Participants will be able to:

1. Describe the role and significance of emotion avoidance, distress tolerance, and emotion regulation in emotion efficacy.

2. Demonstrate how to teach Emotion Awareness as a way to decrease emotion avoidance.

3. Demonstrate how to teach Mindful Acceptance as a way to increase distress tolerance and emotion regulation.

4. Demonstrate how to use Values-Based Action as a way to increase mindful acceptance, distress tolerance, and valued living.

5. Demonstrate how to teach Mindful Coping as a way to increase emotion regulation and values-based action.

6. Demonstrate facility in guiding clients in exposure-based skills practice for each EET skill to enhance learning, retention and recall.
We receive royalties from the sale of the clinician’s guide to Emotion Efficacy Therapy (Context Press, 2016).
WHAT IS EET?

*Emotion Efficacy Therapy (EET)* is a brief protocol integrating *Acceptance and Commitment Therapy (ACT)*, *Exposure Therapy* and *Dialectical Behavioral Therapy (DBT)* to help people increase their psychological flexibility.
WHY TREAT EMOTION EFFICACY?

• Over 75% of people who seek therapy struggle with low emotion efficacy (emotion dysregulation + distress intolerance + emotion avoidance) (Barlow, 2000; Kring & Werner, 2004).

• A transdx approach is supported in research literature. Research suggests targeting Emotion Avoidance and Distress Intolerance will increase emotion efficacy (Taylor & Clark, 2009; Wilamowska, Thompson-Hollands, Fairholme, Ellard, Farchione & Barlow, 2010; West, 2016)

• Learning is multi-layered: cognitive, affective, somatic & behavioral components (Tryon, 2005)

• State-dependent research supports the use of exposure-based learning to accelerate retention and recall of new skills (Persons & Miranda, 1992; (Szymanski & O’Donohue, 1995; Matrick et al, 1989; Persons & Miranda, 1991; Craske, 2012)

• Need for more brief portable low-cost effective tx
WHAT IS EMOTION EFFICACY?

The ability—and the belief in the ability—to experience and respond to a full range of emotions in a contextually adaptive, values-consistent manner
EMOTION EFFICACY THERAPY MODEL

**EMOTION AWARENESS** “I can observe all parts of my emotional experience: sensations, thoughts, feelings and urges”

**MINDFUL ACCEPTANCE**

“I can allow all parts of my emotional experience without acting on it”

**VALUED ACTION**

“I can identify what matters most to me in the moment of choice and act on it”

**MINDFUL COPING** “If I’m still flooded after practicing Mindful Acceptance, can downshift my emotional activation to access values-based action”
EMOTIONS ARE NOT PROBLEMS

It’s how we respond to emotions that is effective, workable and helpful, or ineffective unworkable and unhelpful.
THE SEDUCTION OF AVOIDANCE

It often feels better in the short term....
AVOIDANCE LEADS TO MALADAPTIVE EMOTION RESPONDING

- Reassurance Seeking
- Compulsions
- Situational Avoidance
- Thought Control
- Thought Suppression
- Worry
- Interoceptive Avoidance
- Emotion Driven Behavior
- Cognitive Misappraisal
- Attention Focus-Threat:
  - Externalizing
  - Internalizing
- Rumination
- Post Event Processing
Avoidance doesn’t work

• Ineffective escape or control strategies “don’t think of a pink elephant”

• Creates habits by reinforcing the removal of the distressing stimulus (discomfort/distress/anxiety is "bad," or “dangerous”)

• Takes people out of the present moment where you access what is needed or valued

• Takes energy away from creating what matters

• Is exhausting and can lead to overwhelm and burnout

“don’t think of a pink elephant”
Between stimulus and response there is a space. **In that space is our power to choose our response.** In our response lies our growth and our freedom.

Victor Frankl
### Results and Significance of Pre vs. Post Treatment Scores for Hypothesis 1

<table>
<thead>
<tr>
<th>Variable</th>
<th>Univariate MANOVAs</th>
<th>Planned Comparison Pre vs. Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypothesis 1: Emotional Regulation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DERS</td>
<td>32.36***</td>
<td>-1.21***</td>
</tr>
<tr>
<td>MNESRES</td>
<td>42.17***</td>
<td>1.38***</td>
</tr>
<tr>
<td>DASS-Depression</td>
<td>5.23*</td>
<td>-0.49*</td>
</tr>
<tr>
<td>DASS-Anxiety</td>
<td>5.01*</td>
<td>-0.48*</td>
</tr>
<tr>
<td>DASS-Stress</td>
<td>19.37***</td>
<td>-0.94***</td>
</tr>
</tbody>
</table>

Note. N = 22. ^p < 0.10; * p < 0.05; ** p < 0.01; *** p < 0.001
Cohen’s d: 0.2 = small; 0.5 = medium; 0.8 = large.
DERS = Difficulties with Emotion Regulation Scale. DASS = Depression, Anxiety, and Stress Scale.
MNESRES = Multidimensional Negative Emotions Self-Regulatory Scale.

### Results and Significance of Pre vs. Post Treatment Scores for Hypothesis 2

<table>
<thead>
<tr>
<th>Variable</th>
<th>Univariate MANOVAs</th>
<th>Planned Comparison Pre vs. Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypothesis 2: Distress Tolerance and Experiential Avoidance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DTS</td>
<td>15.45***</td>
<td>1.34***</td>
</tr>
<tr>
<td>MEAQ-Total</td>
<td>14.47***</td>
<td>-0.81***</td>
</tr>
<tr>
<td>MEAQ-Behavioral Avoidance</td>
<td>8.53**</td>
<td>-0.62**</td>
</tr>
<tr>
<td>MEAQ-Distress Aversion</td>
<td>12.26**</td>
<td>-0.75**</td>
</tr>
<tr>
<td>MEAQ-Procrastination</td>
<td>6.90*</td>
<td>-0.56*</td>
</tr>
<tr>
<td>MEAQ-Distraction &amp; Suppression</td>
<td>0.04</td>
<td>-0.04</td>
</tr>
<tr>
<td>MEAQ-Repression &amp; Denial</td>
<td>8.22**</td>
<td>-0.61**</td>
</tr>
<tr>
<td>MEAQ-Distress Endurance</td>
<td>2.31</td>
<td>0.32</td>
</tr>
</tbody>
</table>

Note. N = 22. ^p < 0.10; * p < 0.05; ** p < 0.01; *** p < 0.001
Cohen’s d: 0.2 = small; 0.5 = medium; 0.8 = large.
DTS = Distress Tolerance Scale
MEAQ = Multidimensional Experiential Avoidance Questionnaire
OUTCOME STUDIES

**Table 1. DIFFICULTIES WITH EMOTIONAL DYSREGULATION SCALE (DERS)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Control Mean (SD) (n=8)</th>
<th>Treatment Mean (SD) (n=6)</th>
<th>Interaction Effect Size (partial eta)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre</td>
<td>94.2(26)</td>
<td>100.8(11)</td>
<td></td>
</tr>
<tr>
<td>Post</td>
<td>97.2(17.4)</td>
<td>77.8(23)</td>
<td>.357*^^^</td>
</tr>
<tr>
<td>Cohen’s d</td>
<td>.1</td>
<td>1.25+++</td>
<td></td>
</tr>
</tbody>
</table>

Note. N = 14. Partial Eta: 0.01 = small^ 0.09 = medium^^ 0.25 = large^^^  
*p < 0.10; *p < 0.05 ** p <0.01***  
Cohen’s d: 0.2 = small+ 0.5 = medium++ 0.8 = large+++  

**Table 2. DISTRESS TOLERANCE SCALE (DTS)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Control Mean (SD) (n=8)</th>
<th>Treatment Mean (SD) (n=6)</th>
<th>Interaction Effect Size (partial eta)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre</td>
<td>40.2(14.8)</td>
<td>39.1(10.5)</td>
<td></td>
</tr>
<tr>
<td>Post</td>
<td>41.2(15.7)</td>
<td>61.3(6.1)</td>
<td>.690***^^^</td>
</tr>
<tr>
<td>Cohen’s d</td>
<td>.06</td>
<td>2.58+++</td>
<td></td>
</tr>
</tbody>
</table>

Note. N = 14. Partial Eta: 0.01 = small^ 0.09 = medium^^ 0.25 = large^^^  
*p < 0.10; *p < 0.05 ** p <0.01***  
Cohen’s d: 0.2 = small+ 0.5 = medium++ 0.8 = large+++  

**Table 3. MEASURE OF EXPERIENTIAL AVOIDANCE QUESTIONNAIRE (MEAQ)**

<table>
<thead>
<tr>
<th>Time</th>
<th>Control Mean (SD) (n=8)</th>
<th>Treatment Mean (SD) (n=6)</th>
<th>Interaction Effect Size (partial eta)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre</td>
<td>188.7(46.9)</td>
<td>198.8(46)</td>
<td></td>
</tr>
<tr>
<td>Post</td>
<td>190(33.3)</td>
<td>123.5(39)</td>
<td>.571**^^^</td>
</tr>
<tr>
<td>Cohen’s d</td>
<td>.03</td>
<td>1.74+++</td>
<td></td>
</tr>
</tbody>
</table>

Note. N = 14. Partial Eta: 0.01 = small^ 0.09 = medium^^ 0.25 = large^^^  
*p < 0.10; *p < 0.05 ** p <0.01***  
Cohen’s d: 0.2 = small+ 0.5 = medium++ 0.8 = large+++  

### Results and Significance of DERS Total Score Hypothesis Testing

<table>
<thead>
<tr>
<th>Hypothesis Testing Value</th>
<th>Main Effect of Time</th>
<th>Main Effect of Group</th>
<th>Interaction Effect</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 x 2 ANOVA F-Scores</td>
<td>18.357***</td>
<td>0.005</td>
<td>6.884*</td>
</tr>
<tr>
<td>Magnitude of Effect (Cohen’s D)</td>
<td>--</td>
<td>--</td>
<td>0.82</td>
</tr>
</tbody>
</table>

*Note. N = 41. *p* < 0.05; **p** < 0.01; ***p** < 0.001

*Cohen’s d*: 0.2 = small; 0.5 = medium; 0.8 = large
In a pre-post test pilot study conducted in 2016 at a dual-diagnosis treatment program with individuals struggling with significant chemical dependency problems, after EET treatment the relapse rate decreased by 50% compared to individuals receiving treatment as usual (CBT and 12-step).
Emotion Efficacy Therapy

A Brief, Exposure-Based Treatment for Emotion Regulation Integrating ACT & DBT

An Eight-Week Transdiagnostic Protocol to Help Clients Develop:
- Emotion Awareness
- Mindful Acceptance
- Mindful Coping
- Values-Based Action
- Exposure-Based Skills Practice

MATTHEW MCKAY, PhD
APRILIA WEST, PsyD, MT
SESSION PROTOCOL

Session 1: Emotion Awareness
Session 2: Mindful Acceptance + Emotion Surfing
Session 3: Values Clarification
Session 4: Values-Based Action
Session 5: Mindful Coping
Session 6: Mindful Coping
Session 7: Mindful Coping
Session 8: Pulling it all Together

* Can be administered in individual or group format
SESSION STRUCTURE

1. Mindful Acceptance practice
2. Skills Practice review
3. Psychoeducation on new skill
4. Practice new skill
5. Exposure + new skill
6. Feedback and Troubleshooting
7. Review homework
**SESSION STRUCTURE**

*Directions:* Place a check ✅ next to the skill you practice each day. Record any triggers at the bottom. Bring this record to your next session.

<table>
<thead>
<tr>
<th>Observed Trait</th>
<th>DAY 1</th>
<th>DAY 2</th>
<th>DAY 3</th>
<th>DAY 4</th>
<th>DAY 5</th>
<th>DAY 6</th>
<th>DAY 7</th>
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</thead>
<tbody>
<tr>
<td>Observe 4 parts of an emotion:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>sensations, feelings, thoughts</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>&amp; urges</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observe, Accept and surf your</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>emotional wave, with SUDS</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Observe, Accept &amp; Choose a Values</td>
<td></td>
<td></td>
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<tr>
<td>based Action</td>
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<tr>
<td>Observe, Accept and Choose a</td>
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<td>relaxation</td>
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<tr>
<td>Observe, Accept and Choose a self-</td>
<td></td>
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<td>soothing skill</td>
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</tr>
<tr>
<td>Observe, Accept and Choose a</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>coping thought</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Observe, Accept and Choose to</td>
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<tr>
<td>practice radical acceptance</td>
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<tr>
<td>Observe, Accept and Choose a</td>
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<tr>
<td>distraction skill</td>
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</tr>
</tbody>
</table>

**EMOTIONAL TRIGGERS** | Record any events or emotions that are distressing during this week:
SESSION ONE: EMOTION AWARENESS

- Practice connecting to present moment
- Learn the adaptive function of emotions: “survival wiring” vs. maladaptive responding
- Identify ineffective avoidance patterns
- Distinguish themselves from their emotions (observer)
- Identify the four parts of emotion:
WHAT MAKES UP AN EMOTION?

anatomy of emotion

thoughts

feelings

emotion

urges

physiological sensations
HOW EMOTION TRIGGERS WORK

* LIFESPAN OF AN EMOTION WAVE

emotion surfing

emotion avoidance

unnecessary suffering

trigger
STEP1: Sensations: observe and describe what you notice in your body e.g. pressure, tension, temperature, movement, pulsation, etc

STEP 2: Thoughts: observe and describe the content the mind is creating

STEP 3: Feelings: name the labels based on the felt sense or interpretation of the experience

STEP 4: Urges: notice the action the emotion creates to do something or not to do something
EMOTIONS ARE NOT PROBLEMS

It’s *how we respond* to emotions that is effective, workable and helpful, or ineffective unworkable and unhelpful.
SESSION TWO: MINDFUL ACCEPTANCE

• Understand lifespan of emotion wave

• Identify behaviors that intensify and prolong emotion waves: e.g. rumination, emotion-driven behavior, avoidance behaviors

• Identify ineffective avoidance patterns

• Learn to allow emotional experience instead of reacting or acting on it by surfing the wave until it resolves

• Learn to induce Emotion Exposure for practice in activated state
STEPS TO MINDFUL ACCEPTANCE

1. Sensations: observe and describe what you notice in your body and soften, lean into and allow what’s happening

2. Thoughts: observe and describe the content and let it go using the breath to anchor and wait for the next thought to arise

3. Feelings: name the labels based on the felt sense or interpretation of the experience without judgment and with compassion

4. Urges: notice the action the emotion creates to do something or not to do something and sit with the discomfort while watching the intensity of the wave resolve
• Psychoeducation on how exposure to aversive stimulus helps create new responses and also allows for habituation/desensitization

• Reviewing activation process of remembering and/or describing the emotion or event in detail until distress is mid-range (4-6 SUDS)

• Review of ability to stop or ground if necessary
STEP 1: Pick a scene or emotion (activating in the 4-6 SUDS range)

STEP 2: Describe the scene in present tense in as much detail as possible: (what IS HAPPENING? WHAT do you see, hear, touch, taste?)

STEP 3: Once you reach your target SUDS level, “cut off” the scene

STEP 4: PRACTICE SURFING THROUGH ALL PARTS OF EMOTION: observing and accepting sensations, thoughts, feelings and urges
MINDFUL ACCEPTANCE VIDEO
MINDFUL ACCEPTANCE EXPERIENTIAL IN DYADS 
(TIME PERMITTING)
MORNING BREAK
• Clarify values (vs. shoulds/expectations)

• Locate Moment of Choice

• Understand Creative Hopelessness

• Access Willingness

• Integrate with emotion exposure and imaginal exposure
Alice came to a fork in the road. "Which road do I take?" she asked.

"Where do you want to go?" responded the Cheshire cat.

"I don't know." Alice answered.

"Then," said the cat, "it doesn't matter."
STEPS TO VALUES-BASED ACTION PRACTICE

STEP 1: Pick an anticipated trigger scene

STEP 2: Identify value for anticipated trigger

STEP 3: Induce emotion activation by describing scene in present tense (e.g. what is happening? what do you see, hear, touch, taste?)

STEP 3: Once you reach a mid-range SUDS level, “cut off” the scene

STEP 4: Surf the wave using Mindful Acceptance (observing and accepting sensation, thoughts, feelings and urges)

STEP 5: Rate SUDS (to track where you on the wave)

STEP 6: Visualize chosen VBA

STEP 7: Rate SUDS
VALUES-BASED ACTION VIDEO
MONSTERS ON THE BUS EXPERIENTIAL
SESSIONS 5, 6 & 7
MINDFUL COPING

• Introduction to 6 Mindful Coping skills: relaxation and self-soothing: diaphragmatic breathing, cue-controlled breathing, relaxation without tension, five senses exercise (Session 5); coping thoughts and radical acceptance (Session 6); distraction and time out (Session 7)

• Mindful Coping is only used after Mindful Acceptance in the moment of choice

• Functional analysis of coping as a “towards” values move instead of an “away” values
STEPS TO MINDFUL COPING PRACTICE

STEP 1: Pick an anticipated trigger scene

STEP 2: Identify Mindful Coping skill to use in the moment of choice

STEP 3: Induce emotion activation by describing scene in present tense (e.g., what is happening? what do you see, hear, touch, taste?)

STEP 3: Once you reach a mid-range SUDS level, “cut off” the scene

STEP 4: Surf the wave using Mindful Acceptance (observing and accepting sensations, thoughts, feelings and urges)

STEP 5: Rate SUDS (to track where you on the wave)

STEP 6: Use Mindful Coping Skill

STEP 7: Rate SUDS
GROUP COACHING
EXPERIENTIAL
PULLING IT ALL TOGETHER

- Review and consolidation of learning
- Time to reflect on “what works” e.g. specific skills in specific situations
- Troubleshoot “areas of difficulty” (e.g. chronic pain, inducing activation)
- Personalized emotion efficacy plan
ASSESSMENTS

• Difficulties with Emotion Regulation Scale (DERS)

• Distress Intolerance index (DII)

• Acceptance and Avoidance Questionnaire II (AAQ-II)

• Valuing Questionnaire (VQ)

• Emotion Efficacy Scale (EES2)
  *corrected version with scoring directions
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EET Training & consultation
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EMOTION EFFICACY THERAPY (EET) clinician’s guide available at:
www.newharbinger.com/emotion-efficacy-therapy