



Eastern Health

Specialising in Personality Disorder and Complex Trauma

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Fostering change within an ACT framework Part I:

Leaning into creative hopelessness with clients with high-risk behaviours



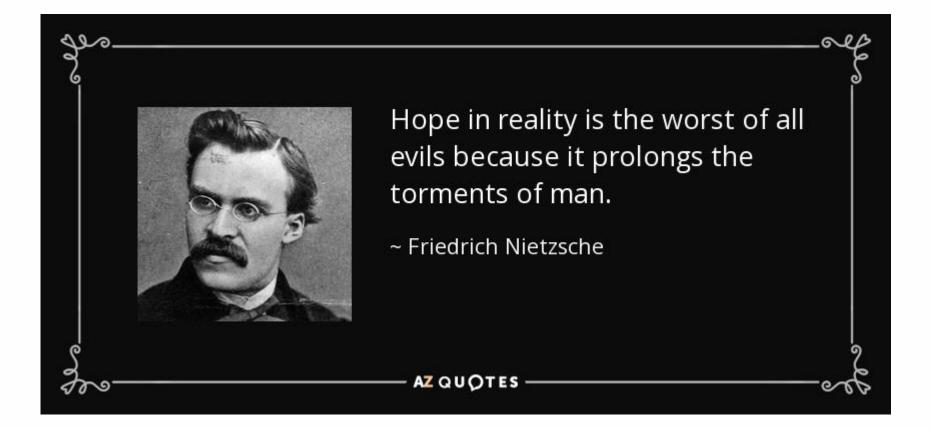
Objectives

- Introduce creative hopelessness as a tool for fostering change by moving from an agenda of control to an agenda of willingness
- 2. Outline some of the issues when applying this approach to individuals with high-risk behaviours (especially suicide)
- 3. Offer some thoughts on how these obstacles might be addressed within an ACT framework







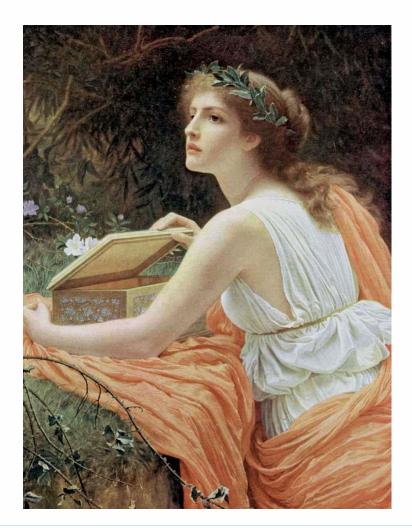






The paradox of hope

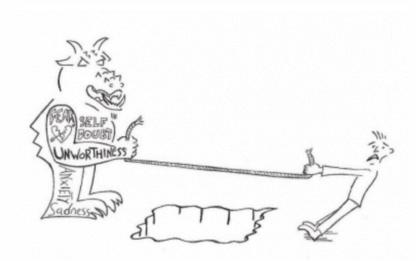
- The hope for change is what keeps many clients going in the face of otherwise intolerable circumstances
- However, repeated attempts to change our internal experiences can perpetuate our problems and prevent recovery
- In desperation many clients will cling to the hope for change by seeking the 'right' remedy for their suffering such as medications and increasingly invasive or novel treatments







The agenda of control



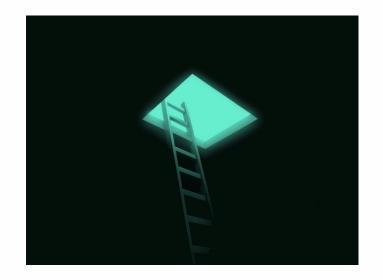
- Many clients cling tightly to the agenda of control - "in order to have a good life, I need to get rid of my unwanted thoughts and feelings and replace them with desirable ones"
- This approach often involves avoiding or suppressing unwanted experiences in ways that exacerbate and perpetuate problems
- It can lead to inaction because clients perceive themselves as incapable of action until their 'symptoms' are removed





Creative hopelessness

- Creative hopelessness aims to shift people from an agenda of control towards an agenda of willingness from where change can occur
- It involves accepting that the ways in which we have been trying to manage our unwanted experiences have been ineffective
- Rather than offering another way of trying to rid ourselves of our problems, asks if we are willing to have them
- Typically introduced at the start of treatment as part of an assessment and treatment plan







Creative hopelessness in five questions

- What have you tried?
- How has it worked?
- What has it cost you?
- What's that like for you?
- Are you open to something different?





What have you tried?

- When someone is seeking professional help they have usually tried a number of other interventions
- These can include trying not to feel the way they feel, trying to get what they need from others, using substances, NSSI, medications, excessive distraction, avoiding situations etc.







How has it worked?

- These interventions have generally not been effective
- In some cases they might have provided short-term relief, but the problems typically return or persist
- The strategies people use might have become less effective over time, necessitating more of the action (e.g. tolerance to substances or pain)







What has it cost you?

- These actions frequently incur costs, which might amplify the existing problem or create new problems
- Costs might include financial strain, loss of family or social relationships, physical health impacts, feeling worse about themselves etc.
- Need to focus on this as we are wanting to build a case for change







What's that like for you?

- We want to validate that the client has tried hard here
- We also want to validate that the client's efforts make perfect sense it makes sense to want to get rid of painful experiences
- Acknowledge the pain that might arise here and allow the client to connect with this
- Encourage self compassion if possible

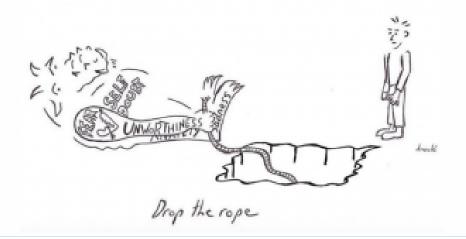






Are you open to doing something different?

- Clients are usually presenting for support because they want something to change
- We might want others to behave differently but this is outside of our control
- We often offer a metaphor here to illustrate the problem such as "dropping the struggle" or "digging yourself out of a hole"















For some clients this can feel risky

- What might this mean for clients who are already on the edge of giving up?
- For clients whose daily lives are intolerable, asking them to accept that they can't change their internal experiences or circumstances (even if this is only a starting point to driving change) might feel like asking them to accept a life that is not worth living
- This can be experienced as invalidating and rejected by the client





So how do we foster change within this group?

- It may be useful to clarify acceptance – acceptance doesn't involve approving of or moving on from unwanted experiences. In fact it means the opposite – we want clients to acknowledge and attend to the pain that they are experiencing in a respectful and compassionate way
- It may not always be appropriate to push creative hopelessness when we've assessed that someone doesn't have the capacity to sit with their experiences – we may need to come back to this gently over time







So how do we foster change within this group?



- Need to be sensitive to nuance around paradox of hope – don't want clients to give up, but instead consider whether it is possible for them to have these experiences and live a meaningful life
- In order to change our behaviour, we usually need strong motivation. ACT leverages values to enhance motivation to change





References & further reading

- 'ACT Mindfully', Russ Harris 2017 <u>https://www.actmindfully.com.au/upimages/Nuts_and_Bolts_o</u> <u>f_Creative_Hopelessness__May_2017_version.pdf</u>
- 'Learning Act', Hayes et. al 2007

