Acceptance and Commitment Therapy

Values, self as context, and committed action

Acceptance and commitment therapy targets psychological flexibility through six interrelated processes. Two of them, values and self as context, share ground with the path's central concerns. The frameworks differ on one point clinicians will notice: ACT treats values as chosen directions, and the path treats them as discovered in a person's own history. The difference can be held openly and used.

Clinical frame

- Six processes: acceptance, cognitive defusion, present moment contact, self as context, values, and committed action
- Psychological flexibility as the organizing outcome
- Values understood as freely chosen qualities of ongoing action
- Experiential exercises, metaphor, and behavioral commitments

Path to Freedom frame

- Values excavated from lived history and tested against ordinary weeks before they are written down
- The self as recognized, present beneath adopted layers
- Witness: stating plainly what is true about oneself without fixing it
- Reflection first, with few tools

Points of conceptual fit

Values and Alignment ALIGNMENT	ACT clarifies values to direct action. The path's excavation supplies a first draft drawn from evidence in the person's own life, which client and therapist can examine, refine, or reject in values work.
Self as context and witness REFINEMENT	Both take an observing position toward inner content. Self as context is a perspective from which thoughts are seen, and witness is the plain statement of what is true. A client may find the two vocabularies reinforce one another.
Committed action and Refinement REFINEMENT	Committed action turns values into behavior under discomfort. Refinement tests a discovered self against friction. The client's experience in one informs the other.

Division of labor

The clinician

- Assessment of flexibility and avoidance
- Defusion, acceptance, and committed action work
- Framing of where values come from

The path

- Excavation of values from lived history
- Witness statements, made alone
- Pointing the client back to the therapist

Coordination and cautions

The distinction between chosen and discovered values should be named and not smoothed over, or a client may receive two accounts of where values come from. The therapist decides how to frame it.

Return to the clinician when a memory returns with more force than reflection can hold, when sleep, appetite, or functioning change sharply, when panic, numbness, or a sense of being unreal appears, when there is fear of someone in the person's life, or when there are thoughts of ending life or harming someone (988 in the United States).

A proposed conceptual integration offered by The Autonomy Commission. It is not a manualized protocol and has not been empirically evaluated. The Path to Freedom is not psychotherapy, offers no diagnosis or treatment, and defers to the treating clinician on every clinical decision. Nothing is shared without the client's written consent.

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