

CHAPTER 1

The Human Challenge

When you're going through hell, keep going!

—Winston Churchill

It Ain't Easy to Be Happy

Life is both amazing and terrible. If we live long enough, we will experience joyful success and spectacular failure, great love and devastating loss, moments of wonder and bliss and moments of darkness and despair. The inconvenient truth is that almost everything that makes our life rich, full, and meaningful comes with a painful downside. And unfortunately, what this means is that it's hard to be happy for long. Heck, it's hard to be happy for *short*. The fact is, life is tough, and it doles out plenty of pain for every one of us. And one of the main reasons for this (as we'll soon explore) is that the human mind has evolved in such a way that it naturally creates psychological suffering. So basically, if we live long enough, we're all going to experience a whole lot of hurt.

Hmmm. I guess that's not the most optimistic of book openings. Is it really that bleak? Is there nothing we can do about this miserable state of affairs? Should we give up on life and throw ourselves into a pit of nihilistic despair?

Well, as you've probably guessed, the answer to all those questions is no. Luckily for us, we have acceptance and commitment therapy (ACT) to show us a way forward in the face of life's many hardships. ACT gets its name because it teaches us how to reduce the impact and influence of painful thoughts and feelings (acceptance) while simultaneously taking action to build a life that's rich, full, and meaningful (commitment). And in the pages that follow, I have one primary aim: to take the complex theory and practice of ACT and make it simple, accessible, and enjoyable.

What Is ACT?

We officially say ACT as the word “act” and not as the initials A-C-T. And there’s a good reason for this. At its core, ACT is a behavioral therapy: it’s about taking action. But not just any old action. It’s about action guided by your core values—behaving like the sort of person you want to be. What do you want to stand for in life? What really matters, deep in your heart? How do you want to treat yourself, others, and the world around you? What do you want to be remembered for at your funeral?

ACT gets you in touch with what really matters in the big picture: your heart’s deepest desires for how you want to behave and what you want to do during your brief time on this planet. You then use these values to guide, motivate, and inspire what you do.

And it’s also about “mindful” action: action that you take consciously, with full awareness—open to your experience, and engaging in whatever you’re doing. The aim of ACT is to increase one’s ability for mindful, values-guided action. The technical name for this ability is *psychological flexibility*. We’ll explore this term in more depth soon, but first let’s look at the aim of ACT in lay terms.

Where Did ACT Come From?

ACT was created by Professor Steven C. Hayes in the mid-1980s. Steve’s colleagues Kelly Wilson and Kirk Strosahl developed it further. It evolved from a field of psychology called *behavior analysis* and is based upon a behavioral theory of cognition known as *relational frame theory* (RFT). Now I don’t know about you, but when I first discovered ACT, I couldn’t believe that such a spiritual, humanistic model came out of *behaviorism*. I thought behaviorists treated humans like robots or rats, that they had no interest in thoughts and feelings. Boy, was I wrong! I soon discovered there are quite a few different schools of behaviorism, and ACT comes from one known as *functional contextualism*. (Just rolls off the tongue, doesn’t it?) And in functional contextualism (try saying it ten times very fast), we are extremely interested in people’s thoughts and feelings!

ACT is part of the so-called “third wave” of behavioral therapies—along with dialectical behavior therapy (DBT), mindfulness-based cognitive therapy (MBCT), compassion focused therapy (CFT), functional analytic psychotherapy (FAP), and several others—all of which place a major emphasis on acceptance, mindfulness, and compassion, in addition to traditional behavioral interventions.

What Is the Aim of ACT?

In lay terms, the aim of ACT is to maximize human potential for a rich and meaningful life, while effectively handling the pain that inevitably goes with it.

You may be wondering: does life *inevitably* involve pain? In ACT, we assume it does. No matter how wonderful life is, we’ll all experience plenty of frustration, disappointment, rejection, loss, and failure. And if we live long enough, there’ll be illness, injury, and aging. Eventually, we’ll need to face

our own death, and before that day comes, we'll witness the deaths of many loved ones. And as if all that's not enough, the fact is that many basic human emotions—normal feelings that each and every one of us will repeatedly experience throughout our lives—are inherently painful: fear, sadness, guilt, anger, shock, disgust, and so on.

But it doesn't stop there. Because on top of all that, we each have a mind that can conjure up pain at any moment. Wherever we go, whatever we do, we can experience pain instantly. In any moment, we can relive a painful memory or get lost in a fearful prediction of the future. Or we can get caught up in unfavorable comparisons (*Her job is better than mine*) or negative self-judgments (*I'm too fat, I'm not smart enough*, and so on).

Thanks to our minds, we can even experience pain on the happiest days of our lives. For example, suppose it's Susan's wedding day, and all of her friends and family are gathered together to honor her joyful new union. She is blissfully happy. And then she has the thought *I wish my father were here*—and she remembers how he committed suicide when she was only sixteen years old. Now, on one of the happiest days of her life, she's in pain.

And we're all in the same boat as Susan. No matter how good our quality of life, no matter how privileged our situation, all we need do is remember a time when something bad happened, or imagine a future where something bad happens, or judge ourselves harshly, or compare our life to someone else's that seems better, and instantly, we're hurting.

Thus, thanks to the sophistication of the human mind, even the most privileged of lives come with plenty of pain. And unfortunately, most of us do not handle pain very effectively. All too often when we experience painful thoughts, feelings, and sensations, we respond in ways that are self-defeating or self-destructive in the long run.

In summary, then, the big challenges we all have to face in life are:

- A. Life is difficult.
- B. A full human life comes with the full range of emotions, both pleasant and painful.
- C. A normal human mind naturally amplifies psychological suffering.

So How Can ACT Help?

ACT aims to maximize human potential for a rich and meaningful life by:

- helping us to clarify what's truly important and meaningful to us—that is, clarify our values—and use that knowledge to guide, inspire, and motivate us to do those things that will enrich and enhance our life; and
- teaching us psychological skills (“mindfulness” skills) that enable us to handle difficult thoughts and feelings effectively, engage fully in whatever we are doing, and appreciate and savor the fulfilling aspects of life.

Why Does ACT Get a Bad Rap?

Have you ever been accused of something you weren't guilty of? This happens to ACT all the time. I've heard many people say it's complex and confusing—and even that you need a high IQ to understand it. Well, if I were the defense lawyer for the ACT model, I'd say, “Not guilty, your honor!” I think there are two main reasons why ACT has gained this unfortunate reputation. One is because of the theory that underlies ACT: relational frame theory (RFT). We won't be covering RFT in this book because it's quite technical and takes a fair bit of work to understand, whereas the aim of this book is to welcome you into ACT, simplify the main concepts, and get you off to a quick start.

The good news is you can be an effective ACT therapist without knowing anything about RFT. If ACT is like driving your car, RFT is like knowing how the engine works: you can be an excellent driver while knowing absolutely nothing about the mechanics. (Having said that, many ACT therapists say that when they understand RFT, it improves their clinical effectiveness. Therefore, if you're interested, appendix C will tell you where to go for more information.)

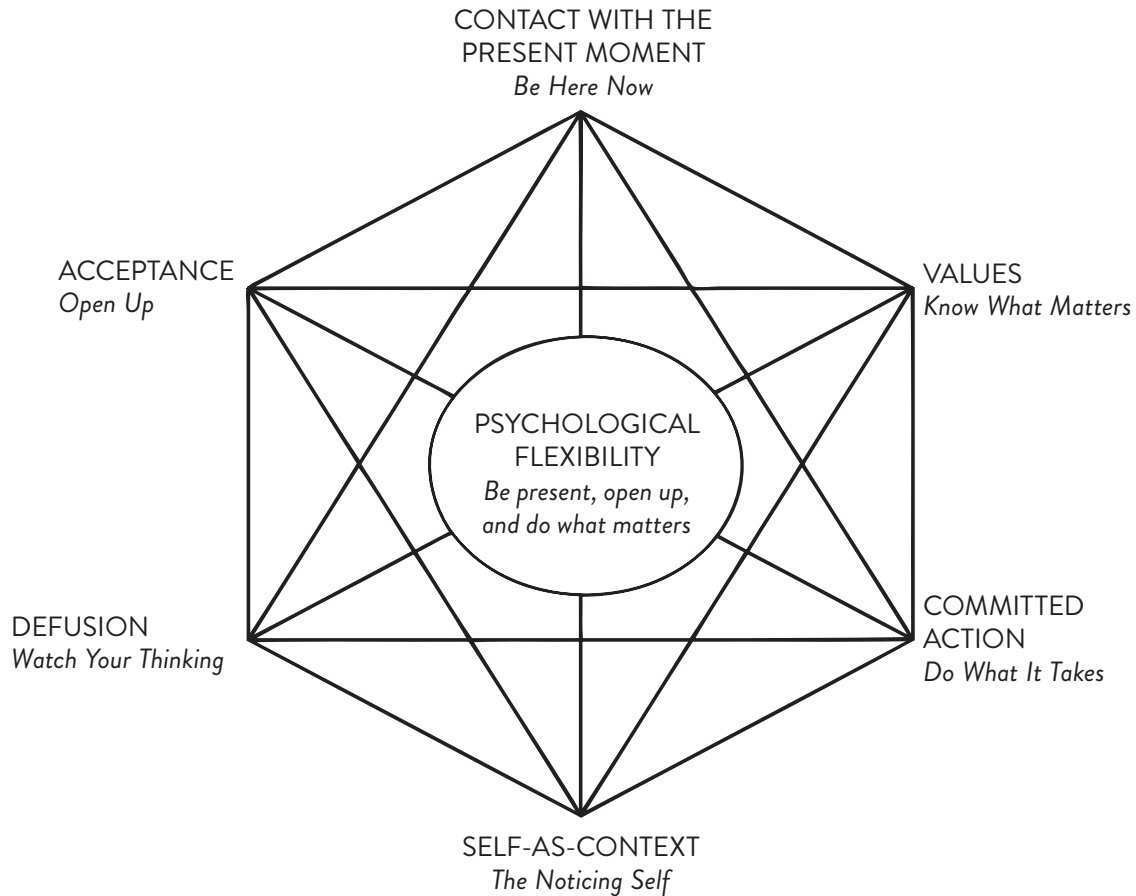
The other big reason why people see ACT as complex is that it is a nonlinear model of therapy. It's based around six core processes, and you can work with any one of them at any time in any session with any client. And if you ever hit a roadblock with one process, you can simply switch to another. This makes ACT very different from linear models of therapy, where you follow a set sequence: first you do step A, then step B, then step C, and so on.

ACT's nonlinearity comes with a big upside: it gives you incredible flexibility as a therapist. If you get stuck at one point, you can move to another process; then when you think the time is right, you can head back to where you left off. The downside to this nonlinearity is that it makes ACT harder to learn initially than “follow-the-steps” models.

But despair not! In recent years, this task has gotten a whole lot easier, thanks to a simple but powerful tool called the *choice point*, which I'll introduce soon. First, though, let's quickly zip through the six core processes.

The Six Core Therapeutic Processes of ACT

The six core therapeutic processes in ACT are *contacting the present moment*, *defusion*, *acceptance*, *self-as-context*, *values*, and *committed action*. Before we go through them one by one, take a look at the diagram below, which is lightheartedly known as the ACT “hexaflex.”



The ACT Hexaflex

Let's take a look now at each of the six core processes of ACT.

Contact with the present moment (be here now). *Contacting the present moment* means flexibly paying attention to our experience in this moment: narrowing, broadening, shifting, or sustaining your focus, depending upon what's most useful. This may involve consciously paying attention to the physical world around us or the psychological world within us, or both at the same time, connecting with and engaging fully in our experience.

Defusion (watch your thinking). *Defusion* means learning to “step back” and separate or detach from our thoughts, images, and memories. The full technical term is *cognitive defusion*, but usually we just call it defusion. We step back and watch our thinking instead of getting tangled up in it. We see our thoughts for what they are—nothing more or less than words or pictures. We hold them lightly instead of clutching them tightly. We allow them to guide us, but not to dominate us.

Acceptance (open up). *Acceptance* means opening up and making room for unwanted private experiences: thoughts, feelings, emotions, memories, urges, images, impulses, and sensations. Instead of fighting them, resisting them, running from them, we open up and make room for them. We allow them to freely flow through us—to come and stay and go as they choose, in their own good time (if and when this helps us to act effectively and improve our life).

Self-as-context (the noticing self). In everyday language, there are two distinct elements to the mind: a part that thinks and a part that notices. Usually when we talk about “the mind,” we mean that part of us that is thinking—generating thoughts, beliefs, memories, judgments, fantasies, plans, and so on. We don’t usually mean “the part that notices”: that aspect of us that is aware of whatever we’re thinking, feeling, sensing, or doing in any moment. In ACT, the technical term for this is *self-as-context*. We often don’t explicitly label self-as-context with clients—but if and when we do, we usually call it the “noticing self” or “observing self” or simply “the part of you that notices.” (Note: less commonly, self-as-context can also refer to a process called “flexible perspective taking.” Don’t concern yourself with this for now; we’ll look at it later.)

Tricky Terminology Defusion, acceptance, self-as-context, and contacting the present moment (also called “flexible attention”) are the four core mindfulness processes of ACT. So whenever you encounter the term “mindfulness” in ACT, it could be referring to any or all of these processes, in any combination.

Values (know what matters). What do you want to stand for in life? What you want to do with your brief time on this planet? How do you want to treat yourself, others, and the world around you? *Values* are desired qualities of physical or psychological action. In other words, they describe how we want to behave on an ongoing basis. We often compare them to a compass because they give us direction and guide our life’s journey.

Committed action (do what it takes). *Committed action* means taking effective action, guided by our values. This includes both physical action (what we do with our physical body) and psychological action (what we do in our inner world). It’s all well and good to know our values, but it’s only through putting them into action that life becomes rich, full, and meaningful.

And as we take this action, a wide range of thoughts and feelings will show up, some of them pleasurable and others very painful. So committed action means “doing what it takes” to live by our values, even when that brings up difficult thoughts and feelings. Committed action involves goal setting, action planning, problem solving, skills training, behavioral activation, and exposure. It can also include learning and applying any skill that enhances and enriches life—from negotiation, communication, and assertiveness skills to self-soothing, crisis-coping, and mindfulness skills.

Psychological Flexibility: A Six-Faceted Diamond

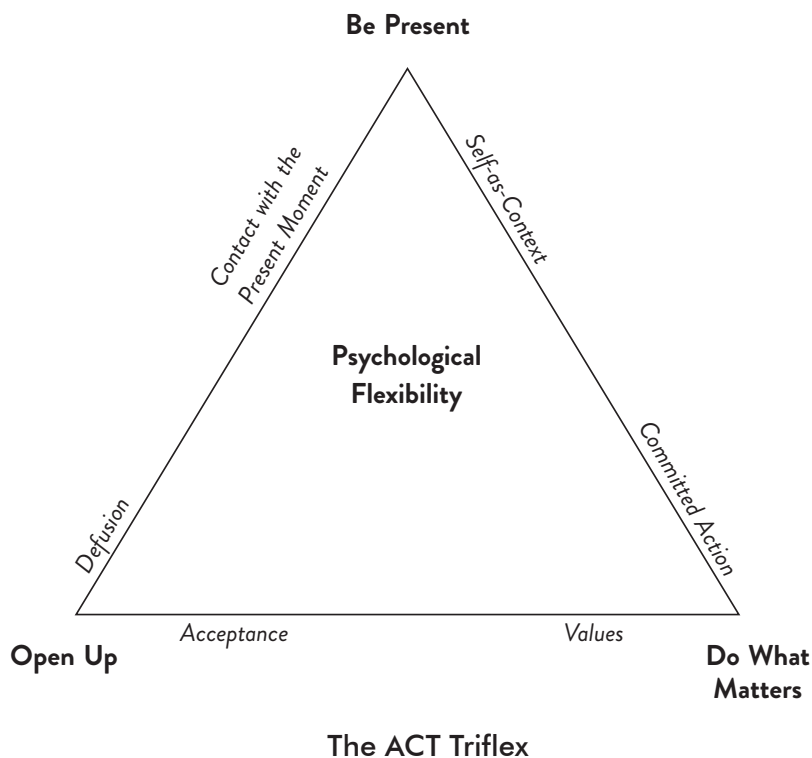
The six core processes of ACT aren't separate. They're like six facets of a diamond, and the diamond itself is psychological flexibility: the ability to act mindfully, guided by our values. The greater our psychological flexibility—our capacity to be fully conscious, to open to our experience, and to act guided by our values—the greater our quality of life.

How so? Because we can respond far more effectively to the problems and challenges life inevitably brings. Furthermore, when we engage fully in life and allow our values to guide us, we develop a deep sense of meaning and purpose and we experience a sense of vitality.

We use the word “vitality” a lot in ACT, and it's important to recognize that vitality is not a feeling; it is a sense of being fully alive and embracing the here and now, regardless of how we may be feeling in this moment. We can even experience vitality on our deathbed or during extreme grief because “There is as much living in a moment of pain as in a moment of joy” (Strosahl, Hayes, Wilson, & Gifford, 2004, p. 43).

The ACT Triflex

The six core processes can be lumped together into what I call the *triflex* (because it sounds more impressive than the *triangle*). The triflex comprises three functional units, as shown in the figure below.



Self-as-context (a.k.a the noticing self) and contacting the present moment both involve flexibly paying attention to and engaging in your here-and-now experience (in other words, “Be present”).

Defusion and acceptance are about separating from thoughts and feelings, seeing them for what they truly are, making room for them, and allowing them to come and go of their own accord (in other words, “Open up”).

Values and committed action involve initiating and sustaining life-enhancing action (in other words, “Do what matters”).

So we can describe psychological flexibility as the ability to “be present, open up, and do what matters.”

Now that you have a sense of the six core processes and how we can chunk them into three larger units, I want to introduce you to my all-time-favorite ACT tool, which brings them all together in an easy-to-understand and simple-to-use format.

Welcome to the Choice Point

When I wrote the first edition of *ACT Made Simple* in 2009, the choice point didn’t exist. It was only in 2013 that I cocreated this tool with my colleagues Joe Ciarrochi and Ann Bailey (for the book we were writing on an ACT approach to weight loss: *The Weight Escape* [Ciarrochi, Bailey, & Harris, 2014]). Since then, I’ve fallen in love with the choice point and I now make it the central tool in all my training. Why? Because it gives you and your clients a simple map to follow, while retaining the great flexibility of the ACT model.

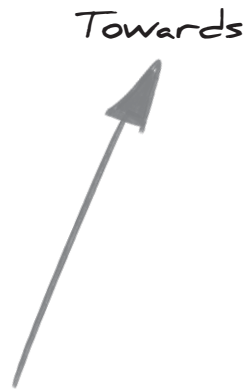
You’ll see throughout this book there are many ways we can use the choice point, but for now I just want to give you a brief introduction. One of the beauties of the choice point is that it provides a clear overview of the ACT model. (Note: the choice point has similarities with but also significant differences from a popular ACT tool called the matrix [Polk & Schoendorff, 2014]; see Extra Bits for an explanation.) As I take you through it, I’m going to use the same nontechnical language that I use with clients because I want to achieve two things simultaneously: (a) simply explaining the ACT model to you and (b) demonstrating how you can explain ACT to your clients.

The choice point is a tool that rapidly maps out problems, identifies sources of suffering, and formulates an ACT approach to handling them. We can bring it in at any stage of therapy and use it for many different purposes. I often introduce it for the first time about halfway through my first session with a new client, as part of informed consent (chapter 5). Typically, it would go something like this:

Therapist: Would it be okay with you if I take a few moments to draw something? It’s kind of a road map for helping us work together effectively. (*Therapist produces a pen and a sheet of paper.*) So you and I, and everyone else on the planet, we’re always doing stuff. We’re eating, drinking, walking, talking, sleeping, playing—always doing something. Even if we’re just staring at the wall, that’s still doing something, right? And some of these things we do are pretty useful; they help us move toward a better life. So I call them

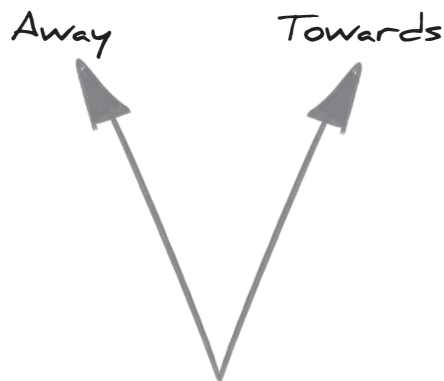
“towards moves.” Towards moves are basically the things you want to start or do more of, if our work here is successful.

While saying this, the therapist draws an arrow and writes:



The therapist continues: So when we're doing towards moves, that means we're acting effectively, behaving like the sort of person we want to be, doing stuff that's likely to make life more meaningful and fulfilling. The problem is, that's not all we do. There are other things we do that have the opposite effect: they take us away from the life we really want to build. So I like to call these “away moves.” When we do away moves, that means we're acting ineffectively, behaving unlike the sort of person we want to be, doing stuff that tends to make life worse in the long term. So basically, away moves are anything you will stop doing or do less of if our work here is successful.

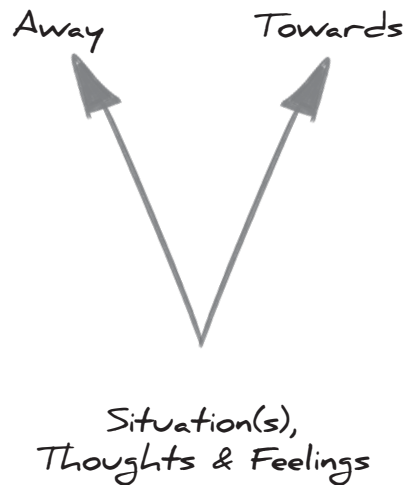
While saying this, the therapist draws a second arrow and writes:



The therapist now continues: And this applies to us all, right? All day long we're all doing towards and away moves, and it changes from moment to moment. And when life isn't too hard, when things are going okay, when we're getting what we want in life, it's a lot

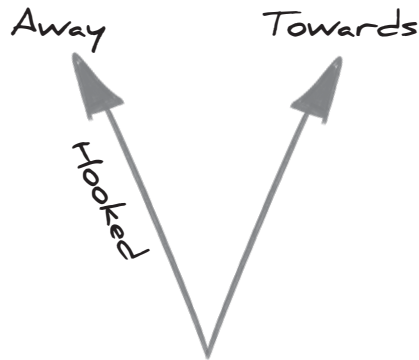
easier to choose those towards moves. But as you know, life isn't like that a lot of the time. Life is tough, and a lot of the time we don't get what we want. So throughout the day, we're going to encounter all sorts of difficult situations, and difficult thoughts and feelings are going to show up.

At the bottom of the diagram, the therapist now writes, "Situation(s), Thoughts & Feelings." (Note: throughout this book, the term "thoughts and feelings" is used as shorthand for thoughts, feelings, emotions, memories, urges, impulses, images, and sensations. Any or all of these private experiences can be mentioned or written down on the choice point.)



The therapist continues: The problem is, the default setting for most of us is that when these difficult thoughts and feelings show up, we tend to get "hooked" by them. They kind of hook us, and they reel us in, and they jerk us around, and they pull us all over the place. You know what I mean? They might hook us physically, so we start acting out in various ways with our arms and our legs and our mouth. Or they might hook our attention, so instead of focusing on what we're doing, we get lost in our inner world. And the more tightly we're hooked...the more we do those away moves, right?

The therapist now writes “Hooked” alongside the “Away” arrow.

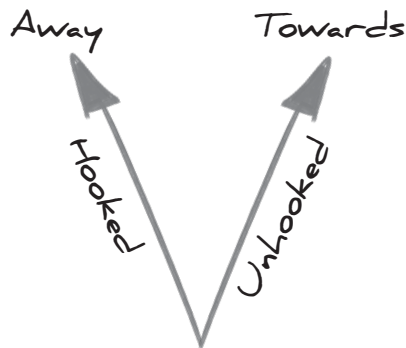


Situation(s),
Thoughts & Feelings

The therapist continues: So everyone does this stuff to some extent; that’s normal. No one’s perfect. But if this kind of thing happens a lot, it creates big problems. In fact, almost every psychological problem that we know of—*anxiety, depression, addiction, you name it*—boils down to this basic process: we get hooked by difficult thoughts and feelings and we start doing away moves. Does that make sense?

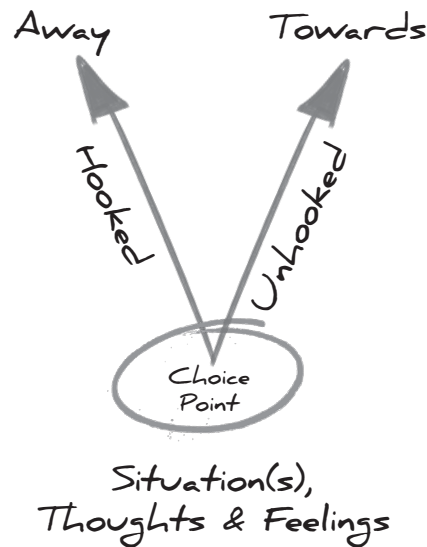
However, there are times when we are able to unhook ourselves from these difficult thoughts and feelings and do some towards moves instead. And the better we get at doing this...well, the better life gets.

While saying this, the therapist writes “Unhooked” alongside the “Towards” arrow.



Situation(s),
Thoughts & Feelings

The therapist now draws a little circle at the point where the arrows converge. (If desired, she can write in the words “choice point” or the initials “CP.”) While doing this, she continues: So when we’re in these challenging situations, and these difficult thoughts and feelings are showing up, there’s a choice for us to make: how are we going to respond to this? The more hooked we get, the more likely we are to do away moves. But the more we can unhook ourselves, the easier it is to do towards moves.



The therapist continues: So if we want to get good at doing this (points to the towards arrow), we need to do two things: We need to learn some unhooking skills. And we need to get clear about what towards moves we want to make. Once that’s in place, we’ve got a lot more choice about how we’re going to respond to all of this difficult stuff life is giving us. And that’s basically what this type of therapy is all about: learning how to unhook from this stuff (points to “Thoughts & Feelings”), cut back on this stuff (points to away moves), and help you to get better at doing this stuff (points to towards moves).

Tricky Terminology Some ACT practitioners use the term “hooked” to mean cognitive fusion only. The choice point uses the term in a broader sense to mean both cognitive fusion and experiential avoidance. We’ll explore this more in chapter 2.

The “Bare Bones” Choice Point

What you’ve just read is a “bare bones” summary of the choice point: a generic overview with no specific details. Ideally, you’d want to put a lot of flesh on that skeleton: make it personal for the

client, with specific examples of her difficult thoughts and feelings, the difficult situations she faces, her away moves, and her towards moves. As you progress through the book, I'll show you how to flesh this diagram out. For now, I just want to flag three important points:

1. **The choice point includes overt and covert behavior.** In ACT, we define behavior as “anything that a whole being does.” Yes, you read that correctly: anything that a whole being does is behavior. This includes overt behaviors such as eating, drinking, walking, talking, watching *Game of Thrones*, and so on. *Overt behavior* basically means physical behavior: actions you take with your arms, legs, hands, and feet; facial expressions; everything you say, sing, shout, or whisper; how you move, eat, drink, breathe; your body posture; and so on. However, the term “behavior” also refers to *covert behavior*, which basically means psychological behavior, such as thinking, focusing, visualizing, mindfulness, imagining, and remembering. (This inner psychological behavior can never be directly observed by others, so it's often called “private behavior” rather than “covert behavior.”)

Here's a simple way to distinguish overt from covert behavior. Suppose a video camera magically appears out of thin air while the behavior is happening. Could that camera record the behavior? If yes, then it's overt behavior. If no, it's covert behavior.

As you'll see in later chapters, when we fill in the choice point with a client, we include both overt and covert behavior. For example, covert away moves might include rumination, worrying, disengaging, losing focus, and obsessing, and covert towards moves might include defusing, accepting, refocusing attention, engaging, strategizing, and planning.

2. **The client defines what is an away move.** The choice point always maps things out from the client's perspective. In other words, it's the client who defines what behavior is “away,” not the therapist. Early in therapy, a client may see self-defeating or self-destructive behavior as a towards move. For example, a client with an alcohol or gambling addiction may initially class drinking and gambling as towards moves.

If so, we would not start debating this with the client. We would simply take a moment to clarify: “Can I just check we're using these terms the same way? Away moves are anything you want to stop or do less of if our work here is successful, and towards moves are the things you want to start or do more of if our work here is successful.”

If the client still labels the self-defeating behavior as “towards,” then we acknowledge that and write it down alongside the towards arrow. Why? Because this is a snapshot of the *client's* life as *he or she currently sees it*, not as the therapist sees it. Our aim is to get a sense of the *client's* worldview, the *client's* level of self-awareness: what the client see as problems, and what he doesn't. So if we challenge the client at this point, try to get him to change his mind and see this destructive or self-defeating behavior as an away move, we're likely to get into a fruitless struggle. For now, we put it down as a towards move, and we make a note to ourselves to address this in later sessions.

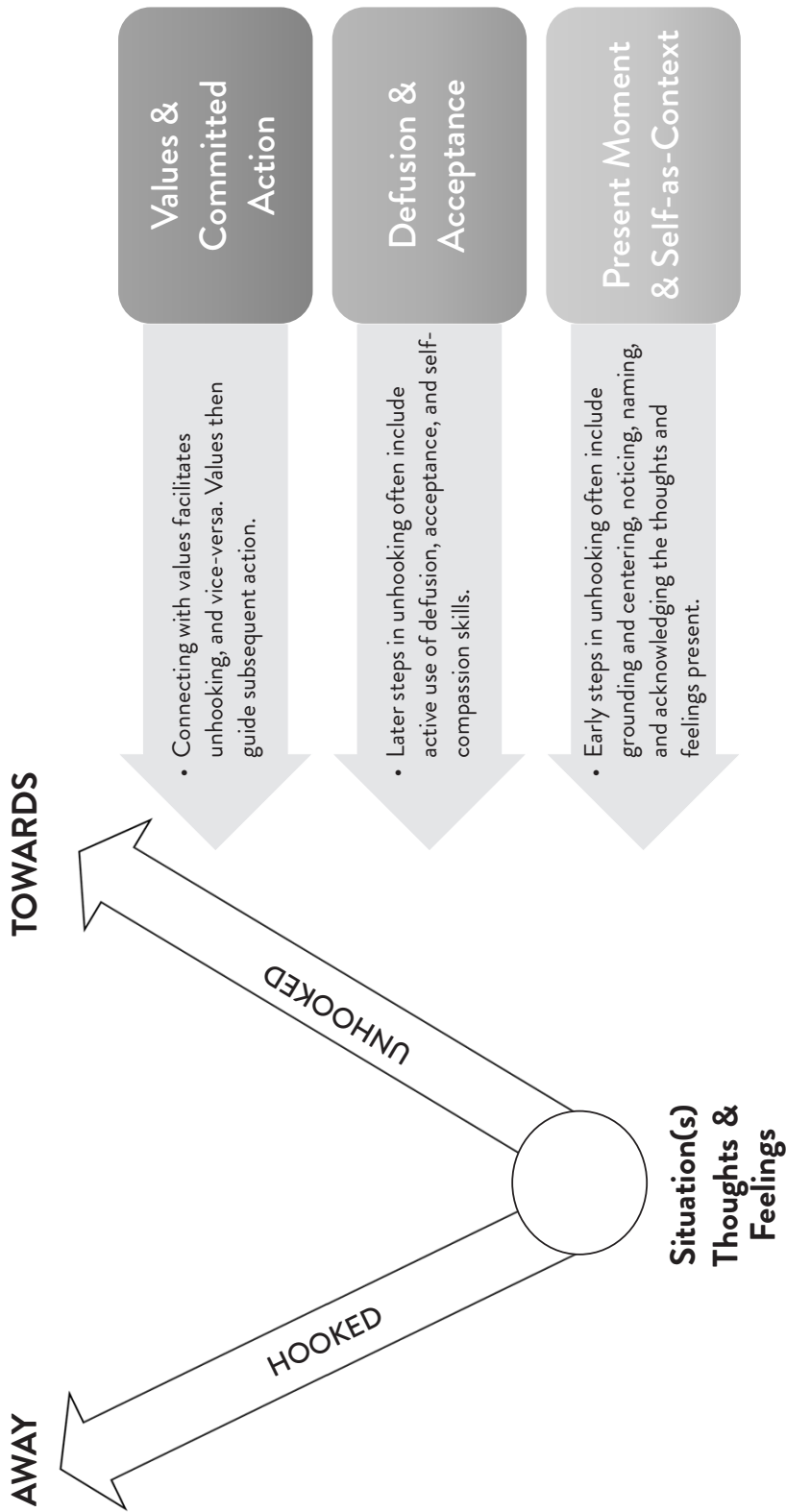
Initially, we want to find therapy goals that will build the therapeutic alliance, rather than strain it. So we find out what the client *does* see as his away moves, and we use ACT to work with him on those behaviors. Then, later in therapy, once the client has a higher level of psychological flexibility, we can return to the behavior and reassess it: “When you first came to see me, you classed gambling as a towards move; do you still see it that way?” Usually, as therapy progresses and the client’s psychological flexibility develops, she will change her mind and class her self-defeating behavior as away—especially when she realizes it is getting in the way of other important life goals.

3. **Any activity can be a towards move or an away move, depending on the context.** When I watch TV primarily to avoid going to the gym or to procrastinate on some other important task, or when I eat a block of chocolate mindlessly to escape boredom or anxiety, I class those as away moves. But when I watch TV as a conscious, values-guided choice that enriches my life (e.g., catching the latest episode of *The Walking Dead*) or when I eat chocolate mindfully, savoring it as part of a celebration with friends, I class those as towards moves. So it’s not about the activity we’re doing; it’s about the effects that activity is having.

In contexts where an activity takes us toward the life we want, behaving like the person we want to be, it’s a towards move; and in contexts where that activity takes us away from the life we want, behaving unlike the person we want to be, it’s an away move. If we’re writing examples such as these on a choice point, we’d include information to specify when it’s towards and when it’s away. For example, on my away arrow I’d write “watching TV to avoid important tasks” and on my towards arrow, “watching TV as a balanced lifestyle choice.”

The Choice Point, the Hexaflex, and the Triflex

Let’s now look at how the hexaflex and triflex processes map onto the choice point.



Unhooking skills refers to all four core ACT mindfulness processes: defusion, acceptance, self-as-context, and contacting the present moment. We can use any combination of these processes to “unhook” ourselves from difficult thoughts and feelings, reducing their impact and influence over overt and covert behavior.

Towards moves refer to committed action—physical and psychological—guided by our values.

Hooked refers to two core processes—*cognitive fusion* and *experiential avoidance*—that ACT sees as responsible for most of our psychological suffering. Cognitive fusion basically means we are “dominated” by our cognitions. And experiential avoidance is the ongoing struggle to avoid or get rid of unwanted thoughts and feelings. I’ll explore these terms in depth in the next chapter.

Extra Bits

Please download the pdf called *ACT Made Simple: The Extra Bits* from the “Free Stuff” page at <http://www.actmindfully.com.au> and turn to chapter 1. There you’ll find (a) printable versions of the hexa flex, the triflex, and the choice point and (b) a discussion of the main differences between the choice point and the *matrix*.

Skilling Up

Simply reading this book will not give you ACT skills, just as reading a cookbook will not give you cooking skills. If you want to learn to cook well, you gotta practice, practice, practice those skills, and the same goes for ACT. So at the end of most chapters, I’ll ask you to do something to build your ACT skills. Here are a few suggestions to get you started:

- Run through the choice point with an imaginary client as if you’re an actor rehearsing for a play. Act it out loud, if you’re willing to; but if not, do it in your head. Ideally, draw it out as you rehearse it.
- Once you’ve rehearsed the choice point in private, run through it with a friend or colleague to see if you can summarize what ACT is about.
- After that, give it a go for real with some of your clients.

You may be somewhat reluctant to do this; you may be thinking it’s silly, unimportant, or just not your style. However, even if you never do this with a real client, rehearsing it will help you to grasp the ACT model. (Plus it’ll also help you enormously if you ever want to explain ACT to curious friends, colleagues, relatives, or guests at your next dinner party.)

Takeaway

ACT is a behavioral therapy that creatively uses values and mindfulness skills to help people build rich and meaningful lives. It is based on six core processes: values, committed action, and the four mindfulness processes of defusion, acceptance, self-as-context, and contacting the present moment. We can chunk these into three larger processes of being present, opening up, and doing what matters. In technical terms, the aim of ACT is to help people develop psychological flexibility: the ability to focus on and engage in what we are doing, to open up and make room for our thoughts and feelings, and to act effectively, guided by our values.