#### Link go contextual chapter discussed - https://tinyurl.com/evos-chapter-Ciarrhochi-Hayes

# Using contextual behaviour science to consider growth and development in humans.

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# Overview

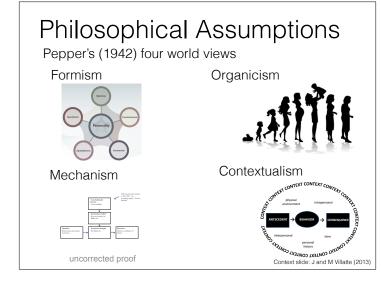
A paradigm for psychology — basic and applied scientific methods to predict and change the behaviour of humans with precision, scope and depth (S. C. Hayes, 2016)

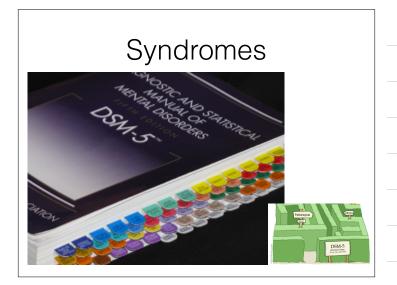
An explicitly contextual example

Finally showing the work as applied to young people and development









## Philosophical Assumptions

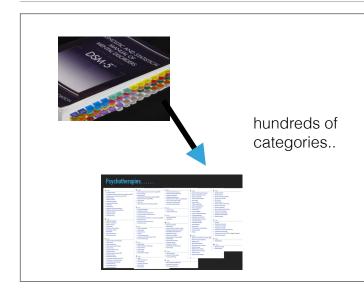
Pepper's (1942) four world views

Formism

Root metaphor of recognisable forms, with **truth based on correspondence to the form** 

If the system has a category for all kinds of things, and things for all categories, then the system is deemed to be true

In psychology, personality theories as descriptive of the truth of ones' personality



# The challenge we have set for practitioners

Using evidence base to inform decisions

ask key questions about individual or group

acquire the best available evidence for them

critically appraise the evidence for validity and applicability

apply evidence in collaborative way - considering context, values, preferences, resources, and expertise of professional

disseminate and assess the outcome

(source K. Koerner, 2018)

#### 3. Using evidence base to inform decisions

In 2017 alone:

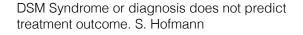
220,000 psychology peer reviewed articles \*

10,200 peer reviewed articles published in journals with "clinical psychology" in the journal title  $^{\star}$ 

352 meta-analyses with "clinical psychology" in the journal title  $\!\!\!\!\!\!\!\!\!$ 

#### Read one meta-analysis a day :)

\*based on Uni Melb catalogue search across data bases



We lost our way trying to predict with a latent disease model



# What matters to treatment outcome

Not —DSM Syndrome or diagnosis

#### But - Clinicians do need to know

the processes and procedures that move to enhance wellbeing and the moderators that direct them to use X or Y process

To do this we need

- Assumptions and theory

linked to

Process and procedures

Tested with moderators and mediators

## Philosophical Assumptions

Pepper's (1942) four Worldviews

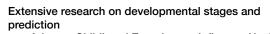
Organicism

Root metaphor of a growing organism - in an expected pattern of growth

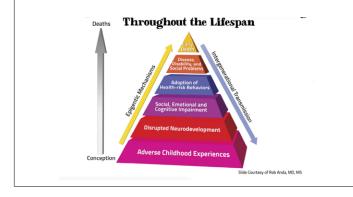
There are rules of growth, and **truth is the coherence with the rules** 

The whole cannot be understood by looking at the parts; the parts only have meaning with regard to the whole.

In humans, growth stages as seen in developmental psychology. Toddlers before preschoolers is presumed to reflect the organisation of development



e.g. Adverse Childhood Experiences Influence Health and Wellbeing



### Philosophical Assumptions



Pepper's (1942) four Worldviews

uncorrected proof

Mechanism

Root metaphor of the machine (does not mean robot like) assumes a priori that parts comprise a whole - i.e  $A \rightarrow B \rightarrow C$ 

### Correspondence based truth - if research supports that $A\!\rightarrow\!B$ then the theory is correct

Mental processes operate under a strict set of conditions, and these are separate from, but can covary with, the environmental context

In psychology — mental processes, mediated between the environment and behaviour. e.g. cognitive therapy and schema therapy

# **CBT** Trans Diagnostic

3rd wave saw unified mechanistic protocols, example:

Barlow's UP - core processes from the CBT tradition

Tests underway of trans-diagnostic C&A therapy (Weisz et al)



### Philosophical Assumptions



Pepper's (1942) four Worldviews

Contextualism

Root metaphor is the act-in-context, notably an act can only be done in and with a context  $% \left( {{{\left( {{{{\bf{n}}}} \right)}_{i}}}_{i}} \right)$ 

Contexts can extend out to all of the universe, or backward through time and forward to the future. The act is always *now*.

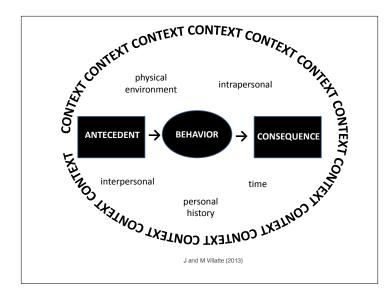
There is no *real world* instead there are levels of analysis that can predict and influence behaviour of individuals and groups. **Truth is what works for prediction and influence** 

In psychology - humanistic traditions, behavioural activation, therapies based on functional assessment (ACT, FAP, DBT, Integrative couples therapy)

#### Context

Someone who is no longer around still influences you today?



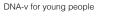


# Contextual Approaches

3rd wave saw contextual unified protocols, for example:

ACT - 6 core processes

DBT



CFT - 3 affect regulation systems





# Trans-diagnostic is also too narrow.

Stefan G. Hofmann



# What matters to treatment outcome

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To do this we need

- Assumptions and theory

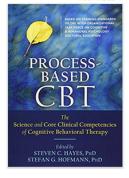
linked to

Process and procedures

Tested with moderators and mediators

## Processes

Hayes & Hofmann -CBT proceses



### Processes

Hayes & Hofmann (2018) CBT proceses

#### Processes with good evidence

Contingent behaviour	Modifying core beliefs
Stimulus control	Cognitive reappraisal
Shaping	Cognitive defusion
Emotion regulation	Acceptance
Problem solving	Values
Exposure	Mindfulness
Behavioural activation	Motivation

## Processes

Be informed by multidimensionality of humanity and suffering

Cognition, emotion, physical health, social connection, biological, neuroscience, genetics, evolution.

Let the data decide (S. C. Hayes)

Does the process mediate the desired outcomes?

What are the moderating factors?

## Procedures

The techniques or methods that a therapist utilises to achieve the treatment goals

And the defined and measurable outcomes that the therapist and client have agreed upon.

Usually, there are multiple goals, which can often be arranged in a hierarchy depending on priority, immediacy, difficulty, or related dimensions.

## Procedures

Values (one process used as an example)

sweet spot

card sort

Valued living questionnaire

Bulls eye

drawing now and the future

life compass

What does all this mean for development?...

### Packages are too slow

Because there are over 300 RCTs using ACT

but only a fraction are with young people.

Waiting for packages hasn't worked.

 $https://contextual science.org/state_of\_the\_act\_evidence$ 

### RCTs

Only about few with young people and children

Swain, J., Hancock, K., Dixon, A., & Bowman, J. (2015). Acceptance and Commitment Therapy for children: A systematic review of intervention studies. *Journal of Contextual Behavioral Science*, 4(2), 73–85. A metanalysis involving 707 participants and 21 studies suggests that ACT results in improvements in symptoms, quality of life, and psychological flexibility.

Hancock, K. M., Swain, J., Hainsworth, C. J., Dixon, A. L., Koo, S., & Munro, K. (2018). Acceptance and Commitment Therapy versus Cognitive Behavior Therapy for Children With Anxiety: Outcomes of a Randomized Controlled Trial. Journal of Clinical Child and Aclosecent Psychology. The Official Journal for the Society of Clinical Child and Adolescent Psychology, American Psychological Association, Division 53, 47(2), 296–311.

Hayes, L., Boyd, C. P. (2), & Sewell, J. (2011). Acceptance and commitment therapy for the treatment of adolescent depression: A pilot study in a psychiatric outpatient setting. Mindfulness, 2 (2), 86–94.

Hainsworth, Dixon, Koo, and Munro (2018) conducted a well-powered RCT (n= 193 children) and showed that both ACT and CBT produced equivalent benefits in the treatment of anxiety

Livheim, F., Hayes, L., Ghaderi, A., & Magnusdottir, T. (2015). The effectiveness of acceptance and commitment therapy for adolescent mental health: Swedish and Australian pilot outcomes. Journal of Child and. Retrieved from https://link.springer.com/article/10.1007/s10826-014-9912-9

Faulkner, O'Dell, and Golden (2018) provided some preliminary evidence for the efficacy of the DNA-v variant of ACT and positive psychology

But we have enough evidence to do this:

assumptions - theories - processes - procedures

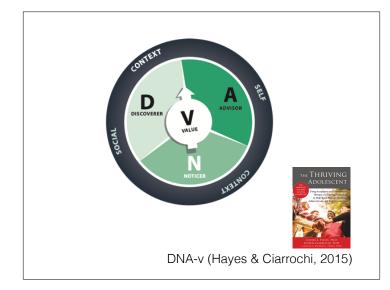
And apply it to development....

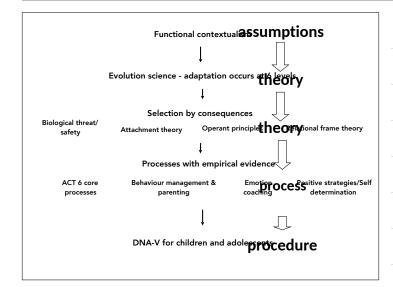
#### A contextual approach

based on selection by consequences (evolution, biological, behavioural (overt and verbal),

considered contextually

and using empirically established processes and procedures





# DNA-v

• 4 classes of behaviour • We can influence through intervention

And: --

- 2 perspectives • That show the way the <u>whole</u> interacts with
  - social
  - self

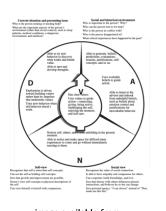


image available from www.thrivingadolescent.com

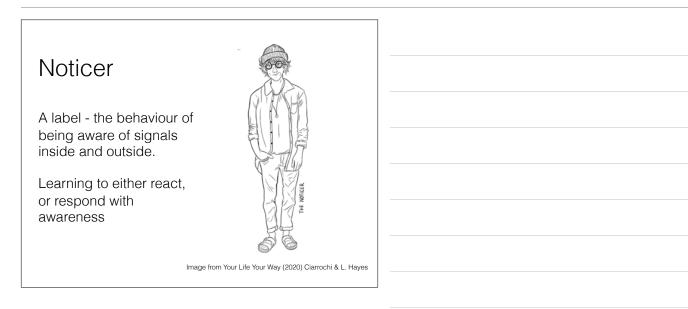


#### Polyvagal theory (Porges, 2011)

- Porges Polyvagal theory built on Darwin's observations of the nervous system.
  - Polyvagal refers to the evolution of the branches of the vagus system
  - Considered ground breaking, is a sophisticated understanding of biological safety and danger detection in mammals
  - Neuroception, focuses on the detection of safety or danger between from the environment and the people around us

### The Quest for Safety: Emergent Properties of Physiological State



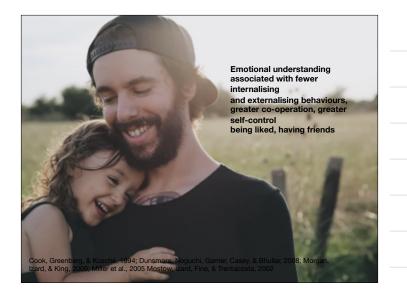


# Processes that shape flexible noticing

Biological awareness of safety and danger (informed by evolution, biological sciences and attachment theory)

Contingent behaviour, shaping, exposure

Emotional regulation, acceptance, and mindfulness



# Procedures to grow skilled noticers

Normalise and bring into awareness

Attend and label

Allow or react with awareness: learning to pause, and use non-judgmental awareness

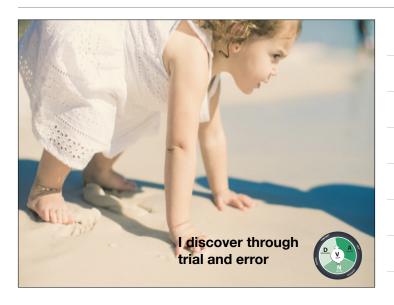
\*For young person and their social context



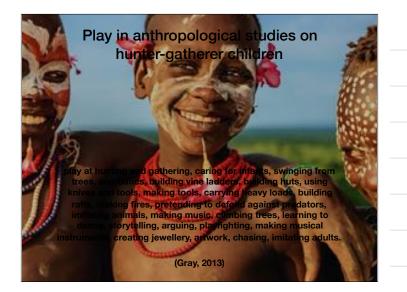
Young people see with new eyes

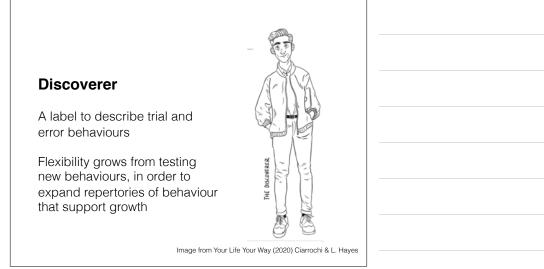
### Noticer - Mediation studies:

- In college students, web intervention ACT v waitlist mindful acceptance mediated treatment outcomes (Levin et al 2017)
- In young adults, willingness to experience negative thoughts or emotions while still engaging in valued behaviours significantly mediated eating disorder measures (Juarascio et al 2013)
- In anxious adolescents, ACT v CBT findings best explained via the specific indirect effects of acceptance and defusion. (Swain et al 2015)
- In adults, psychological flexibility and mindfulness are distinct processes that mediate outcomes in web based study (Pots et al 2016)





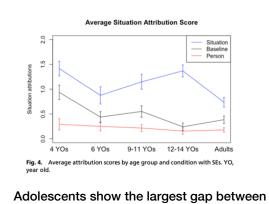




# And across the species in adolescence adaption is novelty and risk

Human adolescence seen across 187 countries - risk taking, love of novelty, sensation seeking, and changes in peer and family relationship - (Schlegel & Barry, 1991)

Animal adolescence - risk taking, love of novelty, sensation seeking, and changes in peer and family relationship (Spear, 2004, Laviola, Macrì, Morley-Fletcher, & Walter, 2003)



Adolescents show the largest gap between baseline and new situations, supporting the notion that they are particularly open to new possibilities (Gopnik, 2017)



### Processes used in discoverer

Functional assessment,

Contingent behaviour and shaping, behavioural activation

Positive psych for broadening and building

Self determination for motivations

## Procedures to build discovery

Tracking consequences explicitly with young person (similar to workability & creative hopelessness in adult ACT)

Building behavioural strengths

#### Goal setting

Frameworks for new and untested behaviour aimed at building broader repertoires of behaviour

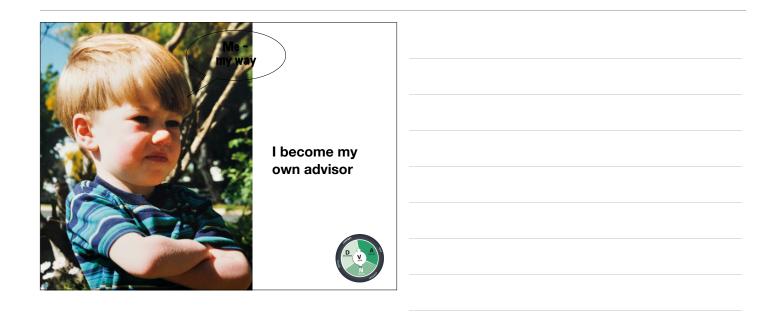
### **Discoverer - Mediation studies**

In adolescent males, self-determination based intervention that enhanced autonomous motivation mediated less screen-time (Smith et al 2016)

In adolescents, autonomous motivation mediated health related quality of life change in overweight adolescents (Straker et al 2016)

In adolescents, although limited, self-efficacy and intention appear to be relevant mediators for physical activity interventions (Stralen et al 2011)

In adolescents, behavioral activation, including both measures of activation and positive reinforcement, mediated the relation between activity and depression (Takagaki et al 2016)



Our verbal behaviour that **saves us from trial and error** by using beliefs, rules, judgements, evaluations, problem solving and predictions

Flexibility is verbal awareness, trying new rules, distancing etc

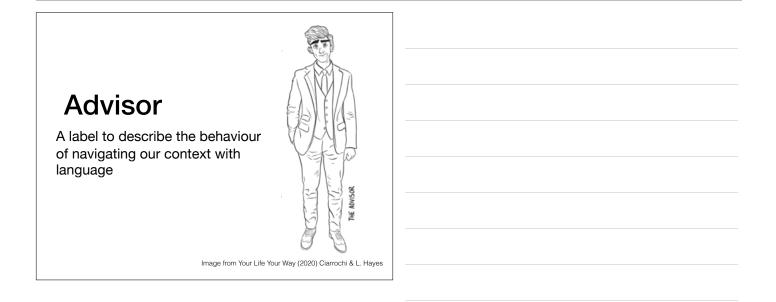
### Adaptive purpose of language

Initially selected for because of the advantages it provides ("There is a lion in the grass")

Transformation of function via language is the highest form of variation (Monestès, 2016; D. S. Wilson, 2016).

It can be quickly overgeneralised, leading to cognitive inflexibility

Psychopathology has it's roots in narrow, rigid cognitions and actions



# Flexility may be key in adolescence

"Innovation is primed as a sweet spot in adolescence cognitive and physical abilities are sufficiently mature but before the full onset of the concerns and costs associated with reproduction." Riede et al, 2018

With age comes a greater reliance on language, that is fixed and governed by past learning (Gopnik et al., 2017)



# Process used to support a flexible advisor

Processes -

RFT for how language is shaped - relational frames Awareness Coherence seeking Cognitive defusion Cognitive reappraisal Modifying core beliefs Problem solving skill



# Procedures to grow with a flexible Advisor

#### Procedures

Seeing thoughts instead of being inside them

Create flexible rules and test them

Practice changing rules looking at function (i.e. both positive or negative statements can be useful)

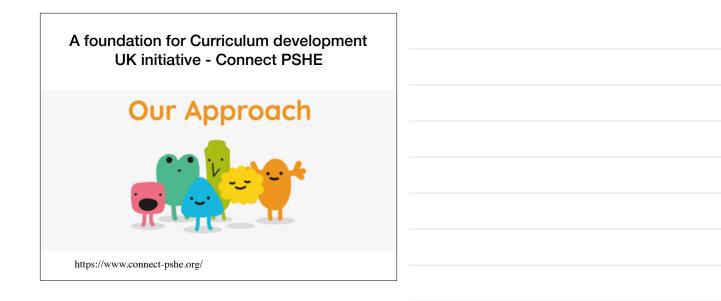
Test out helpfulness of rule based on their value connection (Coherence to rules, and cognitive reappraisal)

Normalise function - advisor's 'watching out'

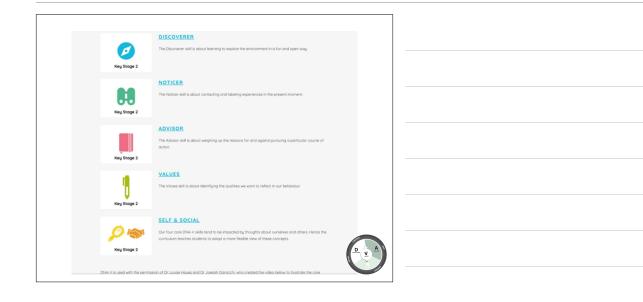
Experiential exercises to defuse if stuck - step out of advisor to N or D (defusion)

Problem solving steps









# Advisor - Mediation studies (mostly adult):

In adolescents with anxiety, ACT v CBT - findings best explained via the specific indirect effects defusion (Swain et al 2015)

In adults, decreased defusion was mechanism in the efficacy of ACT in those with depression and mental health problems (Bramwell & Richardson 2018)

In adults, ACT and CBT - Multilevel mediation analyses revealed significant changes in the proposed mediators during both treatments (p < .001, d = .90–1.93), with ACT showing borderline greater improvements than CBT in cognitive defusion (p = .05, d = .82) (Arch et al 2012)

In adults, with psychosis, believability mediated reduction of rehospitalization not symptom-related distress (Bach et al 2013)



# Process used to build vitality and value

Modification of behavioural repertoire via repetition and linking to verbal self rules

Plus a between-individual component that corresponds to social learning and cultural transmission

(Hayes & Hoffman, 2018)

## **Vitality & Value Procedures**

6 ways to wellbeing (Basarkod, Ciarrochi & Sahdra. *In press*),

Create settings where value and vitality are overtly

shaped In session In class rooms In families

Construct it with language by Drawing, playing, speaking etc

# Valuer

Mediation studies:

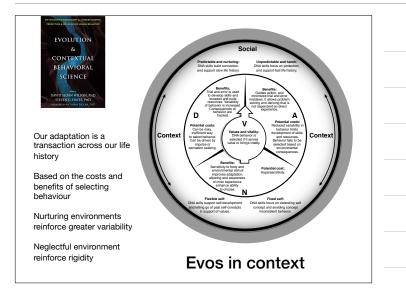
College students web intervention ACT v waitlist - obstruction to valued living mediated treatment outcomes (Levin et al 2017)

Increased values-based action is an important mechanism in the efficacy of ACT in those with depression and mental health problems (Bramwell & Richardson, 2018)

Psychological flexibility mediated change in weight loss through enhanced ability to continue with valued activities even when confronted with negative emotions and thoughts related to weight (Sairanen et al 2017)

In adolescents, longitudinal evidence for the benefits of value clarification and affirmation for health, education, and relationships (Cohen and Sherman, 2014)

In adolescents, longitudinally writing about important values improves grades and reduces the racial achievement gap (Cohen et al., 2006; Sherman et al., 2013)



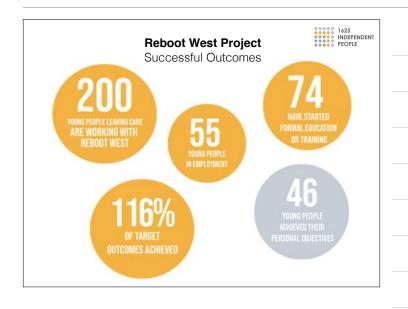
The self *is* language

Self view - how we use D, N, A and V in the context of our history









Social context

Social-view How our D, N, A and V are shaped by our social context



# Process shown to support flexiblity

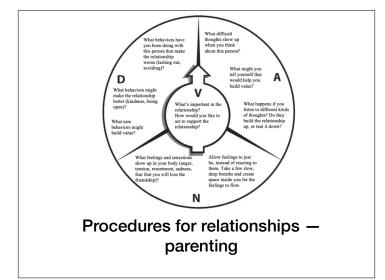
Promoting and reinforcing prosocial behavior

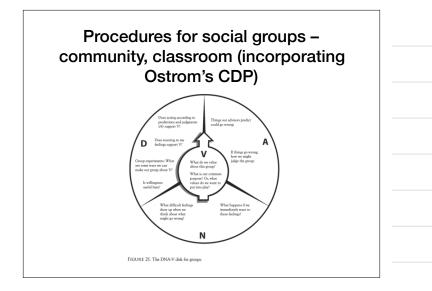
Minimizing socially and biologically toxic conditions

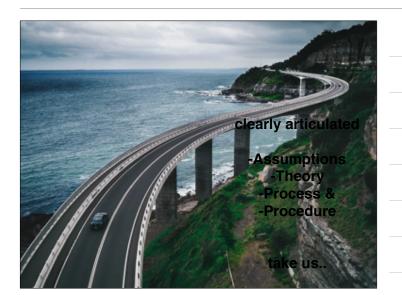
Monitoring and setting limits on influences and opportunities to engage in problem behavior

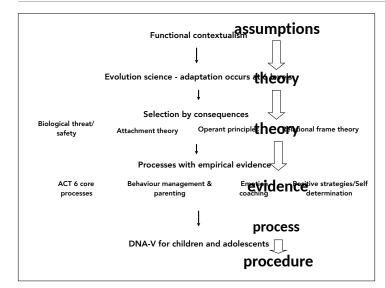
Promoting the mindful, flexible, and pragmatic pursuit of prosocial values

Biglan (2015)











### Innovation + Increased capacity for idiographic methods

Open source development

Innovation in child and adolescent mental health services

Delivery long term for care leavers

Into schools via curriculum development

Into digital via gamification/Apps



# Follow-up

This talk is on —

DNA-v - DNA-v.com & Hayes, L., & Ciarrochi, J. (2015). The Thriving Adolescent. Oakland CA: New Harbinger.

CBS - www.contextualscience.org

 $\ensuremath{\textbf{Process}}\xspace \& \ensuremath{\textbf{Process}}\xspace \& \ensuremath{\textbf{S}}\xspace.$  Hofmann (2019). Process based CBT

 $\label{eq:General ACT} \textbf{General ACT} - \textbf{S. C Hayes, Strasahl and Wilson 2012 Acceptance and Commitment Therapy}$ 

**Context in schools** - Ciarrochi, J., Atkins, A., Hayes, L., Kaur Sahdra, B., Parker, P.(2016) Contextual positive psychology: Policy recommendations for implementing positive psychology into schools. Frontiers in Psychology, section Personality and Social Psychology.

DNA-v curriculum - www.connect-pshe.org



- not for profit, unpaid, initially earthquake relief mindfulness for professionals