

Treating Eating Disorders with Acceptance and Values Based Approaches

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Model of ED Maintenance

- Outlying psychobiology
 - Anxious, harm avoidant, perfectionistic
 - Reward over or under activity, novelty seeking
 - Neurocognitive processing
 - Inability to see the “big picture”
 - Inflexibility in thinking
- Experiential avoidance
 - Private mental experiences are avoided
 - Starvation reinforces
 - Binge/purge reinforces

Model of ED Maintenance

- Pro-eating disorder beliefs
 - Overvaluation of shape, weight and their control
 - Overvaluation of control in general
 - Fusion with these beliefs
- Responses of close others
 - High expressed emotion
 - Reinforcement of the expressive and defensive functions of the eating disorder



Trait Optimization

- Recurrent characteristic traits of ED patients
 - High harm avoidant temperaments
 - Over or under reward sensitivity
 - Low self-directedness
 - Low central coherence (misses the “big picture”)
 - Impairment of reinforcement learning (inflexibility)
 - Poor reflective function
- Other traits (impersistence, low reward dependence, etc.)

Newer Strategies for IP/RES Treatment of Eating Disorders



- Cognitive Remediation Therapy
- Dialectical Behavior Therapy
- Acceptance and Commitment Therapy



We will focus on ACT today

**Insight does not create behavioral change,
behavioral change creates behavioral change.**



Why ACT?

ACT processes target all the major maintaining factors of eating disorders we mentioned.

Our goal is to create behavioral change while in treatment through exposure therapy and experiential acceptance.

We help our patients accept that to live their valued lives, there will be pain. And when they try to control this, they are moving away from living a life that is rich and meaningful for them.

Brief History of ACT

ACT is a 3rd generation behavioral therapy



1st generation behavioral therapy: Operant/Response
Looked at how to influence “**Public**” (what can be seen) behavior



2nd generation: added in how “**Private**” events, thoughts and feelings, influence behavior. Focus is on how to change thoughts to change behavior.



3rd generation: Moves focus away from “changing cognitions” and onto how to **live a valued life in the presence of those thoughts and feelings.**

The Underpinnings of ACT



- Functional Contextualism
- Relational Frame Theory



A Brief Illustration



Contextual Control



- Means transforming the function of a stimulus by changing its context
- The meaning of words is an arbitrary process which is controlled by contextual cues
- For example, the word “fat” has either a good or bad connotation depending on the context of its use.



“Fat” = Good



- Food is savory
- The brain is 80% fat/lipid
- Fatty acids are the building blocks for substances serving intracellular communication
- Fats are the reservoirs of energy when food is scarce
- Fats give the smooth and rounded shape associated with femaleness

“Fat” = Bad



- Social discrimination
- Coronary artery disease
- Pro-inflammatory state of the body
- Excessive body weight
- A “feeling” of shame
- Lack of personal control

Nickel vs. Dime

Physical Context



Verbal Context





Language and the Mind



Humans use language in two domains

Public: this includes speaking, talking, gesturing, writing, painting, singing, acting, and so on

Private: this includes thinking, imagining, daydreaming, planning, visualizing, analyzing, worrying, fantasizing, and so on (cognition)

Mad Monkey Mind



Your mind is not your friend! (or your enemy)

ACT regards the mind as a
double-edged sword.

It does many things well, but if we don't learn
how to handle it effectively, it will hurt us.

The BRIGHT side of how your mind uses language



Plan
Predict
Share information
Learn
Imagine
Communicate
Set rules and laws to form community.



The DARK side of how your mind uses language



Manipulate
Deceive
Slander
Judge
Criticize
Dwell on and relive painful events from
the past
Forecast the future in ways that are
limiting



Three Riders of the Apocalypse

- FUSION
- AVOIDANCE
- INFLEXIBLE ATTENTION

Fused with the Thought

- Confusing thoughts and feelings with external reality
- Looking *from* your thoughts rather than *at* your thoughts
- Overattachment to the contents of mental activity

Avoiding the Pain



Our minds are good at jumping into the past or worrying about the future. Thanks to our excellent minds, even the happiest of humans will have significant pain in their lives.

ACT teaches people skills to handle pain more effectively, and to not spend our lives engaged in “Emotional Avoidance”.

Trapped in Rule-Governed Behavior

- Verbal rules about how we are to behave and what will happen if we follow the rules constrict our lives.
- Verbal rules separate us from direct experience of life.
- They contribute to inflexible attention

The ACT or Self-Directedness Question



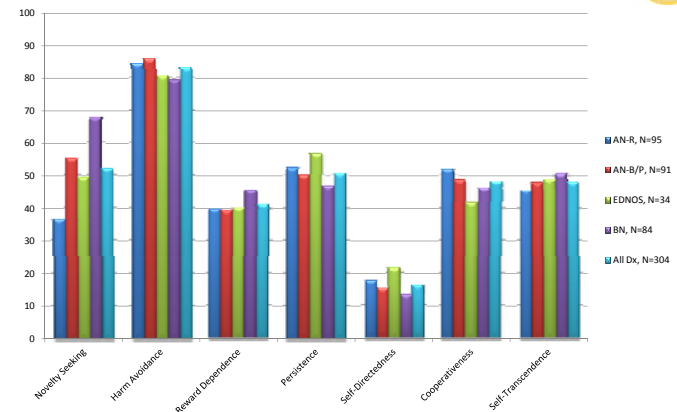
- Given a distinction between you and the things you are struggling with and trying to change, are you willing to experience those things, fully and without defense, as it is and not as it says it is, *and* do what works for you in this time and situation?



The Passengers on the Bus Metaphor

Hayes, Strosahl, Wilson, 1999

Temperament and Character Inventory



Two Treatment Questions of ACT

- In what direction do you want to go? (motivation)
- What stands in your way? (Private events as hindrances)



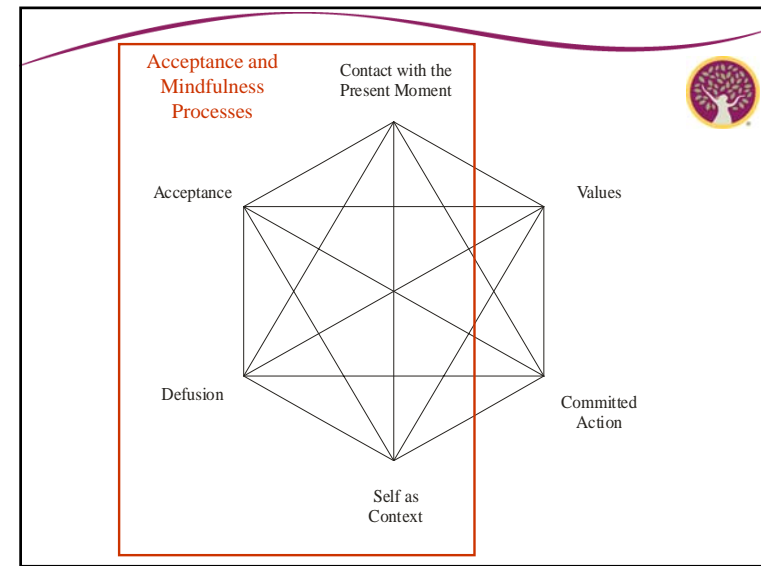
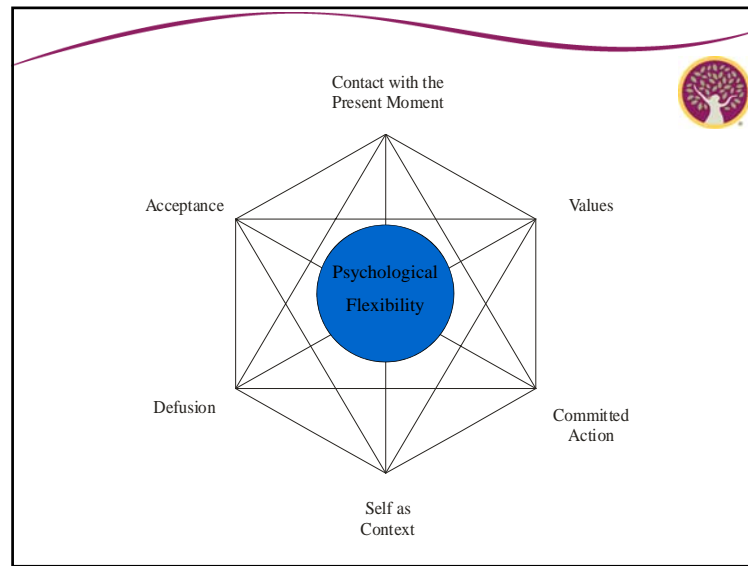
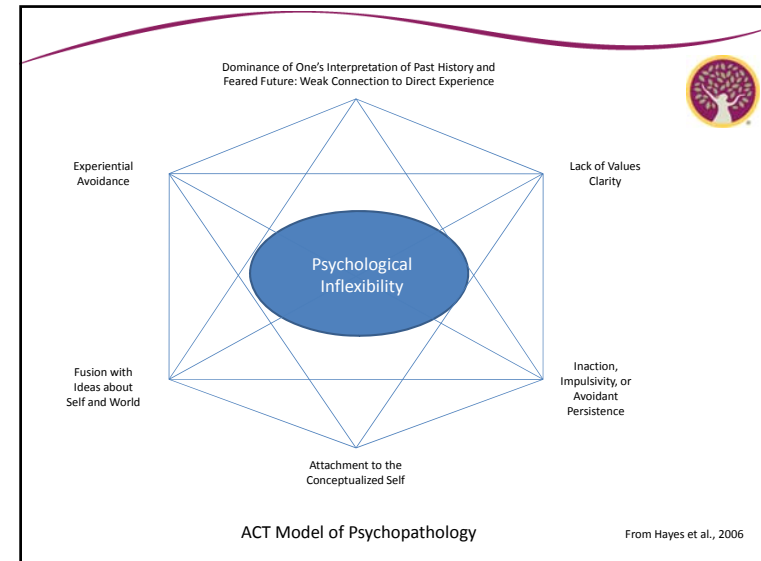
The Goal of ACT

To create a rich and meaningful life, while accepting the pain that inevitably goes with it.

Life is Suffering - Buddha

How ACT works

A= Accept your thoughts and feelings, and be present
 C= Choose a valued direction
 T= Take Action



6 Core Processes of ACT, in no particular order
Present Moment ☼ Mindfulness



**Stuck in the past
 or future tripping**



Thanks to our wonderful minds and language, humans can suffer and experience pain even on the most happy of days. We can have a memory that pulls us out of the moment, or we can begin to worry about something in the future that keeps us from experiencing and enjoying the present moment. We can begin to judge ourselves or others, or we might find ourselves comparing.

6 Core Processes of ACT, in no particular order
Acceptance ☼ Opening up to what is



Painful feelings

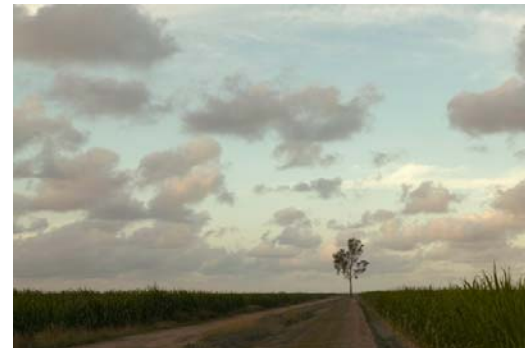
Urges

Sensations

Emotions



6 Core Processes of ACT, in no particular order
Defusion ☼ Stepping Back



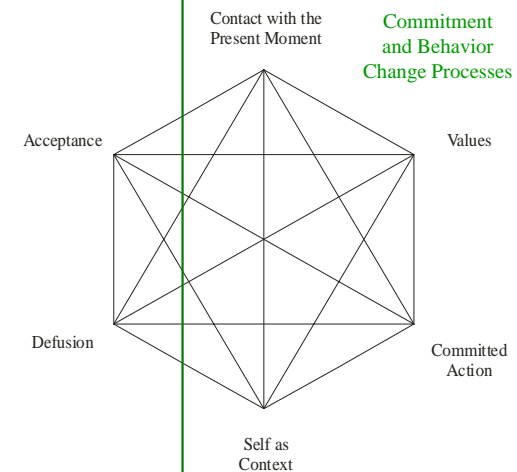
Fusion

- A process by which verbal events exert strong stimulus control over how an individual responds behaviorally
- A kind of verbal dominance in behavior regulation
- We respond to our mental constructions as though we are responding directly to a physical situation

6 Core Processes of ACT, in no particular order
Self as context ✱ **Thinking Self & Observing Self**



Chessboard Metaphor



6 core process of ACT, in no particular order

Values 🌟 **Know what matters**



6 core process of ACT, in no particular order

Committed Action 🌟 **Do what it takes**



Thoughts, Feelings, Urges,
Sensations, Worries, Fears

An ACT-Based Treatment Plan

Strategy	Description
Assess from a Values Perspective	How has your ED interfered with your life goals? What stories, thoughts, memories are you fused with?
Values Assessment	Each patient completes the Valued Living Questionnaire.
Confront the Agenda	Help patients see how their effort for change or eliminating are not effective (creative hopelessness).
Defusion	Help the patient gain some perspective on how their mind sends them messages. Learn how to let go of thoughts.
Mindfulness	Skills for helping patients be present to the moment and their feelings. SLOW
Acceptance	How to take what you feel with you in service of your rich and valued life.
Committed Action	Setting goals to achieve you valued life and breaking them down into daily actions.

	Possibility	Current Importance	Overall Importance	Action	Satisfaction with Action	Concern
1. Family (other than couples or parenting)						
2. Marriage/ Couples/ Intimate Relation						
3. Parenting						
4. Friends/ Social Life						
5. Work						
6. Education/ Training						
7. Recreation/ Fun						
8. Spirituality						
9. Community Life						
10. Physical Self-Care (diet/ exercise/ sleep)						
11. The Environment (caring for the planet)						
12. Aesthetics (art, music, literature, beauty)						

Getting started: Values



Define your rich and meaningful life

Our patients do a values assessment at the beginning of treatment.

- All work throughout treatment focuses on: Does this thought, or this behavior, move you toward or away from your valued life?
- The goal is not whether a thought is true or false. Only if it is “workable”, meaning that it works to move a person toward their values.

Challenging the Agenda

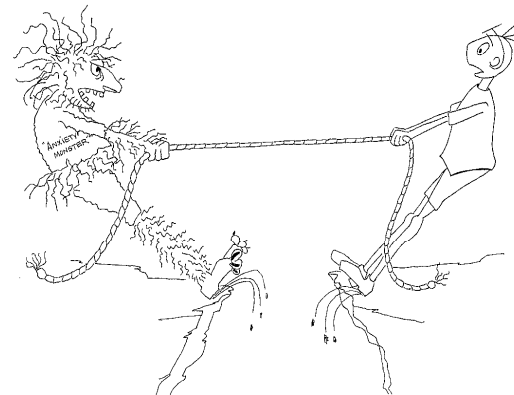


- Often our next step is to “challenge the agenda”. This means to help the patient challenge their agenda for eliminating painful feelings before they can engage in their valued life.
- The method for this is creative hopelessness: to take a detailed history of what the patient has already tried in service of changing their difficult thoughts or feelings. This is done with great respect and empathy, and helps the patient see that their “change” agenda has been tried and the thoughts are with them still.
- We highlight how all their hard work to avoid painful thoughts and feeling has actually created more pain and struggle in their lives.
- We then invite them to learn a skill set that allows them to move toward their valued life, even if these thoughts and feeling do not change.

The Metaphor of Quicksand



Tug of War Metaphor



Defusion



Eating Disordered patients are often tightly fused with ideas of body size/image/food, or with thoughts of the past, or fears of the future.

We incorporate psycho education about how our minds have evolved to think negatively. We've inherited fear-based hyper watcher minds from our ancestors telling us, "Watch out, don't get killed." Our mind is a "don't get killed" machine.

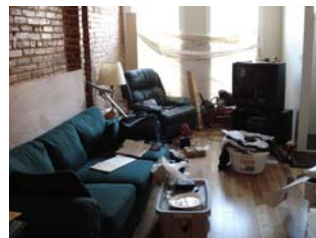
- I'm having the thought that.....(I am not good enough)
- So, what is your mind telling you now?
- Notice what your mind is doing right now
- Meditation-leaves on the stream
- Metaphor-clouds drifting by

Mindfulness



- Mindfulness is the tool for many of the goals we have in treating patients with eating disorders.
- Slowing down the thoughts/mind for anxiety management.
- Helping the patient to enter the present moment.
- Creating space to bring the observing self onboard.

The House and Furniture Metaphor



Getting to Acceptance



Acceptance is not resignation, gritting your teeth and getting through, putting up with it, or even liking it.

Acceptance is allowing ourselves to have our private painful experiences if and when doing so enable us to act on our values.

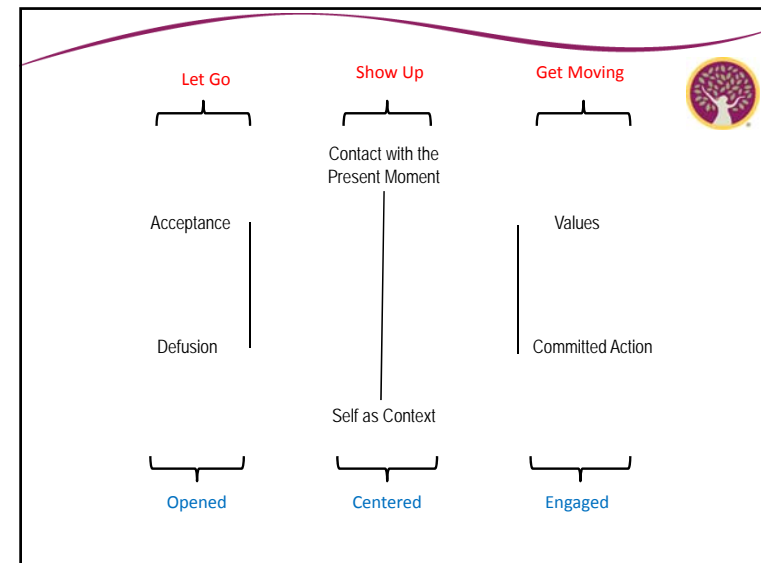
NOTICE AND BREATHE
ALLOW

Drop the rope

Committed Action: Do what it takes

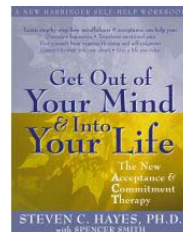
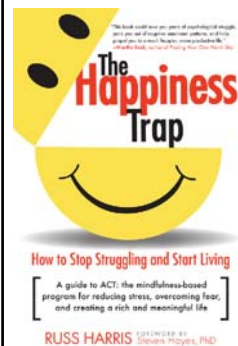
- Putting committed action into place in treatment
 - At the meal
 - In therapy sessions
 - In groups
 - In the family visit

Committed action means taking larger and larger patterns of effective action, guided and motivated by values. Using our values to set goals, and break those goals into specific actions.



Resources

<http://www.thehappinesstrap.com/>



To download this presentation online visit:

www.eatingrecoverycenter.com/eating-disorder-treatment-professionals/research

