

“Setting the Mood”

To “set the mood” for defusion, I initially recap some of the painful thoughts or memories the client has been getting caught up in or struggling with, and I compassionately acknowledge how difficult this has been for her, and how much pain and suffering she has experienced. Then I say something like this: “As you know, one of our aims in this work is to develop psychological skills that will help you to handle your mind more effectively when it starts doing things that hold you back from living a full life. And that’s what I’d like to focus on today. Would that be okay with you?”

At this point, it’s useful to do some psychoeducation about the nature of the mind. Typically I start with a brief discussion of the two parts of the mind: the thinking self and the observing self, as described in chapter 4. Upon conclusion, I say something like, “So in the work we do here, whenever I use the word “mind,” I’m talking about “the thinking self”—the part of you that chatters away inside your head, never shuts up, and always has something to say. Can you notice it chattering away, right now?” The client usually says yes, and I then ask, “So what’s your mind saying to you?” Whatever the answer, I reply, “See what I mean? It’s always got something to say. Sometimes it’s helpful to imagine that there are four of us in the room here: there’s you and me, and your mind and my mind. My mind’s going to chatter away to me, and your mind’s going to chatter away to you. What’s really important here is what happens between you and me rather than what our minds have to say.”

Typically we next do a bit of psychoeducation about how our minds have evolved to think negatively, as in the transcript below. This sets the scene for active defusion interventions.

Many ACT therapists don’t introduce the observing self until later in therapy, following work on defusion and acceptance, but some therapists prefer to introduce it up front. I prefer the latter approach, but if you prefer the former, then simply skip introducing the observing self for now and bring it in later in therapy.