Using Acceptance and Commitment Therapy to Negotiate Losses and Life Transitions

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Abstract

In this article, we describe the application of acceptance and commitment therapy (ACT) on clients coping with grief and loss. As a theoretical approach to grief counseling, we examine how ACT’s six core processes can be applied. ACT’s philosophical foundation and six core processes work effectively within the context of the grief counseling session. We suggest ACT strategies for working with clients who have experienced loss.

Keywords: grief, loss, counseling, strategies for grief counseling, acceptance and commitment therapy, ACT

Loss is endemic to the human condition. Individuals experience loss during expected life transitions, while other times, they face multiple, unexpected losses that can leave them devastated and isolated (Horn, Crews, & Harrawood, 2013). Clients requesting grief counseling can present with a myriad of losses, including death, divorce, loss of a job, or loss of a child through separation. Others may seek counseling due to transitional losses like moving away from home, starting a new career, or questioning the very meaning of their life choices. A client may seek counseling for depression and may likely also reveal losses pertaining to lifestyle, hopes and aspirations. While the severity, complexity, and nature of loss may vary, the course of navigating one’s grief may involve releasing hopes and dreams once deeply cherished (Duffey, 2005, 2013, 2015). As people experience the emotional pain, they often renegotiate how their future and dreams may unfold differently.
In some cases, they lose access to their creativity and feel paralyzed by both their grief and circumstances. Effective counselors engage clients authentically, compassionately, and creatively (Duffey, Haberstroh, & Trepal, 2009) to partner with them in meaning making and relationship building. At the same time, counselors utilize theoretical approaches and interventions that facilitate emotional relief and new perspectives for clients in distress. Acceptance and commitment therapy (ACT; Hayes, 2004) is one approach to assist clients negotiate the pain of grief and begin the path toward healing (Moules, Simonson, Fleiszer, Prins, & Glasgow, 2007).

In this article, we describe the experience of losses and life transition and the use of Acceptance and Commitment Therapy (ACT). Through this manuscript, we describe the loss experience, provide an outline of ACT as a theoretical framework, and outline the use of the six core processes of ACT for assisting clients with negotiating loss and life transitions. A case study is provided to demonstrated how ACT can be utilized within the context of counseling.

**Grief and Loss Counseling**

Given that people endure a number of life losses, such as death of loved ones, divorce, substance abuse, illness, trauma, career changes, and normative life cycle transitions (Duffey, 2005, 2013, 2015; Horn et al., 2013), grief is a significant component of counseling work (Horn et al., 2013). Ober, Granello, and Wheaton (2012) contended that helping clients work through their loss is a critical skill, and the demand for this skill will continue to grow. A majority of counselors will conduct some form of grief counseling throughout their career (Horn et al., 2013). It is anticipated that the current generation of baby boomers will request more grief counseling as they start to lose those closest to them (Ober et al., 2012). Consequently, requests for grief counseling services will increase and create a need for effective grief counseling strategies and related interventions.

**Conceptual Models**

There are many conceptual models of the grief process. Freud believed the purpose of grief was for people to detach from the deceased so they could form new attachments (Stroebe, Schut, & Stroebe, 2005). The stages of grief model proposed by Kübler-Ross, Wessler, and Avioli (1972) is widely used as a framework for conceptualizing the grief process and envisions people moving through different stages of grief. Other models of grief counseling focus on assisting clients to reconstruct the meaning of their loss (Burke & Neimeyer, 2013; Doka, 2001; Duffey, 2005; Horn et al., 2013). Consequently, clients may begin counseling and question why such a terrible event could have happened to them (Horn et al., 2013). The process of reconstruction is therapeutic because counselors consider the unique needs and context of their client’s loss. Reconstruction becomes personally relevant and meaningful (Horn et al., 2013).

As clients begin to construct meaning, the pain of their loss may be sharp and ever present. Duffey (2005) noted that while some clients avoid, minimize, or distract themselves from their losses, other clients experience chronic rumination. In both cases, the loss can feel overwhelming. Counseling provides opportunities for clients to learn coping skills that support their grief work. Moules et al. (2007) also postulated that
grieving clients often attempt to avoid the grief experience and the emotions associated with their loss. When clients ignore and deny their emotions, they may lose the opportunities to express their authentic pain, confusion, and facts surrounding their loss. Thus, some counselors suggest that grieving individuals identify and express their emotions associated with their loss (Stroebe et al., 2005). Therefore, counseling can provide a healing relationship where clients can express themselves according to their own timeframe. Underscoring this principle, Jordan and Neimeyer (2003) cautioned that inappropriately timed grief interventions could be harmful, and people can find meaning and healing from grief within their existing support systems and relationships. However, they argued that grief counseling interventions can be effective for clients when they are intentional, collaborative, and responsive to client’s particular needs, contexts, and grief experience.

Acceptance and Commitment Therapy (ACT)

Acceptance and commitment therapy (Hayes, Strosaul, & Wilson, 1999) may be one such framework and set of techniques that could offer clients tools to navigate their grief process. Acceptance and commitment therapy (ACT) is part of the “third wave” of behavior therapy and refers to a broad collection of widely used empirically-based strategies. Philosophically, some of the ACT roots stem from traditions of Eastern and Western religion and emphasize that that suffering is essential to the human experience. Grief is emotionally powerful and grounded in language, personal messages, and an experience that is painful. Counselors using ACT consider the primacy of human suffering, integrate mindfulness strategies, and offer clients perspectives on their thoughts and circumstances. As such, clients use language to influence their grief experience and growth by defining perceptions of their loss using words and meaning.

Language is a culturally-defined process used to describe “the link between a name and the person or thing denominated by it” (Frazier, 1911, p. 318). ACT theorists believe that psychological and emotional pain emerges from the way language and cognition interact (Hayes, Luoma, Bond, Masuda, & Lillis, 2006), entitling these interactions as cognitive fusions. ACT acknowledges the relationship or fusion between cognition and emotion and how problems can occur when messages are maladaptive in relation to one’s experiences. ACT theorists describe this incongruence between experience and personal messages as experiential avoidance (Hayes, 2004). For example, a client may perceive loss as a form of rejection, and state “I lost my job because I was not good enough,” or “if I had been a better person, I would not be in this predicament.” Such language denigrates their core value and may result in unhealthy bereavement.

Experiential avoidance (EA) is an unwillingness to remain in contact with feelings, thoughts, and experiences of the past that are associated with pain (Bohlmeijer, Fledderus, Rokx, & Pieterse, 2011). The paradoxical effect of avoidance results in further psychological distress. As a result, the very symptoms the client is attempting to avoid become amplified. This further reinforces how avoidance can become a maladaptive solution for grieving clients and how essential it is for counselors to provide strategies for reconnecting clients to their experiences. Moules et al. (2007) described how counselors “listen, witness, and acknowledge suffering, normalize, and give space for grief” (p. 138).
Therefore, ACT may provide counselors and clients with strategies to conceptualize and negotiate their grief and thereby, promote the healing process.

ACT has been utilized with bereaved clients (Romanoff, 2012) and helps bereaved individuals struggling with prolonged, complicated grief use mindfulness to accept their experience. A number of bereaved individuals interpret their thoughts as reality; however, ACT helps these individuals to process their thoughts as thoughts, rather than as a characteristic of themselves (Romanoff, 2012). The experience of a traumatic loss oftentimes has clients believing their world has shattered. It may be difficult for them to recognize their role in this experience. The ACT principle of concept of self helps individuals to connect with a transcendent sense of self and see the bigger role it plays in their experience compared to this constructed identity grief creates (Romanoff, 2012). While ACT has begun to be used in grief counseling, we contend that counselors can use ACT to assist clients navigate the losses and transitions they face.

**Six ACT Core Processes for Grief Counseling**

The strategies for working with grief clients are based on the six core processes of ACT. The six processes include: a) acceptance or willingness to experience negative emotions and thoughts, b) cognitive defusion, c) contact with the present moment, d) self as context, e) values, and f) committed action (Bohlmeijer et al., 2011). ACT uses metaphors to describe client experiences and dilemmas. Through metaphors, or the act of storytelling, clients can clarify their experiences and give voice to their grief. ACT’s core processes are described by Hayes et al. (2006) as being “psychologically flexible” (p. 7). This is particularly important because of the sensitive nature of grief. Moreover, given that many losses are ambiguous, developmental, and associated with life transitions, counselors can use the six core processes of ACT to conceptualize loss and transitions within clients’ lives. The following case study and case conceptualization demonstrate ACT principles in action.

**A Case Study: Using the Six Core Processes**

*Mary is a 52-year-old Caucasian woman who recently moved to a new city. She tells her counselor that she moved shortly after her youngest son moved out of the house. She is a single mother who took care of her three children once her husband left 10 years ago. She has not communicated with him since he moved out. Mary felt dissatisfied with her job and quit after 20 years with the company. She found another job two states away. She figured that since her children were no longer in the home, she could move away and start a new life.*

*Since her move 2 years ago, she has experienced bouts of depression with crying spells. She lacks motivation to do things she once enjoyed. Worried about her situation, Mary sought medical help. Her doctor told her that she is fine; he encouraged her to take walks and try to meet new people. She questions the counselor if she is possibly going crazy; she was once a very happy person who loved life. She tells the counselor that she has always been an extrovert, but now only leaves the house to go to work.*

*When asked about what brought her to counseling, Mary tells the counselor that she began gambling and over spending. She never struggled with this before her children moved out. She initially began playing bingo to get out of the house and meet people.*
Lately, she has been shopping almost every day and going to the casino. Mary gets teary eyed when she tells the counselor that she struggles to pay her rent each month despite having a high paying job. She has tried to avoid spending money, but she starts crying when she is not engaging in these behaviors. She is disconcerted and wants help.

**Acceptance.** ACT suggests that attempting to control a situation is problematic (Hayes, 2004). Because grief is naturally coupled with feelings of loss, clients may attempt to control the experience through avoidance and escape. Control can feel like an effective solution since the appearance of loss of control can seem unfathomable. Mary is afraid to be present because she fears the loss will be hurtful. She avoids the experience within grief. For Mary, acceptance does not mean she is okay with her children leaving, it means she accepts the situation, even though she cannot do anything about it, and she cannot change it.

**Cognitive defusion.** Cognitive defusion techniques attempt to alter the way that clients interact with undesirable thoughts and other private events (Hayes et al., 2006). The theoretical focus of cognitive defusion specifically targets the use of language; particularly how clients use language that reinforces traps, such as reason giving, emotional control, and literal self-narrative (Hayes et al., 1999). ACT acknowledges that language is limited in its ability to fully describe one’s experience. This is especially true of loss because the experience is complex and sometimes incomprehensible. Words cannot express loss and grief fully.

In an effort to use strategies for defusing maladaptive language, the counselor first helps Mary become aware of this dissonance. Mary realizes that she experiences thoughts that are almost inaudible. Yet, for clients like Mary, it deviates far from the actual event or any truth that has value to the healing process.

**Being present.** ACT principles support an ongoing non-judgmental approach to the private or overt experiences of grieving clients (Hayes et al., 1999). Essentially, they promote being fully present for the experience or being in the moment with the client’s pain. This further reinforces the request for Mary to accept her experience. The counselor helps Mary to see her experience from a non-judgmental perspective without imposing values. The core process of being present invites Mary to be connected to the experience of grief, as well as trusting the connection with her counselor and the counseling process itself.

**Self as context.** Self as context is defined by three measures: conceptualized self, ongoing self-awareness, and self as perspective (Hayes et al., 1999). In this process, the counselor asks Mary to look inward at her experience of grief. This process could not be done without healthy distancing. Therefore, the notion that her thoughts were not accurate brings Mary more in tune with self-awareness, which could potentially cause distress. While this process occurs, the counselor attempts to normalize what is going on with her in session and in process with her grief. Furthermore, the counselor teaches Mary that self as context is learned through experience rather than logic.

**Values.** Values are the framework for the future. Values, as described by Hayes et al. (2006), are “chosen qualities of purposeful action that can never be obtained as an object but can be instantiated moment by moment” (p. 9). This calls for Mary to define her values. By defining values, Mary can create a path for evolving her own grief experiences within her future goals. Without defining values, Mary may only have minimal grasp of her ideals. In this process, it is vital that she define what is valued as a
behavioral trajectory. This can be done without avoiding the confrontation of past or present grief experiences. The counselor serves as a guide for her to navigate wants and values for the future.

**Committed action.** Finally, ACT utilizes the values defined by the client to develop patterns for future action. This technique is similar to traditional behavior therapy, except for the previous strategies that address issues more exclusive to grief. ACT utilizes some of the traditional behavioral methods for change, such as homework, short-term and long-term goals, and addressing psychological barriers. To be committed to action, Mary will remain consistent with action regardless of real or perceived consequences. This is not to say that she will not periodically re-evaluate goals and values. However, it does mean that she is willing to work through barriers that contradict her goals. The counselor uses metaphors to describe the discrepancy between values and action to address and resolve ambivalence.

ACT is a process. Mary may digress into avoidance behavior because it feels more natural to her. It may be ideal to re-evaluate her values as she may have set goals conducive to her values, but she created values that did not match her ideas. Clients who come from traumatic pasts may fear triggers that bring painful memories to the forefront of their consciousness. In Mary’s case, she struggles with guilt, particularly around the loss experience. The counselor assists with the reframing process indicated in the first few core processes to help Mary normalize her grief.

**Conclusion**

Loss comes in many forms, and clients grieve their transitions and losses differently. Counseling offers clients a safe space to experience loss and a forum to voice their pain, hopes, and process of meaning making. There are many models to guide grief work. ACT is an emergent approach that integrates meditative philosophies and cognitive and behavioral theories (Hayes, 2004). ACT also offers six core processes as a framework for counselors working with grieving clients. This framework provides a structure by which counselors can assess their own level of mindfulness and presence with clients, while assisting clients to connect with and process the reality of their loss.

Given that pain avoidance can further injure clients during times of loss, identifying theories that help clients give name to their grief and mindfully take steps toward their own healing is an important therapeutic goal. In this respect, ACT can be used to help clients honor their experiences, give voice to their pain, and consider new perspectives as they make meaning out of their losses. Through the use of ACT, clients can promote congruence between their values and future steps toward healing.

**References**


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