

# Human suffering

pain, stress, life crisis



**“The single most remarkable fact about human existence is how hard it is for humans to be happy.”**

(Hayes, Strosahl, & Wilson, 1999)

Riddle??



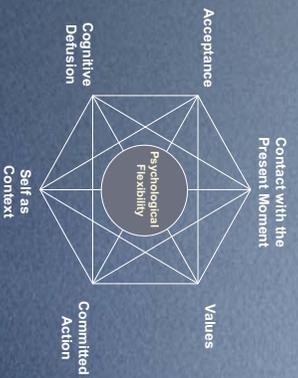
pain, stress, life crisis



## The ACT model of Psychopathology



## ACT Treatment Processes



## Human Language is Toxic

- Draws us into the future or past
- Produces increasing cognitive entanglement
- Focuses our attention in the wrong places
- And even claims to BE us

08/15/23

## Riddle??

The Swedish health care system offers more solutions to the with chronic pain and those on long term sick leave than any other system in the world.

No where in the world is this problem so great and so costly.



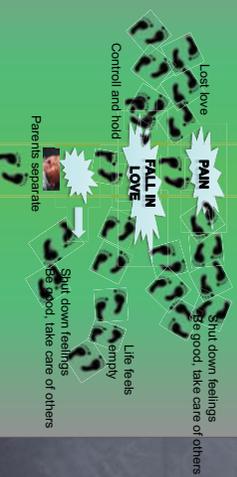
## BEING THE POSITIVE REINFORCEMENT: COACH



Clinging on to 'good' feelings

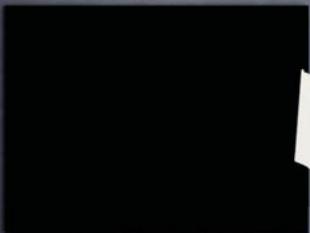
VALUED DIRECTIONS  
Vitality

Avoidance of unacceptable feelings

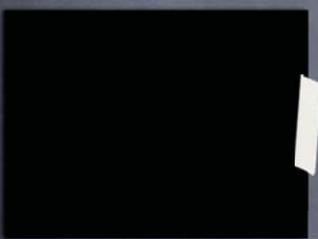


## ACT assumption

Pain and suffering are  
universal to all human  
beings.  
Languaging rather than the  
actual condition amplifies  
suffering  
Struggling with suffering  
creates more suffering

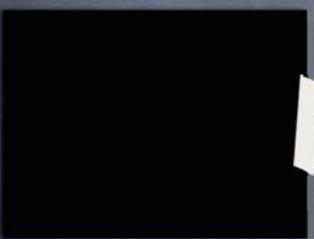


The dog and the  
man



Pathology model of pain

ACT assumption



# What is “Relief?”



Page 112 (2004) 1-4

Editorial

## Pain relief: a universal human right



[www.pain-assessment.com/relief.htm](http://www.pain-assessment.com/relief.htm)

**1. Introduction**  
Humanitarian aspects of pain relief have been the subject of editorial in this journal (Jansen and Lidenblad, 1994; Jansen, 1995; Jansen, 1996; Jansen, 1997; Jansen and Borchert, 1998; Carlson and Phillips, 1989) and others (Jansen, 1995; Sorenstvedt, 1991). Yet the gap between the humanitarian ideal and the actual practice of pain treatment is widening—in aggregate, fewer than 50% of patients with acute, chronic, or cancer pain receive adequate

(2001). Chronic pain must be regarded as a defining entity because of the contribution of physical, psychological and environmental changes produced by pain per se (Carlson, 1999; EPIC, 2001; Suddall and Cousins, 2001). Societal and professional attitudes toward pain management in the community: assessment and reduced effectiveness (prevalence) of costs of health care; loss of income; morbidity; at home; workers compensation and disability; and the impact of pain on the quality of life and pain are estimated at US\$100 billion, and to speak of intervention human suffering there and globally.

The best a primary care physician can do for a person with chronic pain is nothing. Nothing is better than anything that is done today.



## SBU: metanalysis of all pain

The best a primary care physician can do for a person with chronic pain is nothing. Nothing is better than anything that is done today.



# Pathology model of pain

When pain was unavoidable it was bearable, when it became avoidable, it became unbearable

‘The past is never dead.  
It’s not even  
past’ (William Faulkner  
(1897-1962))

# Our clients

- have real pain/stress



# Our clients

- have real pain/stress
- have tried to fight their pain/stress



# Our clients

- have real pain/stress
- have tried to fight their pain/stress
- have tried to control their pain/stress



health care provides simple quick fix solutions to complicated human problems that are mostly unsolvable.



Solutions are the problem

health care provides simple quick fix solutions to complicated human problems that are mostly unsolvable.



# Our clients



# Chronic pain



- About 95% is unexplainable

# Chronic pain



- About 95% is unexplainable
- Causal models for chronic pain fail in reliability and validity

# Chronic pain



# Our clients

- have real pain/stress
- have tried to fight their pain/stress
- have tried to control their pain/stress
- have tried to ignore their pain/stress



# Our clients

- have real pain/stress
- have tried to fight their pain/stress
- have tried to control their pain/stress
- have tried to ignore their pain/stress
- have failed



# Our clients

- have real pain/stress
- have tried to fight their pain/stress
- have tried to control their pain/stress
- have tried to ignore their pain/stress
- have failed
- just keep on trying





## Bad news is



## Bad news is



- Human Suffering is a unsolvable problem

## Chronic pain



- About 95% is unexplainable
- Causal models for chronic pain fail in reliability and validity
- Humans dont like unexplainable things

## Chronic pain



- About 95% is unexplainable
- Causal models for chronic pain fail in reliability and validity
- Humans dont like unexplainable things
- Humans have a neocortex that generates ideas and solutions for problems whether its useful or not

## From an alien pt of view

Humans and their cortexes from an





How does that make you feel right now???



How does that make you feel right now???

**CREATIVE**  
**HOPELESSNESS**

**Bad news is**

- Human Suffering is a unsolvable problem
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**Bad news is**

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**Bad news is**

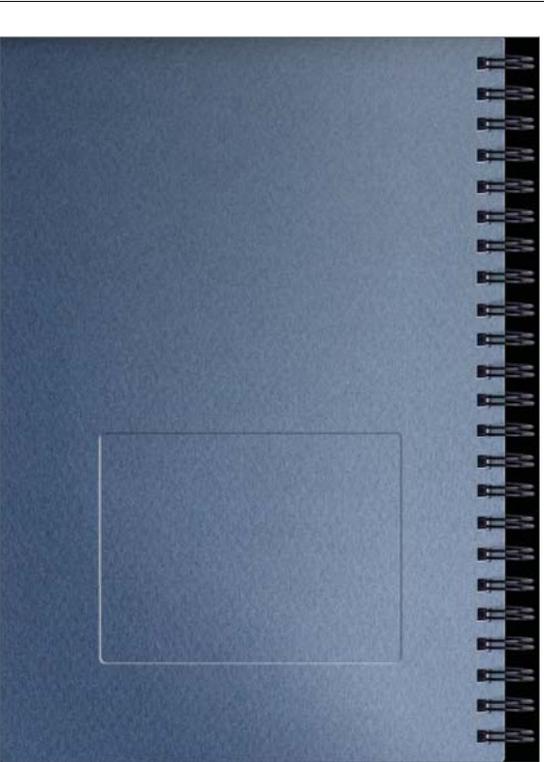
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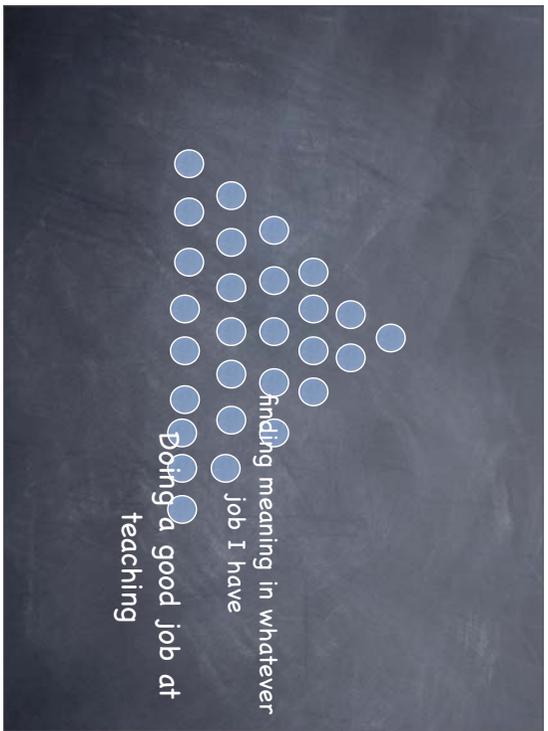
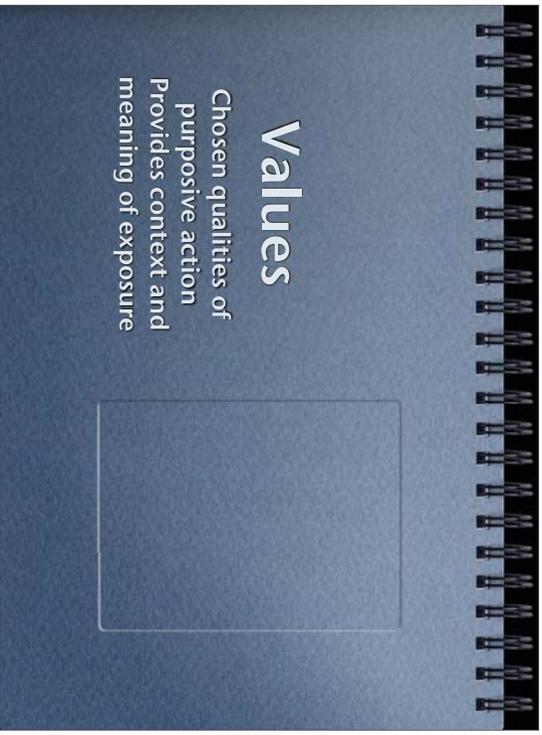
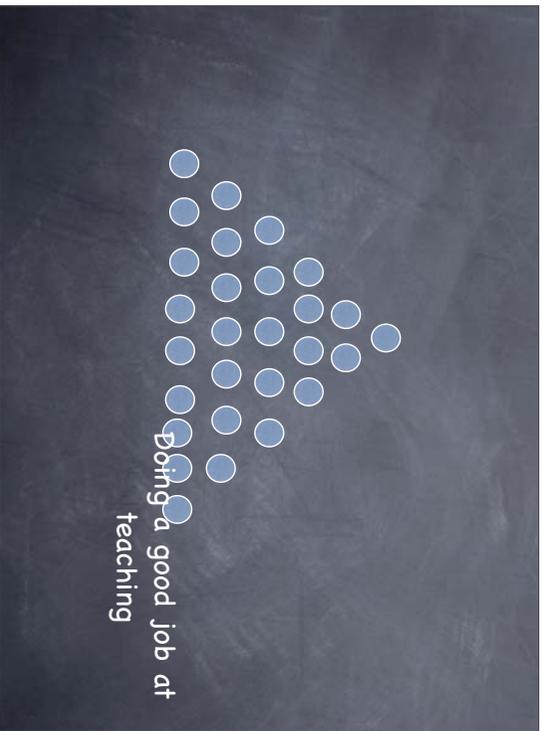
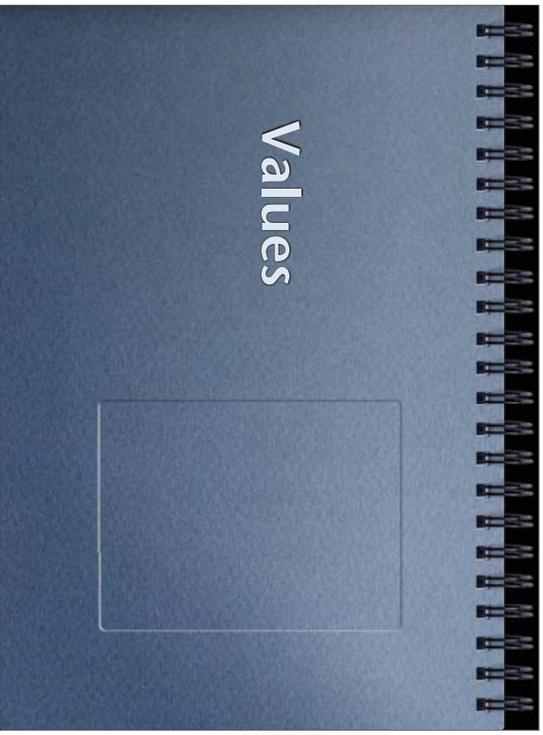
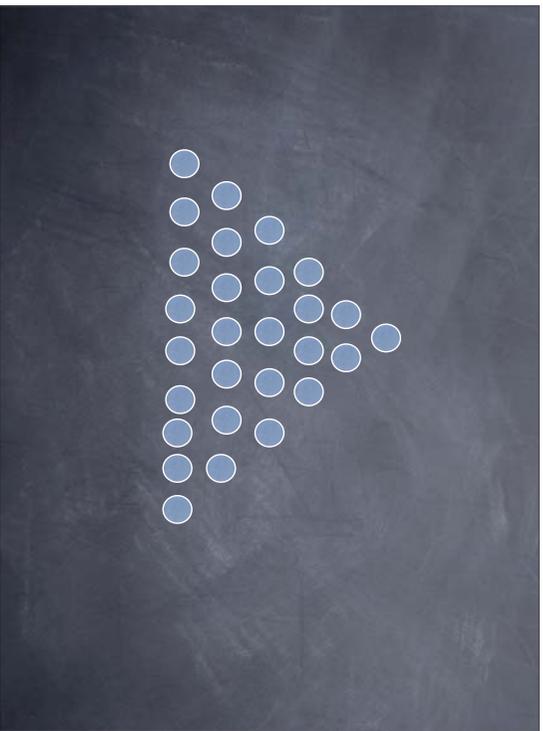


Fundamental questions in  
life are questions of  
values

 CREATIVE  
HOPELESSNESS

Valued directions link  
together life events





getting in touch with how I can contribute  
Finding meaning in whatever  
job I have

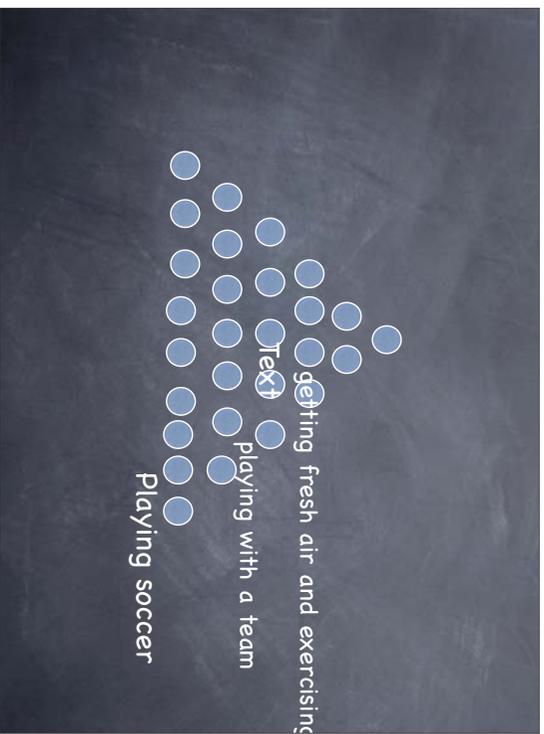
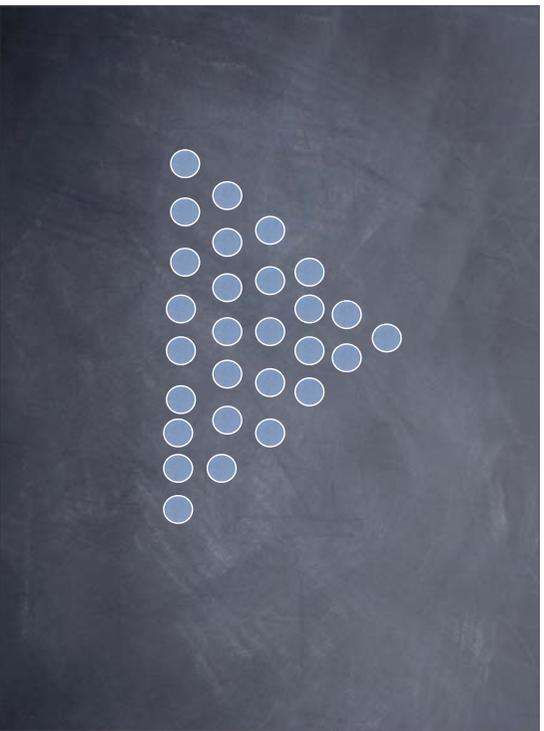
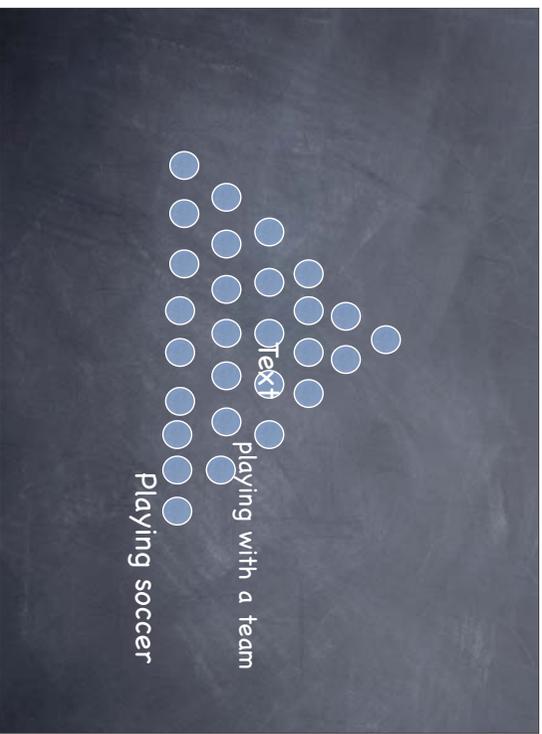
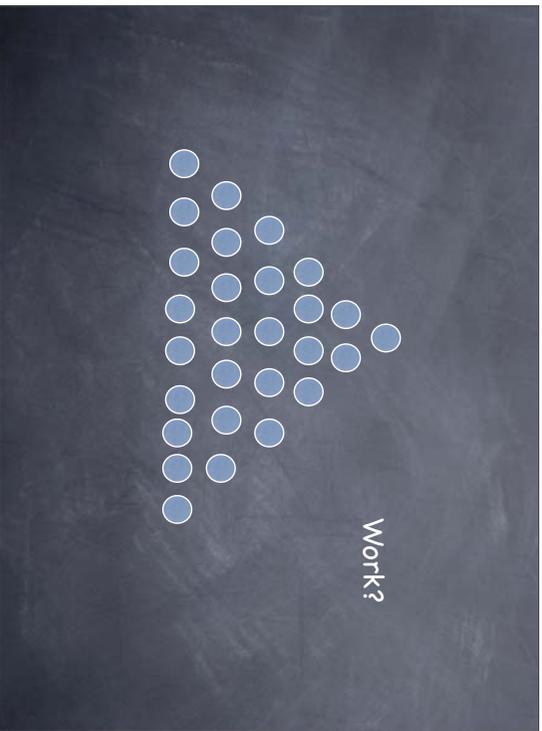
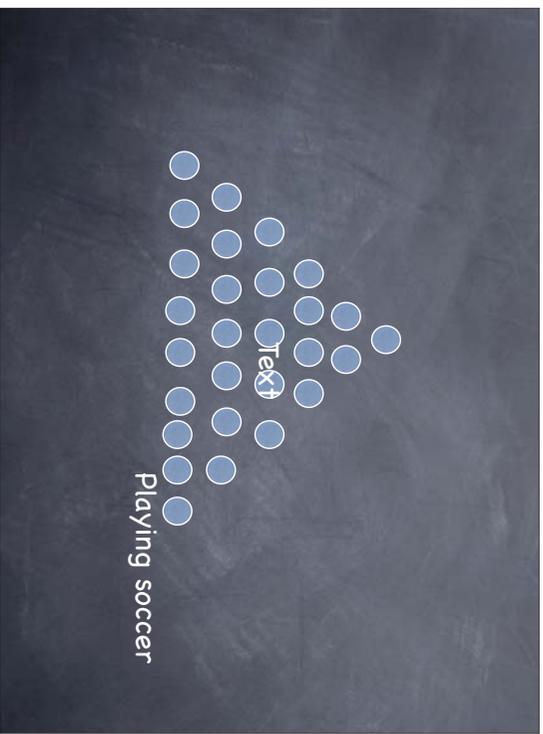
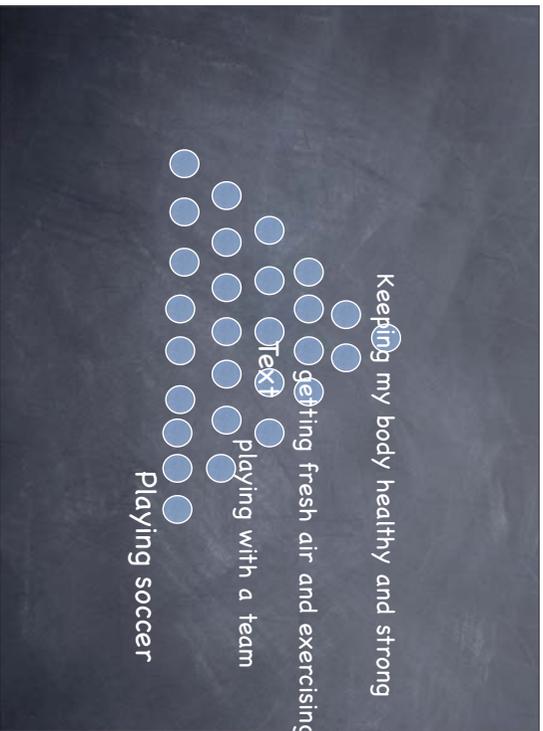
getting in touch with how I can contribute  
Finding meaning in whatever  
job I have  
Doing a good job at  
teaching

Relationships

Contributing to any collective I am in  
getting in touch with how I can contribute  
Finding meaning in whatever  
job I have  
Doing a good job at  
teaching

Text

getting in touch with how I can contribute  
Finding meaning in whatever  
job I have  
Doing a good job at  
teaching



practise loving kindness with myself  
willing to be present and  
loving with myself  
willing to keep myself present when in  
fear of being rejected  
being present with my  
partner Elin

health?

willing to be present and  
loving with myself  
willing to keep myself present when in  
fear of being rejected  
being present with my  
partner Elin

willing to keep myself present when in  
fear of being rejected  
being present with my  
partner Elin

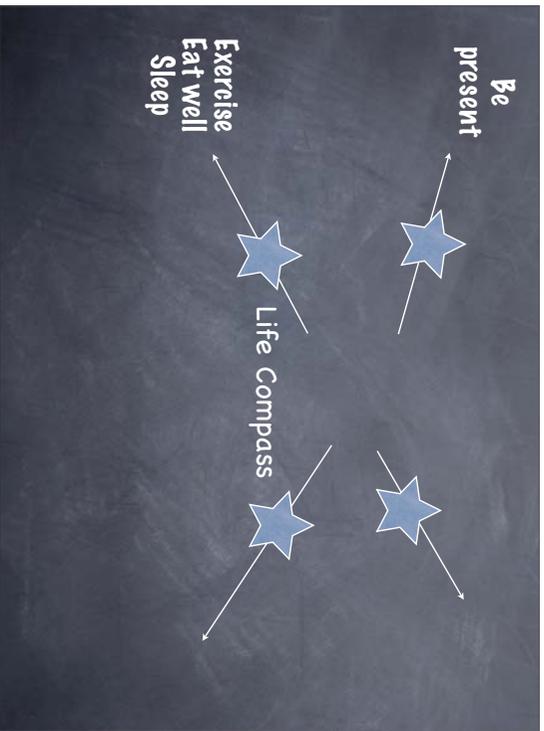
being present with my  
partner Elin

being in contact and giving myself what I need  
listening to myself  
being quiet with myself  
playing my guitar

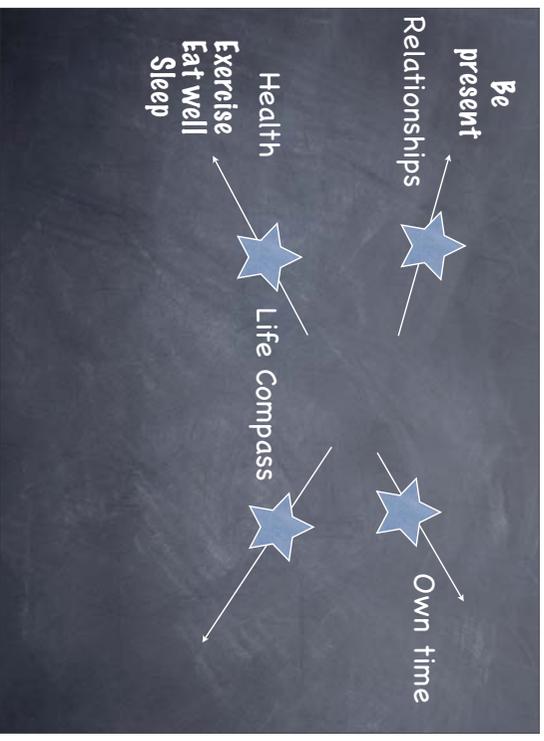
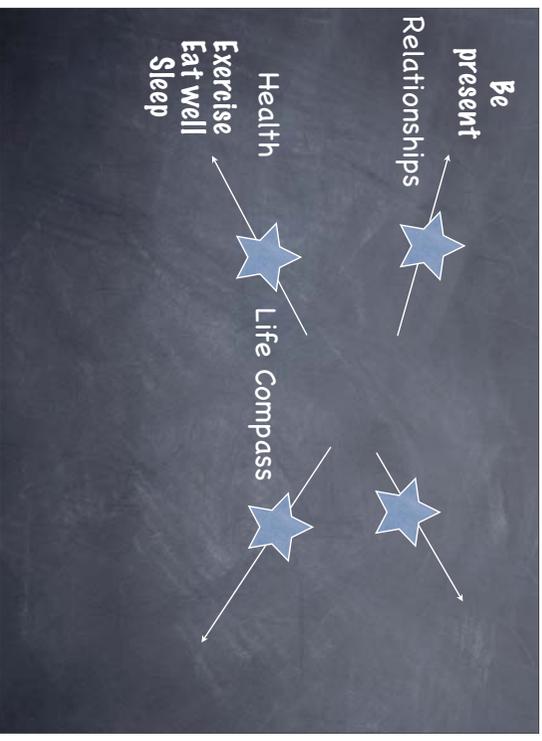
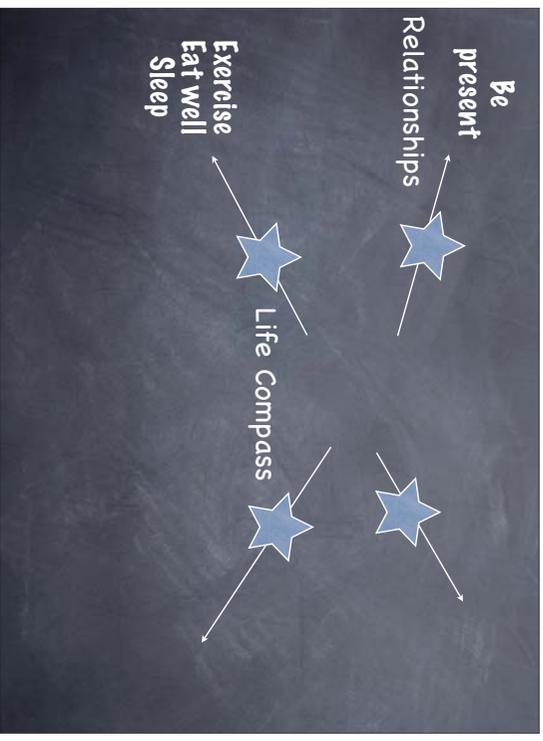
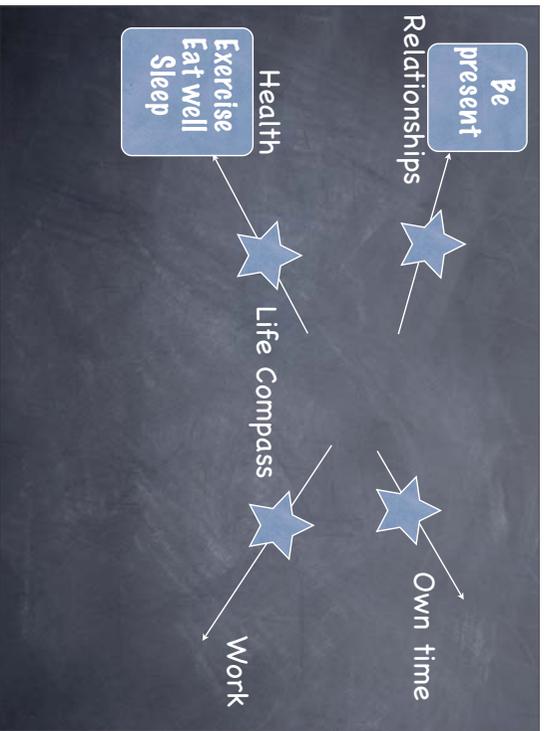
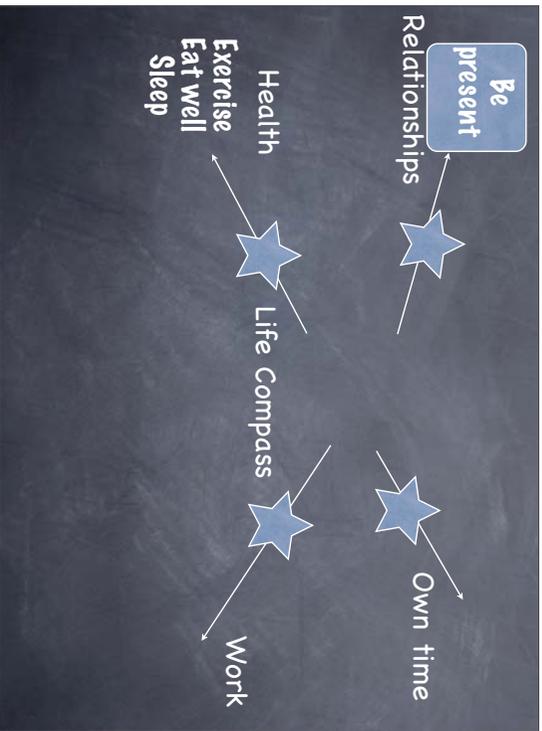
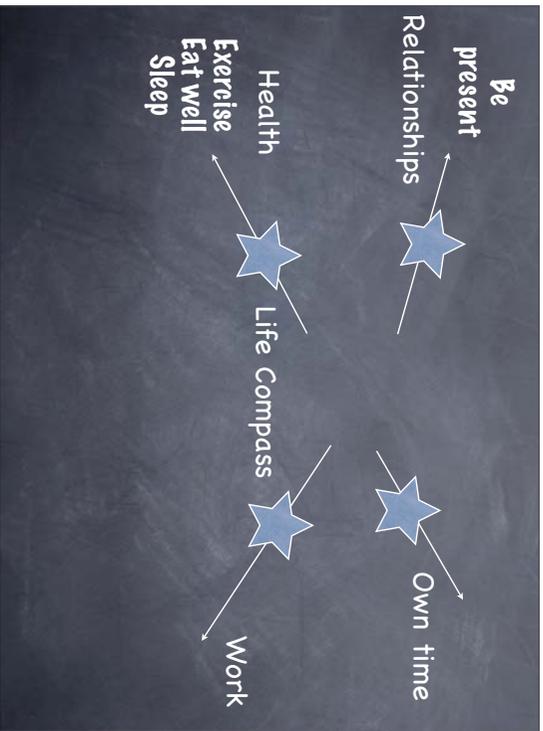
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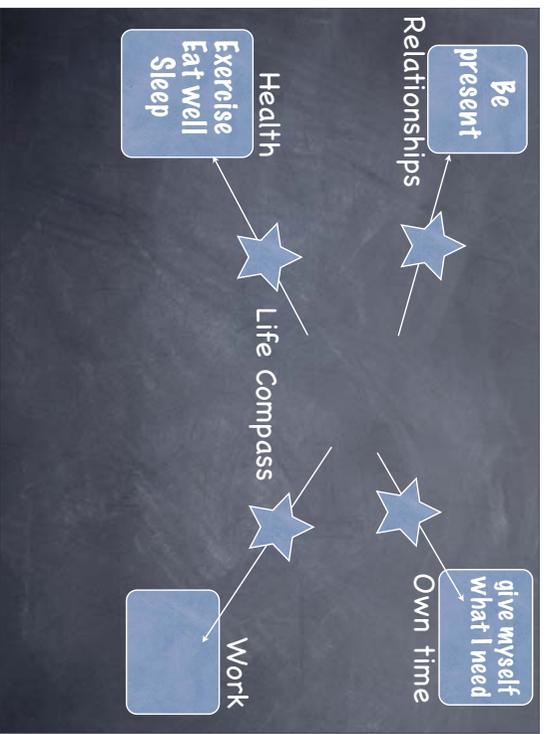
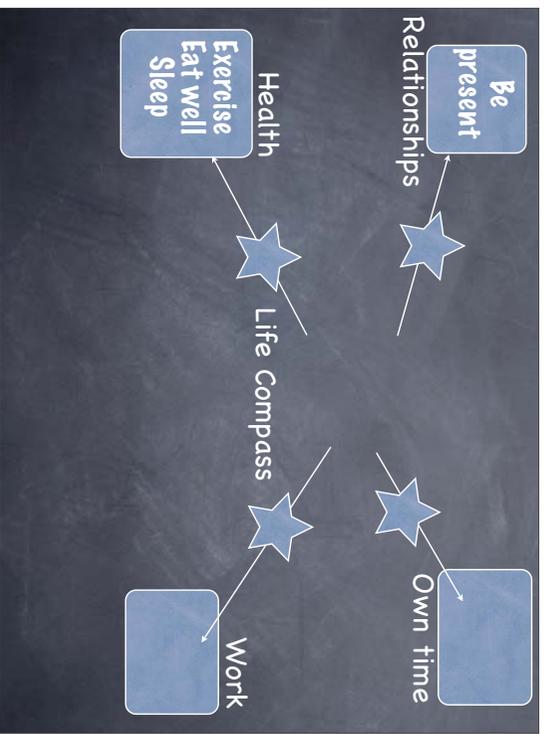
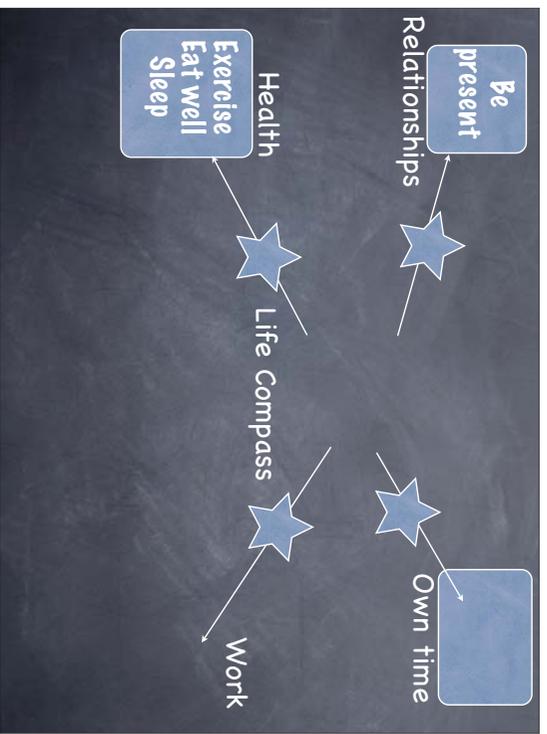
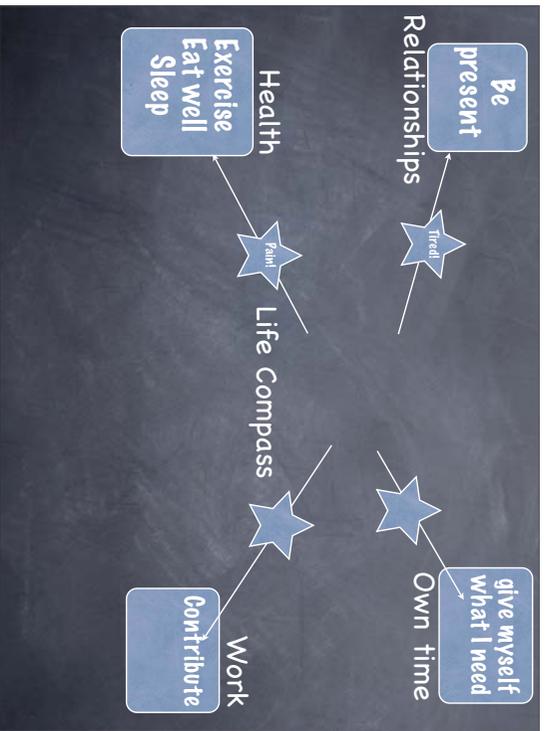
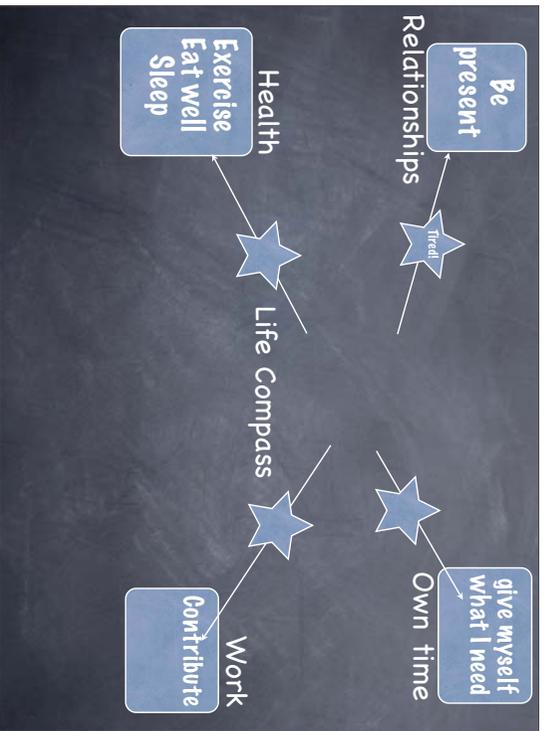
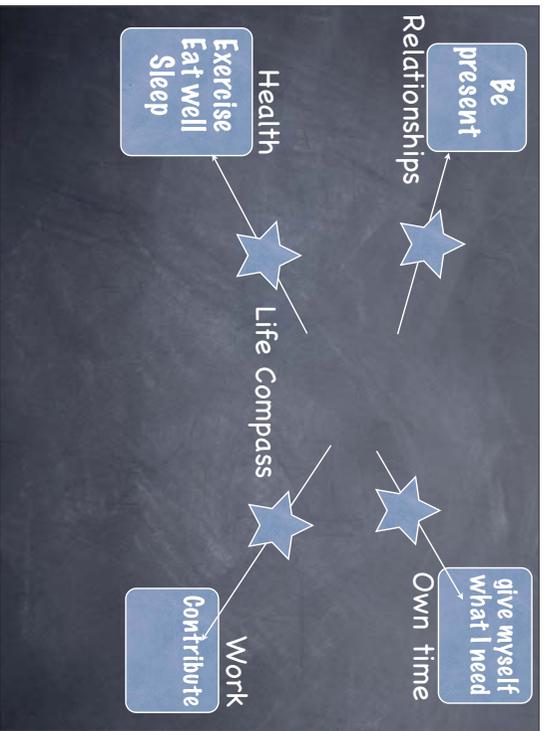
own time?

being quiet with myself  
playing my guitar



listening to myself  
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playing my guitar





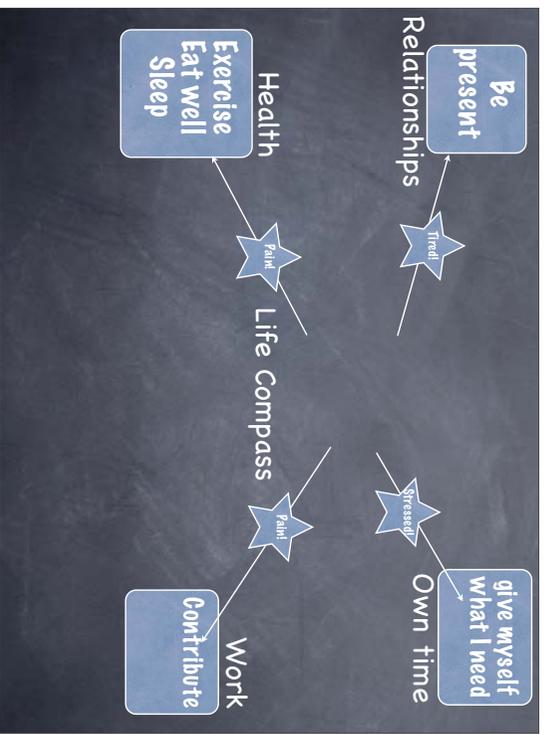
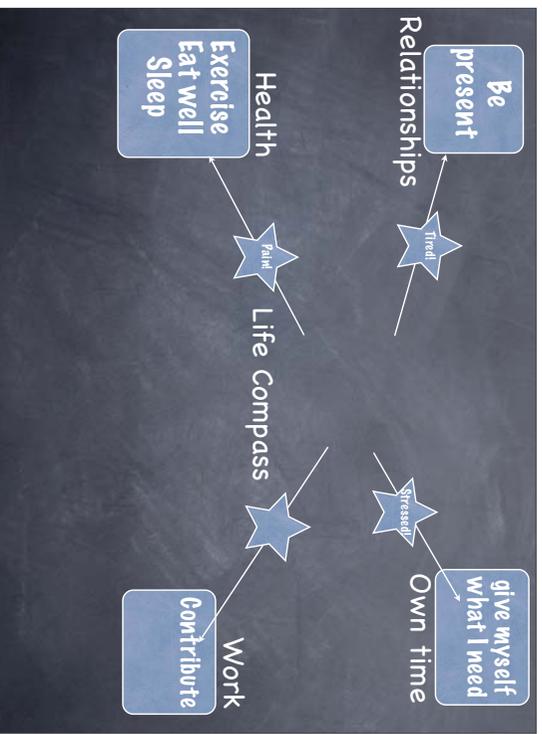
# Learning theory

- Negative and Positive Reinforcement
- Arbitrary & 'Natural' Reinforcement

# YOUR LIFE LINE

- I example of an event which you consider a significant loss
- I example of an event which you obtained your dream (reached a major goal).
- Event, feeling, how you related to that feeling

Valuing is a verb



INSPIRATION FOR VÄRDERAD EKTIVG...



## PROBLEMS KNOWING

- commercial world 'tells us' what we value
- Our parents 'tell us' what we value.
- Our nation 'tells us' what we value.
- Our learning history 'tells us' what we value.

## MORE CONFUSION

- feelings are not values
- judgements are not values
- thoughts are not values

## LANGUAGE TRAPS

- Fusion with conceptualized self: roles, rules
- Feelings are not causes: I still hurt so I can't explore a new relationship; vs: I feel hurt and I choose not to explore a new relationship. (we must feel a certain way before we can behave according to our values)

Valued

direction is  
not a goal

Valuing is a verb



TRYING TO AVOID NEGATIVE FEELINGS OR RETAIN POSITIVE  
FEELINGS JUST CAUSES MORE SUFFERING

HOW DO YOU KNOW WHAT  
YOU VALUE?

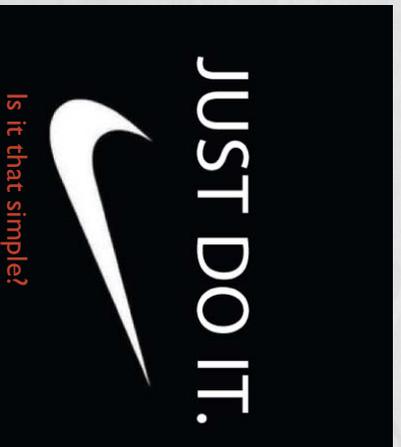
## FORM OR FUNCTION? EXPERIENTIAL

- The concept of impermanence
- Any form you consider positively reinforcing will become punishing if you continue pursuing it.
- Any form you consider punishing may entail positive reinforcement if you look closely.

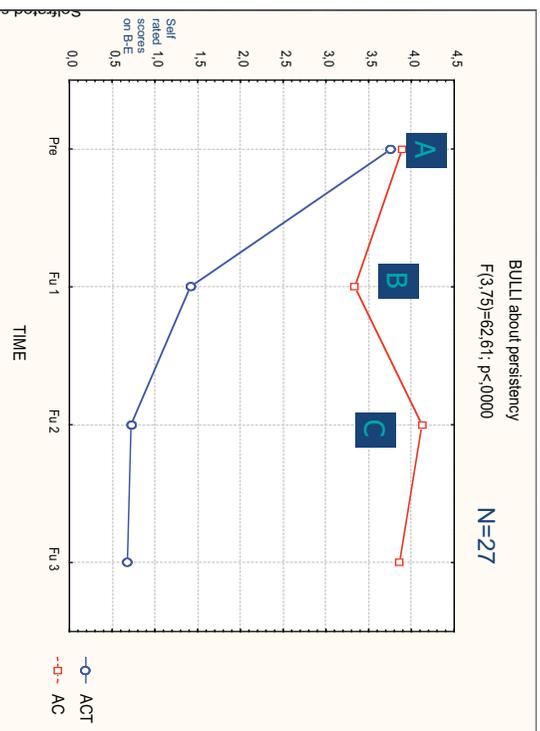
## WHAT ATTRACTS YOU TO THE CONCEPT OF VALUING?

### Valuing = Choosing

- each and every step is a matter of choice which is a matter of valuing
- it is what you choose with your feet, not your mind that reveals what you are valuing



It is how we do it that matters



## Bulls-Eye in process research

Lundgren, T., Dahl, J., Hayes, S. Evaluation of mediators of change in the treatment of epilepsy with acceptance and commitment therapy. *Journal of Behavior Medicine, In press.*

- In a treatment outcome study for persons suffering from epilepsy, pre to follow up changes in seizure reduction and increase in quality of life were mediated through ACT processes such as values attainment, defusion, acceptance and persistency in living a valued life even in the face of difficulties and emotional resistance.



NON-VITAL

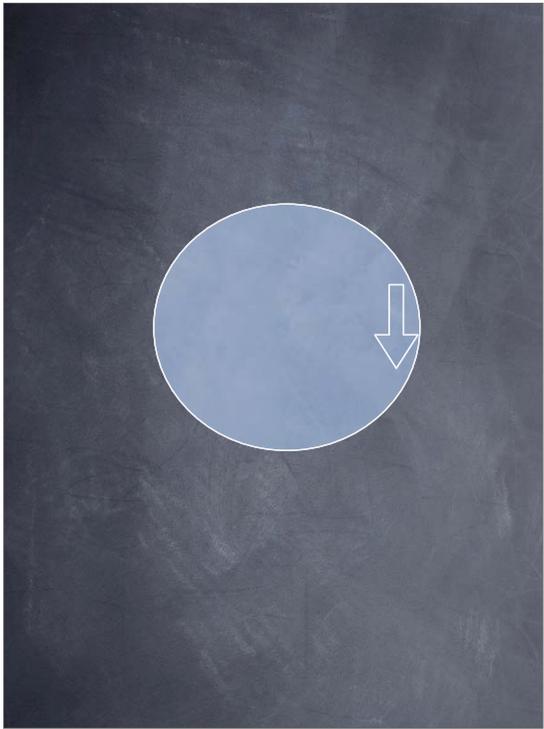
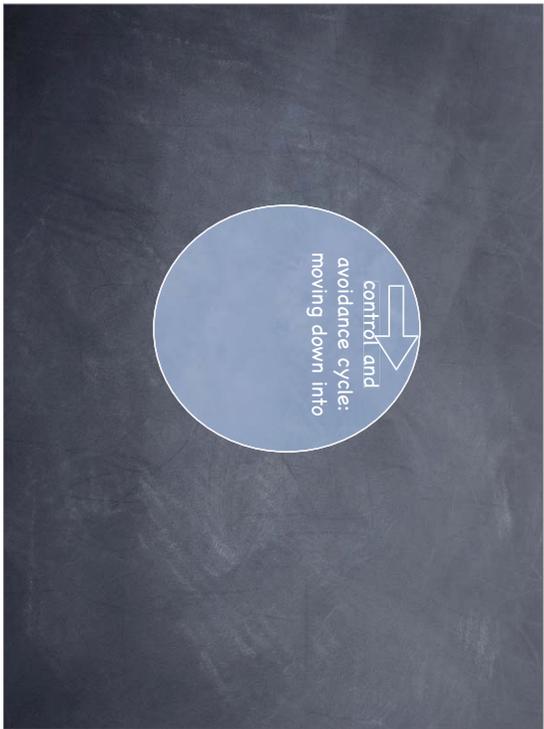
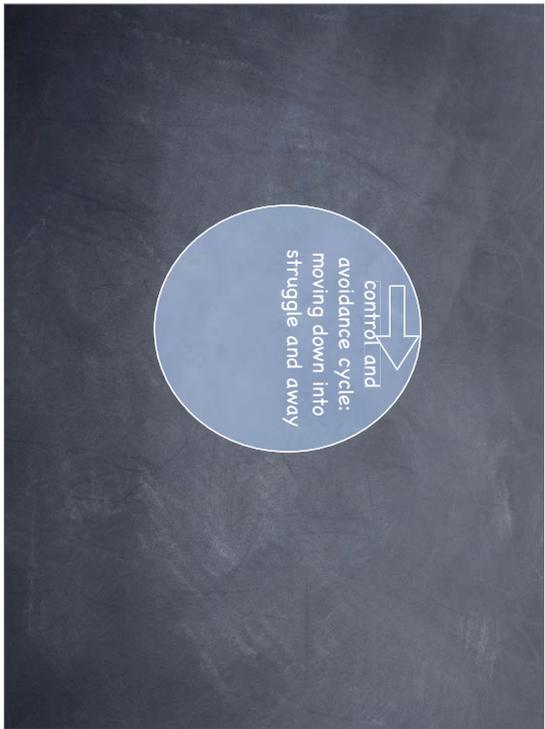
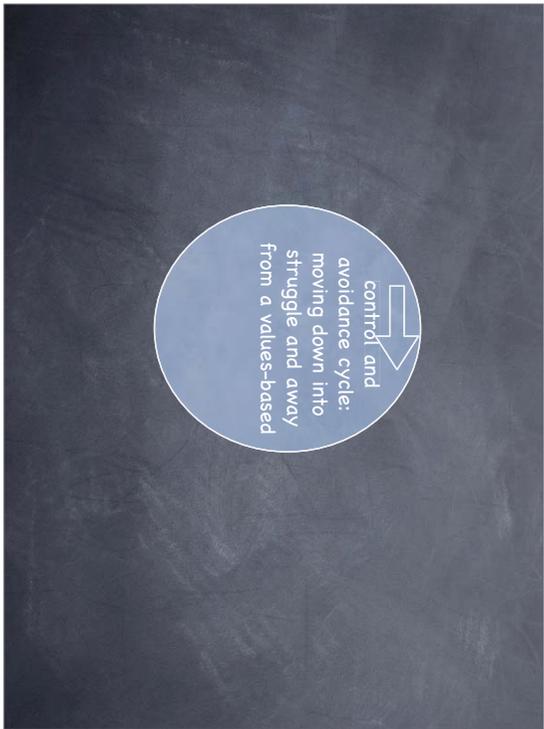
VITALITY!



## Daily activities

avoidance pliance vitality

- breakfast
- gym
- meeting
- lunch



Mindy chatter: when I feel pain, reasons, predictions consequences

control and avoidance cycle: moving down into struggle and away from a values-based vital life

Entanglement: taking literally, mindy solutions that call for escape, avoidance, making deals, losing who you are

Control and avoidance: complying with mindy solutions and buying these thoughts and engaging in the actual behavior they structure

control and avoidance cycle: moving down into struggle and away from a values-based vital life

Mindy chatter: when I feel pain, reasons, predictions consequences

control and avoidance cycle: moving down into struggle and away from a values-based vital life

Entanglement: taking literally, mindy solutions that call for escape, avoidance, making deals, losing who you are

Relief: temporary relief, illusions that mindy solutions may work this time

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Life Restriction and loss: life skrink, present moment disappears, vitality is lost

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# Tiger metaphor

the more you feed the tiger, the hungrier he gets!



## Pain

Mindy chatter: when I feel pain, reasons, predictions consequences

Life Restriction and loss: life skinks, present moment disappears, vitality is lost

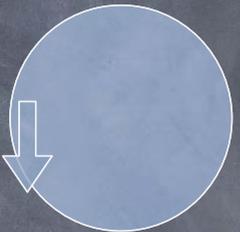
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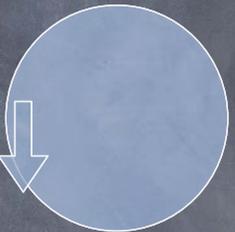
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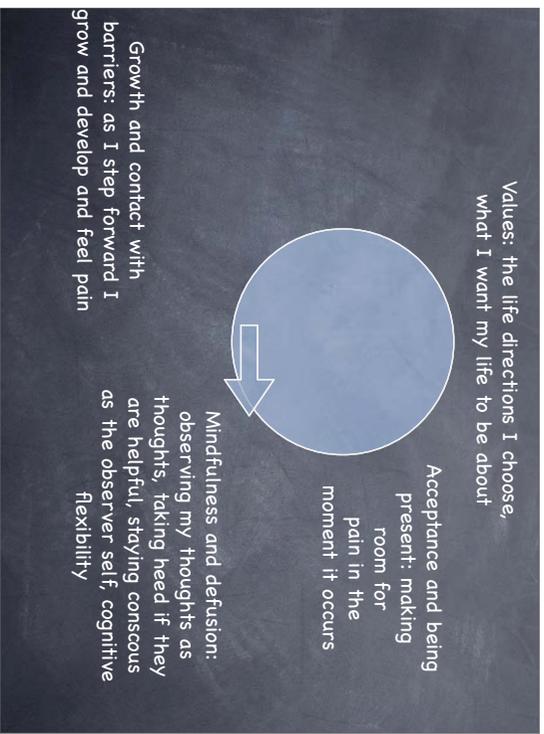
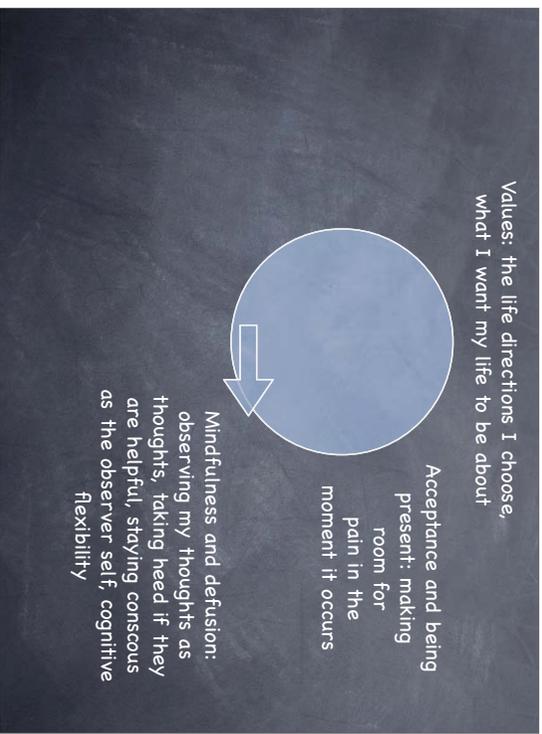
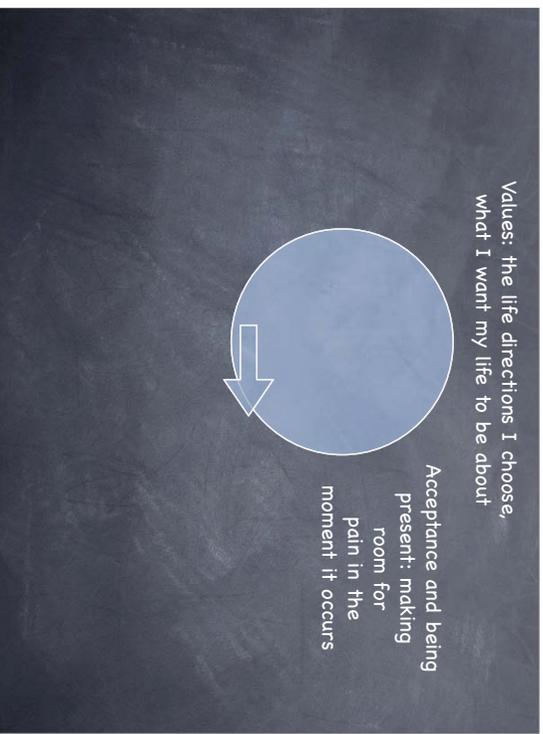
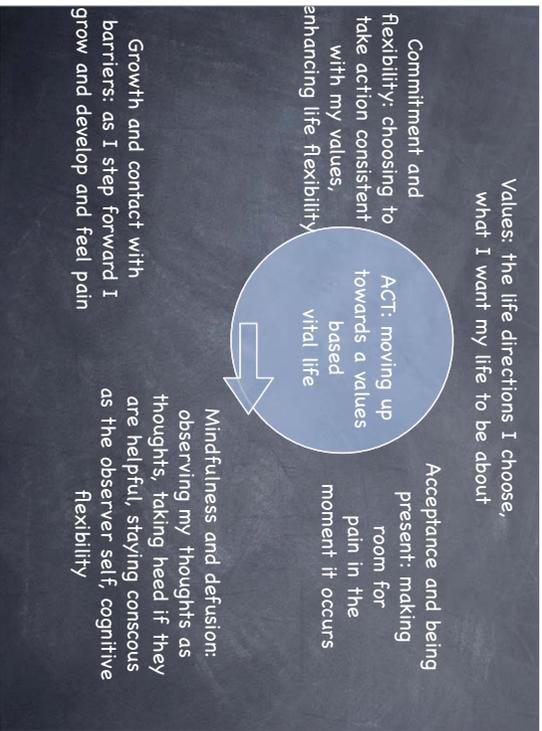
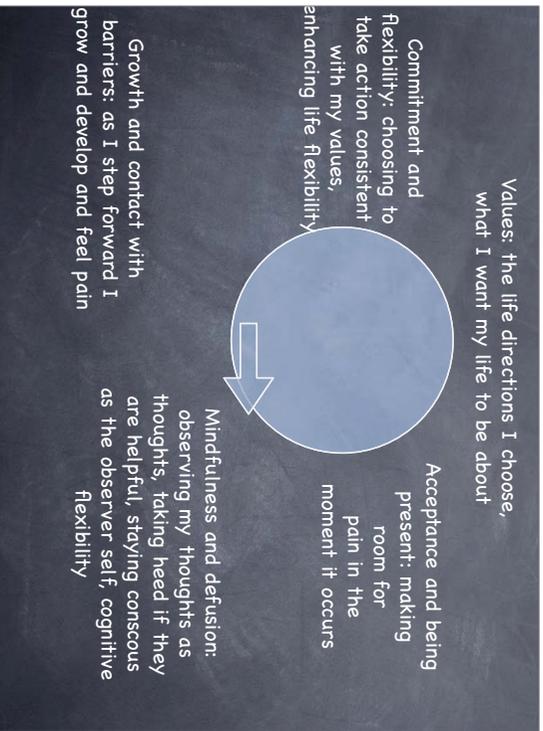
complying with mindy solutions and buying these thoughts and engaging in the actual behavior they structure



Values: the life directions I choose, what I want my life to be about

# Tiger metaphor







Defusion



Defusion

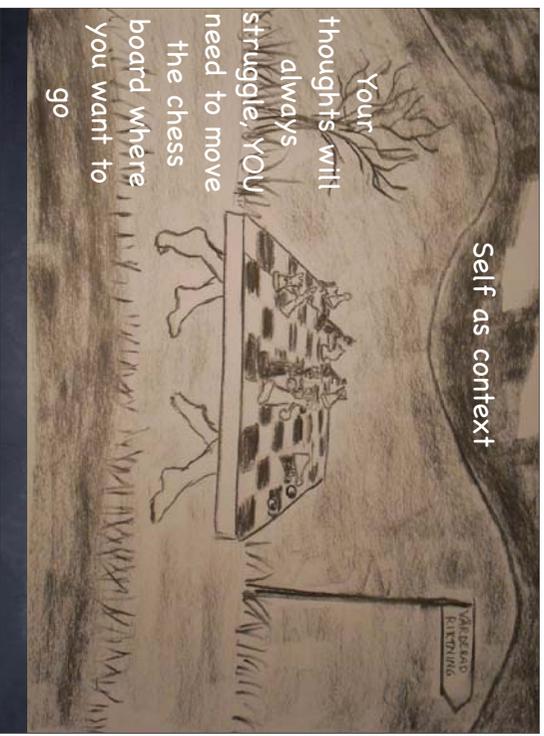
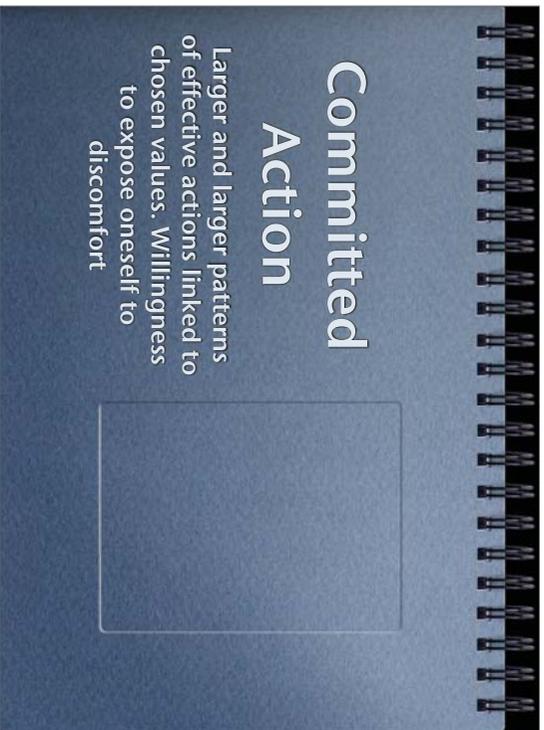
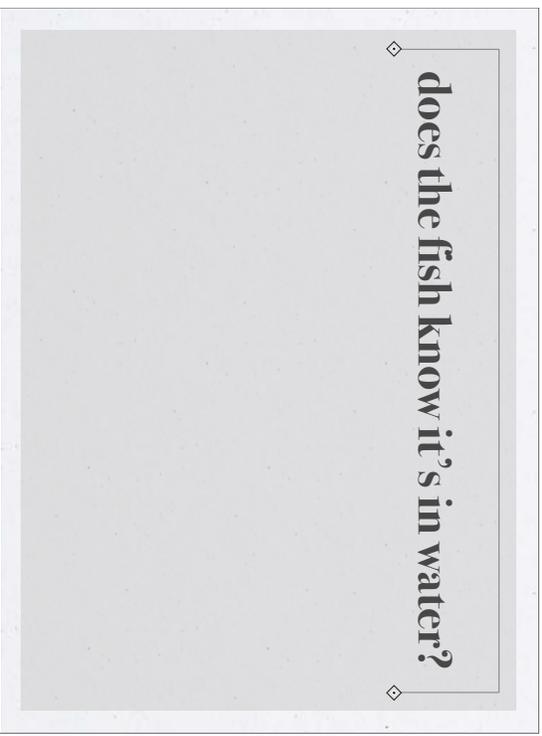
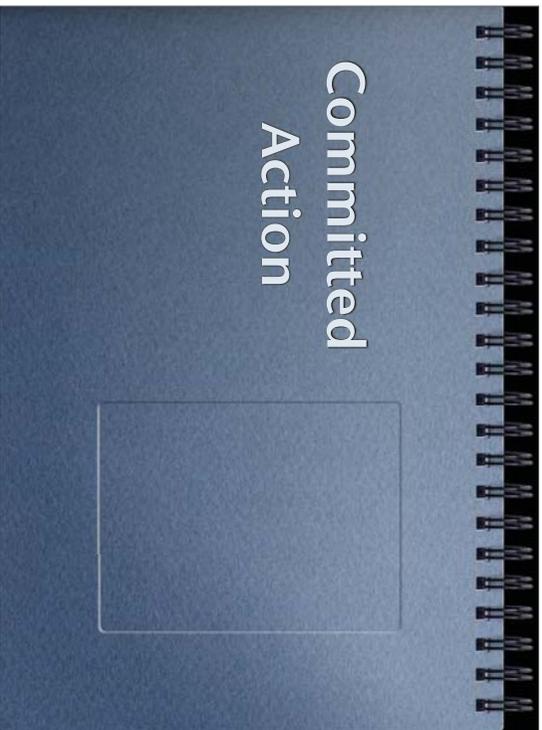
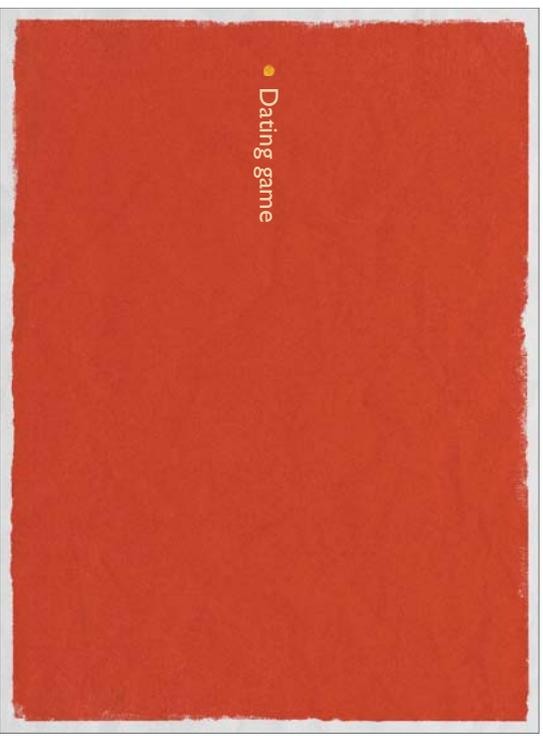
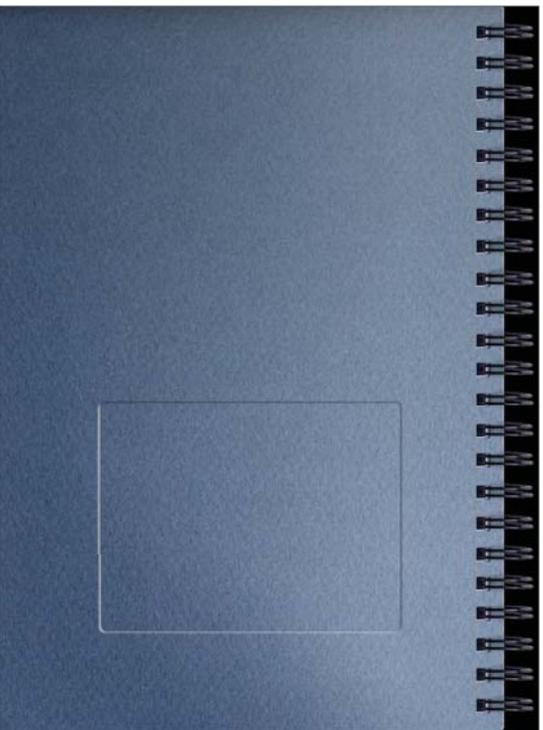


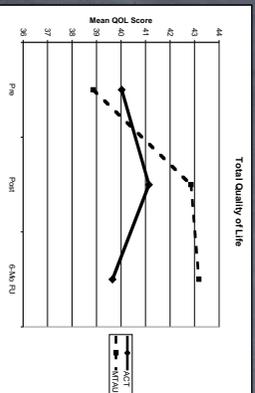
Are you  
willing to  
open up  
and  
embrace  
what is  
present  
here and  
now?



Acceptance

The Guest House (by Rumi)  
This being human is a guest house  
Every morning a new arrival  
A joy, a depression, a meanness  
some momentary awareness comes  
as an unexpected visitor.  
Welcome and entertain them all!  
Even if they're a crowd of sorrows  
who violently sweep your house,  
empty it of its furniture.  
still treat each guest honorably.  
He may be clearing you out for some new delight.





## Evaluation of an Acceptance based Self-Help manual



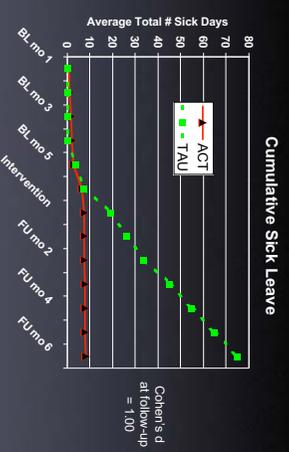
- minimal or no face to face outpatient psychological treatment (considerable savings!)
- Internet/telephone support helps patient at home.
- Manual based increases treatment integrity

## Advantages of manual based intervention

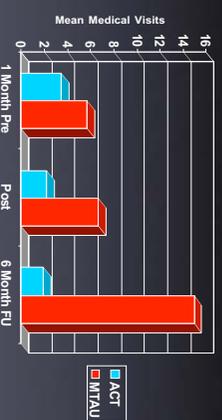
## Chronic Pain

Dahl, Wilson & Nilsson (2004), *Behavioural Therapy*, 35, 785-801

- ❖ 20 public health caretakers at risk for developing long-term pain/stress symptoms
- ❖ 10 TAU, 10 ACT protocol, 4 sessions at work-site/home
- ❖ Baseline=60 days, intervention: 4 1-hr sessions over 30 days, FU 60 days
- ❖ 2 therapists: 1 experienced CBT, 1 nurse



Medical Service Utilization: Physician, Specialist & Physiotherapist



# RCT

- Department of Psychology and the Pain Center, University of Uppsala
- RCT n=100, ACT/Applied Relaxation
- Evaluation of a Self Help book, 2 hours therapy face to face, 30 minute internet or telephone contact 6 weeks

## Project New Zealand Marie Johnston

University of Victoria 2008

- \* RCT trial 6 weeks cross over design (n=11)
- \* DV: Acceptance, quality of life, satisfaction with life, depression, anxiety and pain CPAQ, CRT, GQOL, SWLS, WPAQ, SF-CROD, IASI
- \* IV: Book and 30 minute telephone support weekly

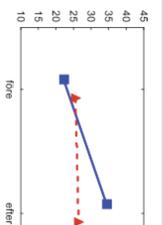


Figure 4. Poäng på delskalan deltagande i aktivitet i CPAQ

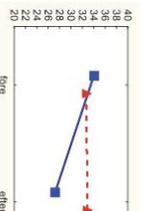


Figure 6. Poäng på delskalan fusion med sin själ i PIPS.

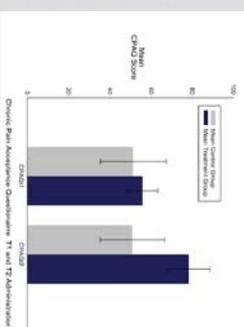


Figure 4. Mean CPAQ Score

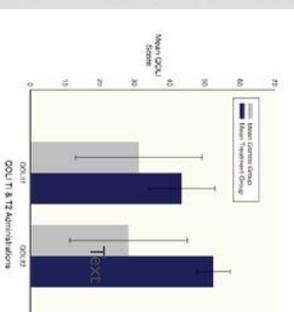


Figure 6. Mean CPAQ Score

## Contact info and references



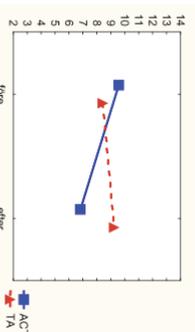
joannedahl.com

JoaAnne.Dahl@psyk.uu.se

[www.contexttualpsychology.org](http://www.contexttualpsychology.org)

Dahl & Lundgren, living beyond your pain  
2006, New Harbinger

Dahl et al ACT and the treatment of chronic  
pain, 2005, Context Press



Figur 7. Poäng på delskalan depression i HAQDS.

## Results

\*ACT group significantly improved in acceptance of pain, participation in activities, psychological flexibility for avoidance and fusion and depression

## Conclusions

- Acceptance based treatment compared to controlled based appears to yield promising long-term results
- The person with chronic pain may be more interested in getting his/her quality of life back than simply getting rid of the pain.