

In Chapter 1 of ACT Made Simple, I presented the ‘ACT In A Nutshell’ metaphor. If you use this with clients to illustrate the model, from time to time you will get an objection. It’s not common, but here are some ideas for how to respond if it does happen:

Section 1

The client is holding the clipboard in front of her face, and she says:

Client: I feel safer like this

Therapist: Yes, of course you do. And yet look what it’s costing you; how much are you missing out on? Hiding away from the outside world often does give a short term feeling of security – but what is the cost of making this your default for relating to the world around you?

The therapist asks, while the client has the clipboard in front of her face, ‘So do you feel connected with me, engaged with me?’

Client: Yes, I do.

Therapist: Okay. Can you read the expressions on my face? If I had tears in my eyes, or a frown on my head, could you tell?

Client: No, but I could hear it in your voice.

Therapist: Fair enough. How about if I was silent?

Client: Well, no.

Therapist: And suppose I was telling you an hilarious joke, which involved me pulling all sorts of silly facial expressions. Would you get more out of the joke if you could see my face as well as hear my voice?

Client: Yes.

Therapist: So even though you’re not completely disconnected – you can still hear my voice - you’re still missing out on a lot.

Section 2

The client is pushing against the clipboard, and has it at arm’s length, and he says:

Client: It’s better when it’s further away

Therapist: Yes, there’s a short term sense of relief, keeping it at arm’s length – but what will it cost you in the long term? Imagine doing this all day long – how tired would you get?

The client is pushing against the clipboard, and has it at arm’s length. The therapist asks ‘How does it feel, trying to push it away?’ and the client says:

Client: It feels really good.

Therapist: Sure. It’s a gentle work-out when we do it like this. But how would it feel after 24 hours of doing this? And how would it feel after a week? Or a month?

Section 3

3a)

Client: But that’s just a clipboard. It’s easy to do that with a clipboard. They’re not real feelings.

Therapist: Of course. This is only a metaphor. Later we’re going to look at how to do this with real feelings.

3b)

Client: So I just have to put up with it, then?

Therapist: Not at all. Putting up with it is doing more of the same. It’s like you’re still trying to push it away, but you’re so tired, you just don’t pushing very hard. Putting up with it is like

doing this. (*Therapist again pushes the clipboard out in front of her, but this time her arms are half bent instead of fully outstretched.*) It's still tiring, still costing you, still getting in the way of your life.

3)c)

Client: But I want to get rid of it.

Therapist: Of course you do. There's a lot of difficult, painful thoughts and feelings here. Who wouldn't want to get rid of it? I'm not expecting you to like, or want or approve of this stuff. All I'm just asking you to acknowledge that struggling with it takes a lot of effort, ties you up, and stops you from getting on with your life.

3)d)

Client: Well how do I do that?

Therapist: We'll get to that shortly. At this point, I'm just giving you an overview of the model.

Section 4

Therapist says, "And isn't it the case that this is now bigger and heavier than it was all those years ago when you first started struggling with this stuff? There are more painful feelings, thoughts, and memories here than there were five years ago, right?" and the client answers:

Client: No, I think it's smaller. I've done a lot of work on myself. I don't feel anywhere near as anxious as I used to.

Therapist: My apologies. Usually, most people find that trying to get rid of this stuff just creates even more of it – and I assumed it would be the same for you. I'm sorry – I shouldn't have assumed that. Still, the fact remains that even though you've put a lot of effort into trying to get rid of these thoughts and feelings, they're still showing up today, right?

Client: Yes, but less than before.

Therapist: Okay, fair enough. (*Therapist makes a mental note to herself: this client will probably need to experience creative hopelessness, but now is not the time to go into it.*) Still, you can see how much effort it takes, trying to push this stuff away, and how much you miss out on when you get caught in it. So I'm wondering if you're open to a new way of learning how to handle these thoughts and feelings?

Client: As long as you can make them go away.

Therapist: (*Therapist again makes a mental note to herself: this client will almost definitely need to experience creative hopelessness, but now is not the time to go into it. At this point, it would be counter-productive to get hooked into a debate over the control agenda, so temporarily it's better to avoid a direct answer.*) Well, we'll certainly cover numerous effective ways of handling these difficult thoughts and feelings. I can't guarantee that what we do in this room will give you the exact results that you're looking for – but I can guarantee I'll do my very best to help you, using a scientifically-proven model that's helped many other people with problems very much like your own.

Note: If there is plenty of time left in the session, then rather than avoiding the above question, the therapist can use the clipboard to lead directly into the creative hopelessness intervention 'Pushing Against The Clipboard' described on pages 89-91 of ACT Made Simple

Section 5

At the very end of the metaphor, the client says: "I don't think I can do that" or "I don't think it'll work"

Therapist: That's a perfectly natural thought to have. Most people have thoughts like that initially. Is it okay for you to have that thought, and give it a go anyway, and see what happens?

At the very end of the metaphor, the client says: "So how do I do that, then?" This is addressed in pages 89-91 of ACT Made Simple.