair: KAREN KATE KELLUM, University of Mississippi

- Friday, July 28, 2006

DERMOT BARNES-HOLMES, NUI Maynooth
STEVEN C. HAYES, University of Nevada, Reno
KELLY G. WILSON, University of Mississippi
M. CARMEN LUCIANO-SORIANO, University of Almería, Spain

The purpose of this session is to provide a venue that will allow all participants the opportunity to contribute

to the development of ACBS. Panelists will present the values and various visions for the future of the group. The community will be encouraged to comment and provide alternative views.

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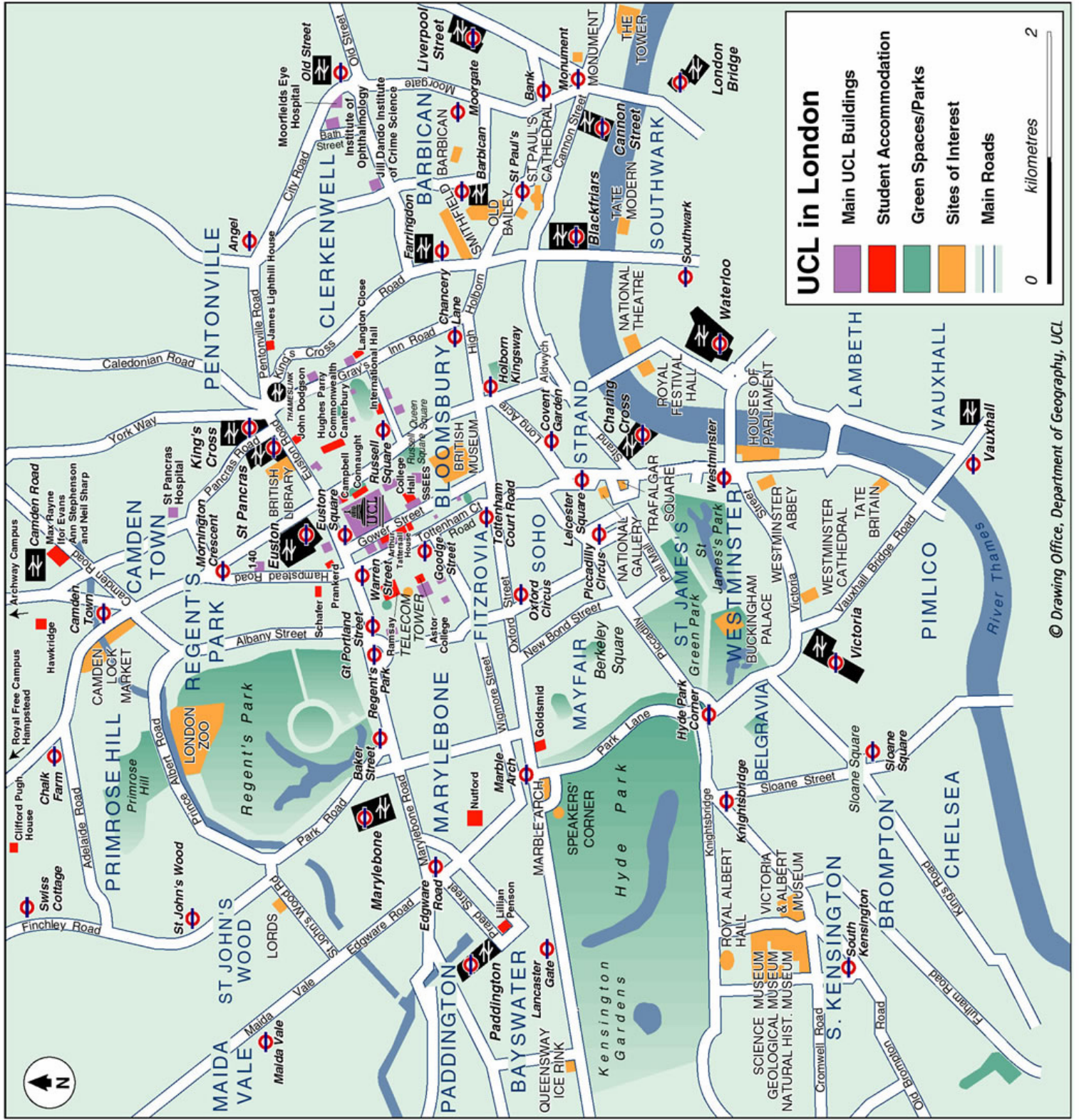
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