

How do people who live with a mental illness, substance abuse, and trauma experience Acceptance Commitment Therapy?

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ABSTRACT

The goal of the study was to introduce a new type of treatment to a small group of participants who are at New Horizons for mental health and substance abuse and the traumas that brought them to seek treatment; this new treatment would teach skills around values, priorities, psychological flexibility, inner child work and being about to process the trauma they have experienced and to help them accept it so they can continue to grow. The participants have all agreed and completed 8 hours of ACT group therapy. The results come from interviews conducted with the participants to learn about their experience with ACT and if it has benefited them in their healing journey. They could identify what parts of ACT we discussed in the group and how they have implemented those skills into their healing recovery and everyday life. Participants stated that they all felt that participating in ACT activities benefited them a few weeks later as they continued to do the work in the program.

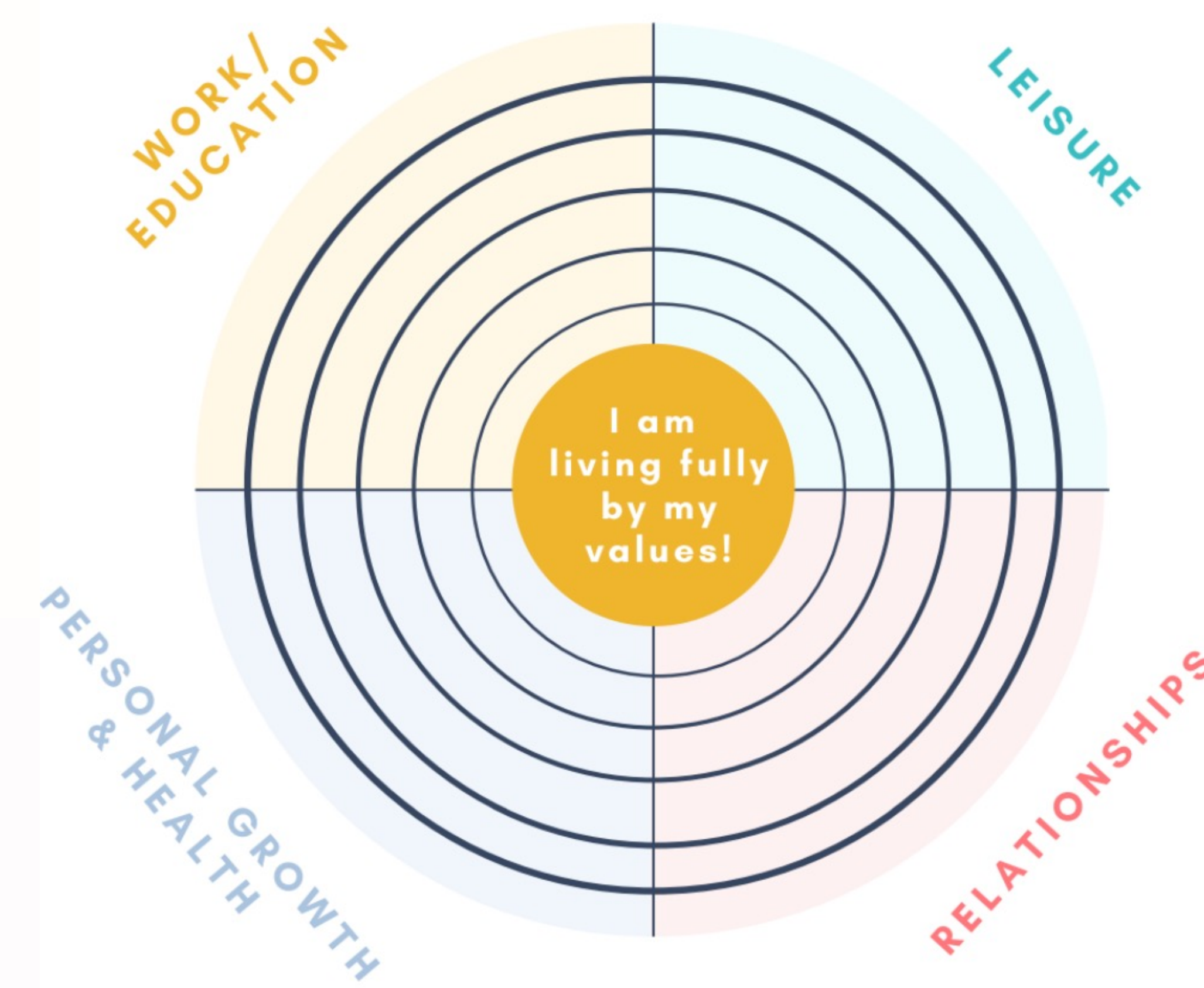
Objectives

The objective of this study is to determine how people with mental illness and substance abuse disorder who have experienced trauma respond to the treatment modality Acceptance Commitment Therapy by participating in 8 hours of ACT group work. The study looked at the common themes among participants. Then, it used the information collected through interviews to understand how they responded and how they began to apply it in their everyday lives. This study is also vital to social work because of the wide range of people who suffer from trauma. Moreover, there is always a new therapy to try to combat it. ACT would be beneficial to people who struggle with trauma and the other problems that follow based on the underlying assumptions that ACT has efficacy in those with a history of trauma. It is also vital to social work because government sources report that 60% of mental health professionals are clinically trained social workers (*Want to Work in Mental Health? Psychiatry Is Not Your Only Option - the College of (St. Scholastica, 2023)*).



Materials and Methods

- Qualitative research study. It was done at New Horizon's Recover Center.
- The unit of analysis in this study is the participants in the New Horizons partial hospitalization program.
- The measurement instruments were the interview questions asked when interviewing the participants.
- The study took place at New Horizons Recovery Centers in Cincinnati
- The sampling method used is Convince-non-random sampling
- The sample includes the Partial Hospitalization Program (PHP) adults at New Horizons five days a week, 9 am-3 pm. They have met the criteria that include a psych diagnosis-depression, anxiety disorder, and substance abuse disorder. They have experienced traumatic events/s (any form, from childhood trauma to sexual/physical abuse, a loss, or being injured, bullied, or neglected. The sample size is N>4, ages 18-36 white males.
- The patient's responses were protected by interviews and kept in a password-protected file on a personal laptop.
- Thematic analysis will be used to find common themes among the participants
- The study's limitations were that the sample was not diverse, as evidenced by the fact that it was all white and male and close in age and economic status.



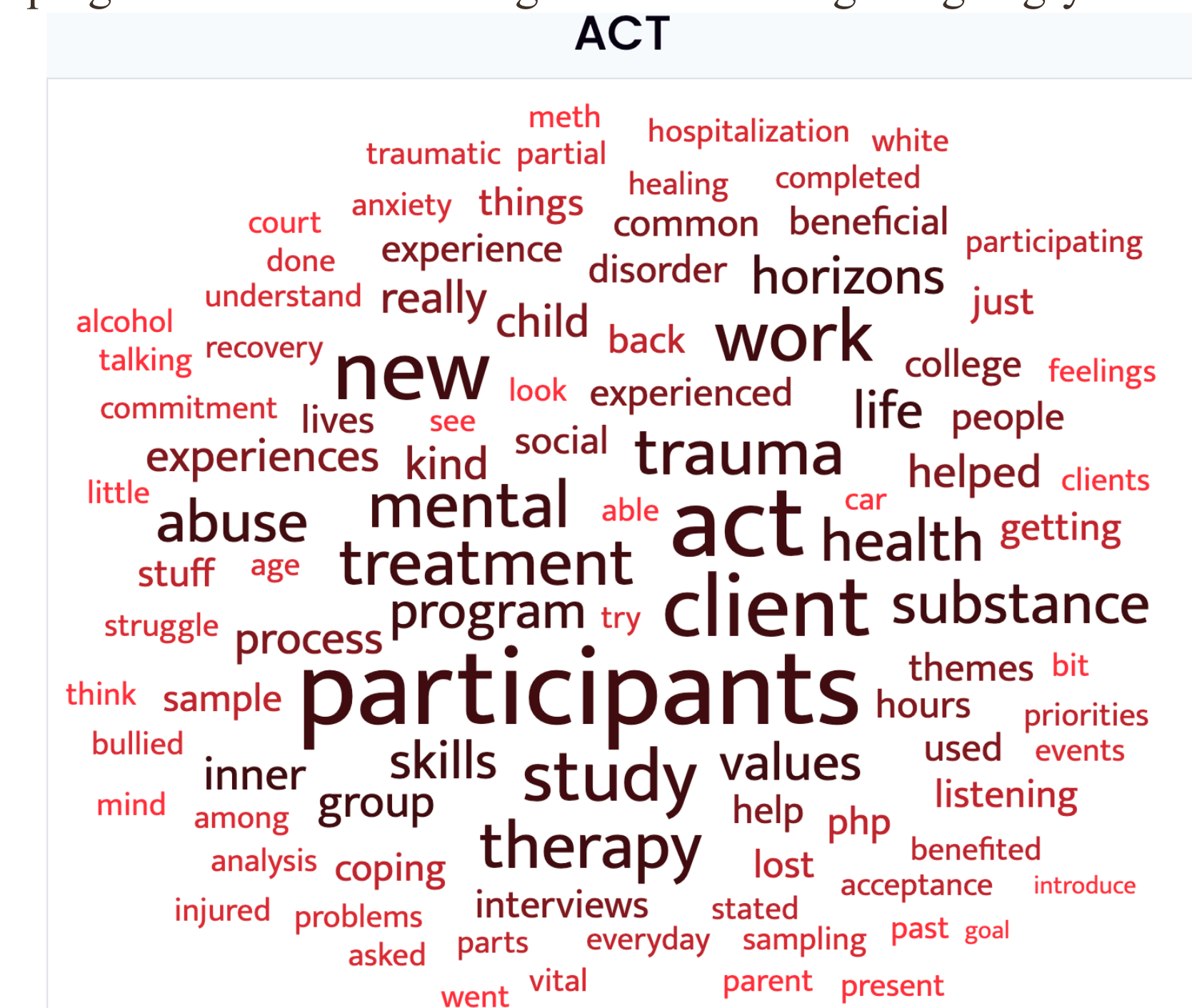
Results/Findings

Common Themes

- **Have had previous treatment before.**
 - Many of the participants have had various types of treatment before coming to new horizons; they have included general therapy, residential
 - Client D. "I went to one therapy session when my brother died when I was 13, 14. I didn't believe in it. I didn't think it, like, I was talking to a stranger to help, so I was very closed off."
 - Client M: "I chose therapy because of trauma, depression, and anxiety. I have never seen a therapist consistently, but I have been committed to mental health treatment before."
- **In the program for substance abuse**
 - 3 participants are in PHP because of alcohol, marijuana, and meth
 - Client D. "My life was falling apart. I was addicted to meth, and I lost my job to add no money, and I had two court cases simultaneously. My choice is to run or ask for help".
 - Client M. "My coping skills were Smoking weed and listening to music. It goes all the way back to being raised by just a single parent, an alcoholic parent, a no dad, no guidance, then kind of alcoholism and lost the court case. Went through a breakup in college. And after, like, with my alcohol use of blocking out my own stuff, I punched a car window and cut up my whole arm."
- **In the program for mental health**
 - All of the participants struggle with mental health, which is their coping solution after traumatic events or experiences.
 - Car crash, getting severely injured at the hands of another person, dropping out of college, and being bullied as a kid. Multiple clients experience some of these experiences.
 - Client J stated "I kind of just like, ever since I was like 19 or 23, I just lost completely control of my life. I was listening to family more than I was listening to myself, I wish I would have came here."
- **Inner child work.**
 - All of the clients connected with inner child work.
 - They enjoyed playing with the toys and getting in touch with their inner child.
 - Client S said, "A lot of our problems come from a young age and things that we weren't emotionally mature enough to process, and if we don't experience them again, we don't encounter them again. They can be unresolved. So going back and accepting what happened, then being able to process it and move forward. Games helped me get to the point where I could open that up."
- **Applying ACT to their own lives**
 - When asked if ACT was beneficial,
 - Client S. Said, "100%. You can try to kind of wear your mind as a map of where your priorities and values lie. This will shape what you see and how you view your experiences in life."
 - Client J said, "You might love yourself a little bit more if you look at how far you have come. You get to realize stuff when you're done and then really make something in your mind that when you see yourself, and you tie it back to yourself, it makes things seem out more a little bit."
 - Client M. "I like talking about values because when you really think about your values, you can look at your actions in the past and get the idea that you need to match your values in your life and probably change too."
 - Client D. ACT helped me really examine and mobilize or write down things about myself that, you know, are there. It's stuff that was there, but ACT really helped drill down into them and kind of cement those feelings.

Conclusions

In conclusion, Acceptance Commitment Therapy proved beneficial for all the study participants. They could be present and process some feelings and experiences that they had not in the past. Everyone was present and completed the 8 hours of intervention. They were able to be kinder to themselves and incorporate some of the ACT skills into their lives. They would all recommend it to a friend, which has helped them better understand themselves and why they are in PHP. Currently, the participants with substance abuse are sober. All of the parts it plays are creating new coping skills instead of using a substance or getting angry.



References

ACT A-Tjak, J., Davis, M. L., Morina, N., Powers, M. B., Smits, J. A., & Emmelkamp, P. M. G. (2014). A Meta-Analysis of the efficacy of acceptance and commitment therapy for clinically relevant mental and physical health problems. *Psychotherapy and Psychosomatics*, 84(1), 30-36. <https://doi.org/10.1159/000365764>

DeCou, C. R., Mahoney, C. T., Kaplan, S. P., & Lynch, S. M. (2019). Coping self-efficacy and trauma-related shame mediate the association between negative social reactions to sexual assault and PTSD symptoms. *Psychological Trauma: Theory, Research, Practice, and Policy*, 11(1) 554. <https://doi.org/10.1037/tra0000379>

Spidel, A., Lecomte, T., Kealy, D., & Daigneault, I. (2017). Acceptance and commitment therapy for m psychosis and trauma: Improvement in psychiatric symptoms, emotion regulation, and treatment compliance following a brief group intervention. *British Journal of Medical Psychology*, 91(2), 248-261. <https://doi.org/10.1111/papt.12159>

The ACT Therapist. (2022, June 4). *What is Acceptance and Commitment Therapy (ACT Therapy Explained)* [Video]. YouTube. <https://www.youtube.com/watch?v=3TTv6Faep54>

Want to work in mental health? Psychiatry is not your only option - The College of St. Scholastica. (2023, July 18). The College of St. Scholastica. <https://www.css.edu/about/blog/want-to-work-in-mental-health-psychiatry-isn't-your-only-option/#:~:text=In%20fact%2C%20government%20sources%20report,five%20percent%20are%20psychiatric%20nurses>

Wharton, E., Edwards, K. S., Juhasz, K., & Walser, R. D. (2019). Acceptance-based interventions in the treatment of PTSD: Group and individual pilot data using Acceptance and Commitment Therapy. *Journal of Contextual Behavioral Science*, pp. <https://doi.org/10.1016/j.jcbs.2019.09.006>

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