

Acceptance and Commitment Therapy as a Treatment for Anxiety and Depression: A Review



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KEYWORDS

- Acceptance and commitment therapy • ACT • Anxiety • Depression
- Psychological flexibility

KEY POINTS

- Acceptance and commitment therapy (ACT) is a modern form of cognitive behavioral therapy based on a distinct philosophy (functional contextualism) and basic science of cognition (relational frame theory).
- This article reviews the core features of ACT's theoretic model of psychopathology and treatment as well as its therapeutic approach. It then provides a systematic review of randomized controlled trials (RCTs) evaluating ACT for depression and anxiety disorders.
- Summarizing across a total of 36 RCTs, ACT appears to be more efficacious than waitlist conditions and treatment-as-usual, with largely equivalent effects relative to traditional cognitive behavioral therapy. Evidence from several trials also indicates that ACT treatment outcomes are mediated through increases in psychological flexibility, its theorized process of change.

Acceptance and commitment therapy (ACT)¹ is part of a larger research approach called contextual behavioral sciences (CBS). Those with a CBS focus to their work generally adhere to a behavior-analytic theoretic orientation, and as such have a strong interest in the basic science that informs the techniques used in therapy. Behavior analysis traditionally focused on the use of contingency management procedures to modify overt actions, and did not have a conceptualization of the role of cognition other than it being another form of behavior that was reinforced by the verbal community.² This differs from CBS in that the most active line of basic research is a behavioral account of language and cognition called relational frame theory (RFT).³ RFT has been an active line of research since the 1970s, when it was called stimulus

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equivalence.⁴ Since that time, RFT research has expanded and provides a method to study language and cognition, and inform behavioral interventions. To put it simply, ACT as described in this article, is modern behavior analysis applied to clinical issues including anxiety and depression. This article reviews the foundations of ACT, its theoretic model of psychopathology and treatment, and the empirical evidence for ACT as a treatment of anxiety and depressive disorders.

FOUNDATIONS OF ACCEPTANCE AND COMMITMENT THERAPY

Contextual Behavioral Science

CBS references a specific approach to science grounded in functional contextualism and behavior analysis. CBS focuses on the role of context in understanding and influencing human behavior, with a reticulated approach that integrates basic and applied scientific activities. A book-length review of CBS exists.⁵

Functional Contextualism

Clarifying philosophic assumptions is critical for ensuring the coherence and effectiveness of a program of research,⁶ as well as understanding differences between therapeutic approaches.⁷ ACT as a part of CBS adopts the core assumptions of functional contextualism, which are generally consistent with common assumptions in behavior analysis.^{8,9} Functional contextualism is a pragmatic world view in that it defines truth with regard to success in achieving stated goals, which in the case of *functional* contextualism are prediction and influence of behavior. From this perspective, scientific activities and analyses are “true” in so far as they help to *both* reliably predict (understand) behavior and guide how to influence (change) behavior. This diverges from some alternate philosophic stances in which correspondence between a model and the world as it actually is would define a “true” analysis.⁸

The unit of analysis in functional contextualism is the organism interacting in and with a context (defined currently and historically). This means that analysis of behavior must include consideration of context in which it occurs. Although this single unit of the “act in context” can be parsed out into components, this is done with awareness that these parts cannot be fully understood independently, but rather are distinguished in so far as it helps serve prediction and influence.

This emphasis on analyzing the “act in context” for the purpose of prediction and influence has notable implications for the scientific approach, theory, and even specific clinical methods used in ACT. To have an analysis directly inform how to influence behavior, it needs to include identification of variables that can be directly manipulated. This perspective provides the foundation for ACT’s approach to private events such as cognition and emotion. Rather than seeking to target specific cognitions and emotions to alter their downstream effects on other behaviors (eg, restructuring self-critical thoughts to decrease depressed mood and increase social activation), ACT seeks to alter the context in which these behaviors occur. This is sometimes referred to as a “decoupling” effect¹⁰ in that ACT alters the context of relating to internal experiences such that they have less influence on behavior (eg, self-critical thoughts are noticed as just thoughts, while one chooses to engage in social activities).

Another example of the implications of functional contextualism for ACT is the strong emphasis on integrating basic science. This is why ACT is aligned specifically with behavior analysis and a behavioral account of cognition, which similarly emphasize the development of basic principles that support prediction and influence of behavior and consideration of manipulable context/behavior relations.

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