



# **Using ACT and Internal Family Systems Techniques to Address Burnout and Compassion Fatigue**

**Jordan Kugler, Ph.D.  
Radha Moldover, LCSW  
Rachel Hopkins, Psy.D.**



# Accuracy, Utility, and Risks Statement

This presentation discusses clinical intervention principles based on the most **recent research** and **clinical experience** of the presenters.

As with all clinical interventions, attendees should **be thoughtful** about applying these skills and strategies without appropriate training and supervision.

There are no known risks associated with attending, though **some emotional distress is possible in discussing the application of these skills to your personal life.**



# Program Notices

## Conflicts of Interest:

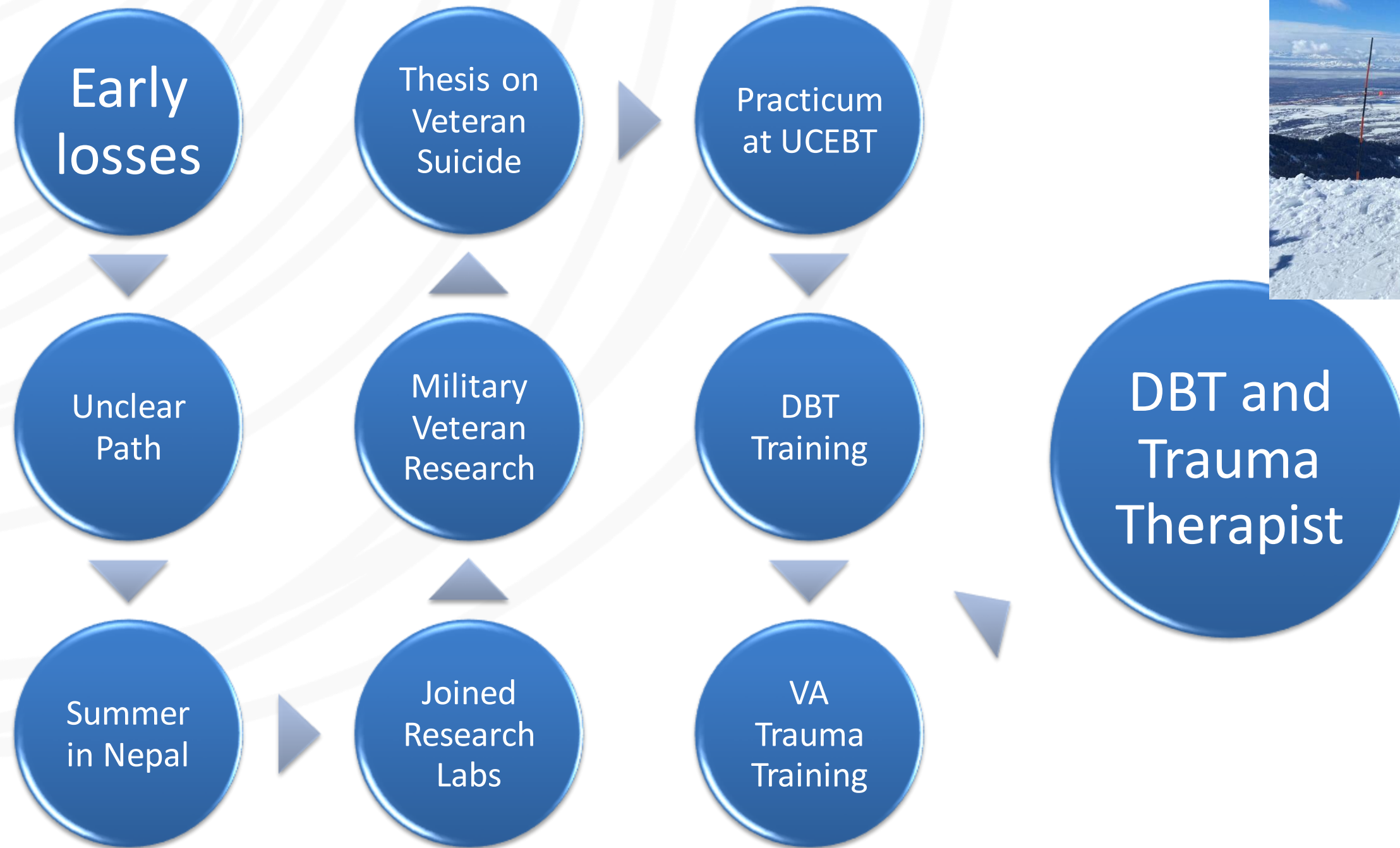
None

## Commercial Support:

None



# Introductions: Jordan Kugler, Ph.D.,

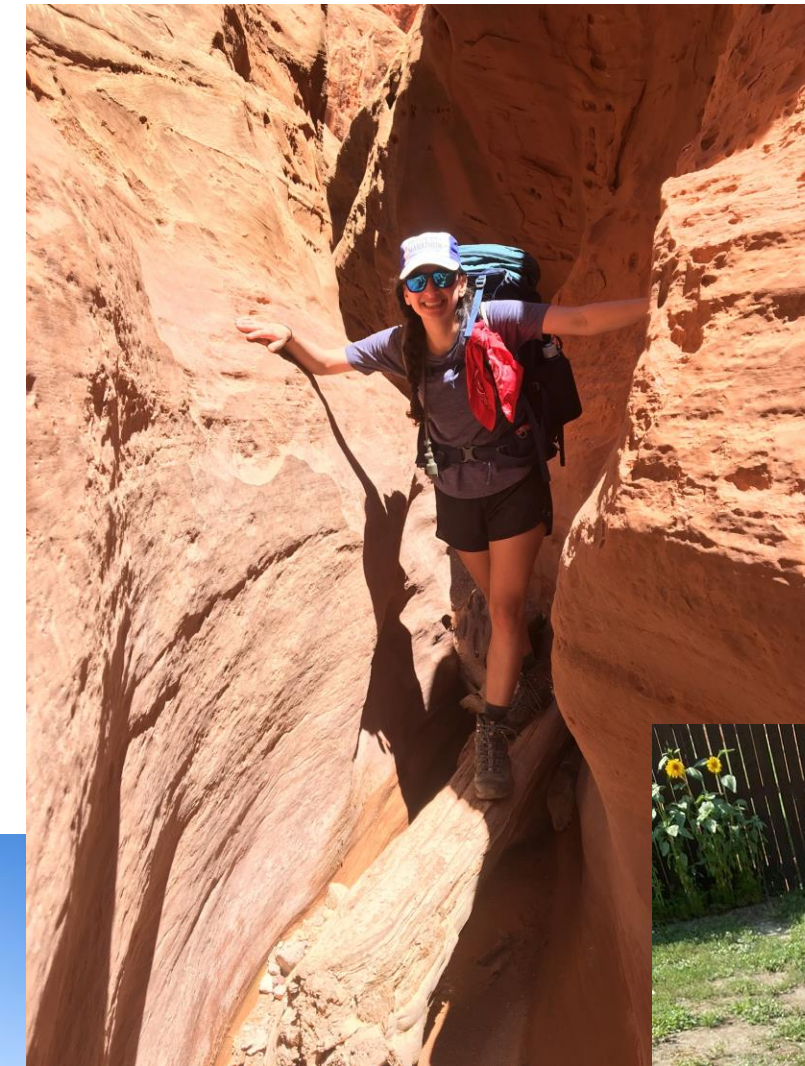




# Introductions: Rachel Hopkins

## Psy.D.

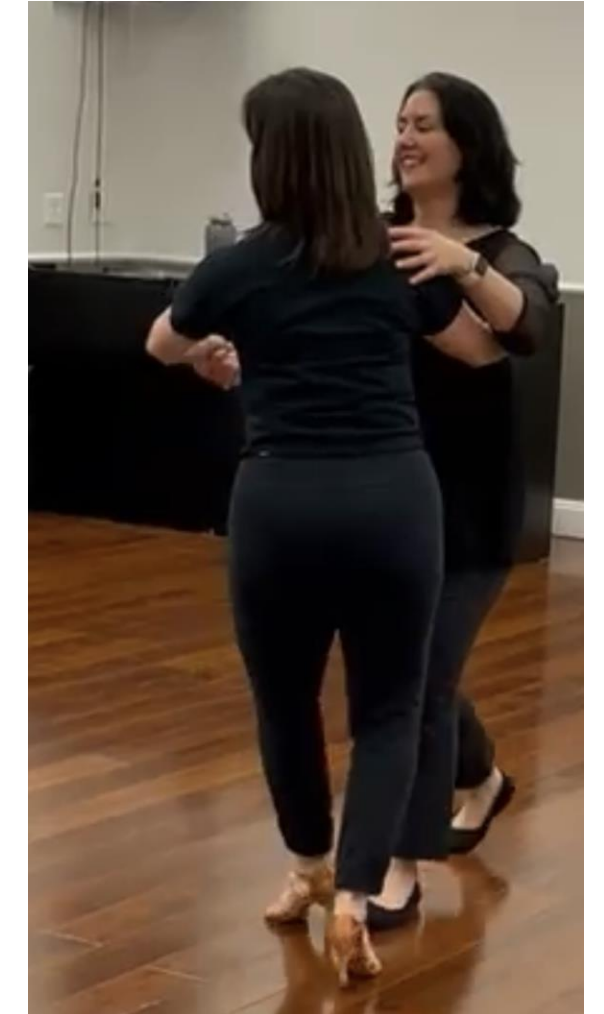
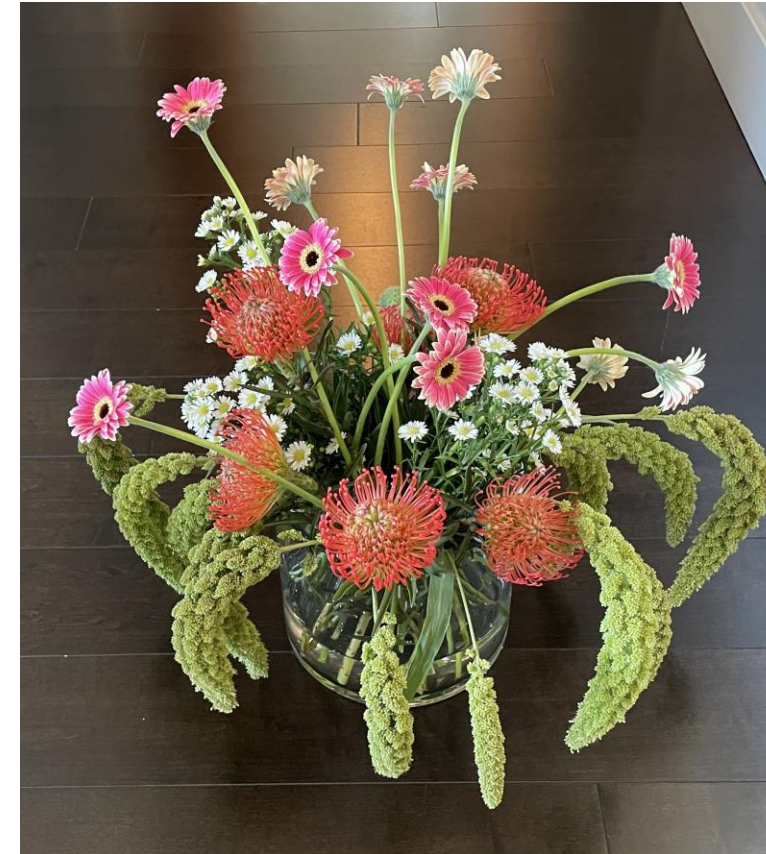
- Program Director of Anxiety and Mood Team at UCEBT
- Broad clinical interests: OCD, anxiety, depression, trauma and bereavement, overcontrolled/perfectionistic, chronic SI/SH/emotion dysregulation
- Supervision and consultation





# Introductions: Radha Moldover, LCSW

- Comprehensive DBT Program
- Trauma, Stress and Resiliency Team
- Clinical supervisor for Social Work placement
- Grief and loss, anxiety, depression, parenting adolescents, trauma and burnout.
- Mid to late career professionals
- Bilingual Spanish clients.





# Agenda

- **Attending to personal burnout as mental health professionals**
- **ACT Framework**
- **ACT and Burnout**
- **ACT Experiential Exercise**
- **History, Theory, Goals and Assumptions of IFS Model**
- **IFS and Burnout**
- **IFS Experiential and Demonstration**
- **IFS Mission and Resources**
- **Personal Burnout Prevention Plan**
- **Resources**
- **Q & A**





# Attending to personal burnout as mental health professionals

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Discussing the ethical imperative to reduce burnout and make personal care a part of regular practice







# What is burnout?



- **“Emotional, or mental exhaustion accompanied by decreased motivation, lowered performance, and negative attitudes toward oneself and others.** It results from performing at a high level until stress and tension, especially from extreme and prolonged physical or mental exertion or an overburdening workload, take their toll.” **(APA, 2021)**
- Difficult identify before experiencing
  - Exhaustion
  - Cynicism
  - Impaired effectiveness
- Compassion fatigue vs overidentification
- MHP’s at heightened occupational risk



# Factors impacting burnout



- Determinants of Burnout
  - 62 studies included in meta-analysis of MHP burnout
  - Higher workload=higher burnout on average
  - Job control: Autonomy and perception of influence associated with less burnout
  - Lack of supervision increased burnout
  - Relationships: Role conflict/ambiguity and unresolved conflict leading to emotional exhaustion increased burnout



# **Poll Question #1**

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What is your subjective rating of burnout at the present moment?



## Is Self-Care an Ethical Imperative?

- We recognize it as important
- We are invested in and reinforced by caring for others
- Not directly addressed in the APA ethics code

**" If I am not for myself, who will be for me? If I am only for myself, what am I? If not now, When?"**



# Codes of Ethics: Psychologists and Social Workers

## APA:

### •*2.06 Personal Problems and Conflicts*

(a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

•(b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties.

## NASW:

### *Purpose Section*

•Professional self-care is paramount for competent and ethical social work practice. Professional demands, challenging workplace climates, and exposure to trauma warrant that social workers maintain personal and professional health, safety, and integrity. Social work organizations, agencies, and educational institutions are encouraged to promote organizational policies, practices, and materials to support social workers' self-care.



# Codes of Ethics: Marriage and Family Therapists & Mental Health Counselors

## AAMFT:

### STANDARD III

#### PROFESSIONAL COMPETENCE AND INTEGRITY

*Marriage and family therapists maintain high standards of professional competence and integrity.*

#### 3.3 Seek Assistance.

Marriage and family therapists seek appropriate professional assistance for issues that may impair work performance or clinical judgment.

## ACA:

### Section C.

#### Professional Responsibility

C.2.g. Impairment Counselors monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when impaired. They seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work. Counselors assist colleagues or supervisors in recognizing their own professional impairment and provide consultation and assistance when warranted with colleagues or supervisors showing signs of impairment and intervene as appropriate to prevent imminent harm to clients.



## Competence

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“The basic expectation that Psychologists provide services, teach and conduct research with populations and in areas only within the boundaries of their competence based on their education, training, supervised experience, consultation, study or professional experience.”

## Maintaining Competence

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“Psychologists undertake ongoing emphasis to develop and maintain their competence”

## Beneficence and Nonmaleficence

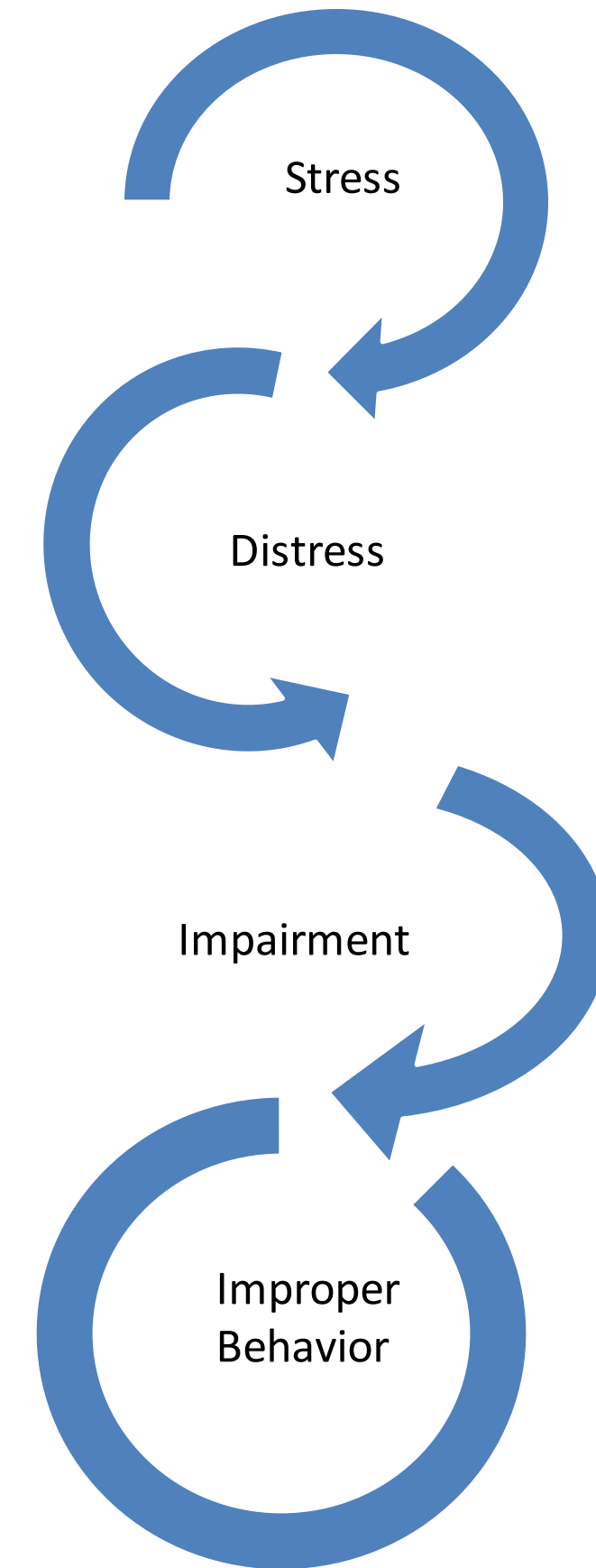
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- “Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work”
- Standard 2.06 *Personal Problems and Conflicts* focuses on the imperative to protect those we work with from the negative impact of our personal problems.



## Stress-Distress- Impairment-Improper Behavior Continuum

- **Stress:** natural bodily reaction to internal and external demands
- **Distress:** reacting to internal or external stress
- **Impairment:** observable change in psychologists professional functioning
- **Improper behavior:** eroding boundaries, dual relationships etc.
- **Major Limitation:** only describes negative behavior, focus on survival

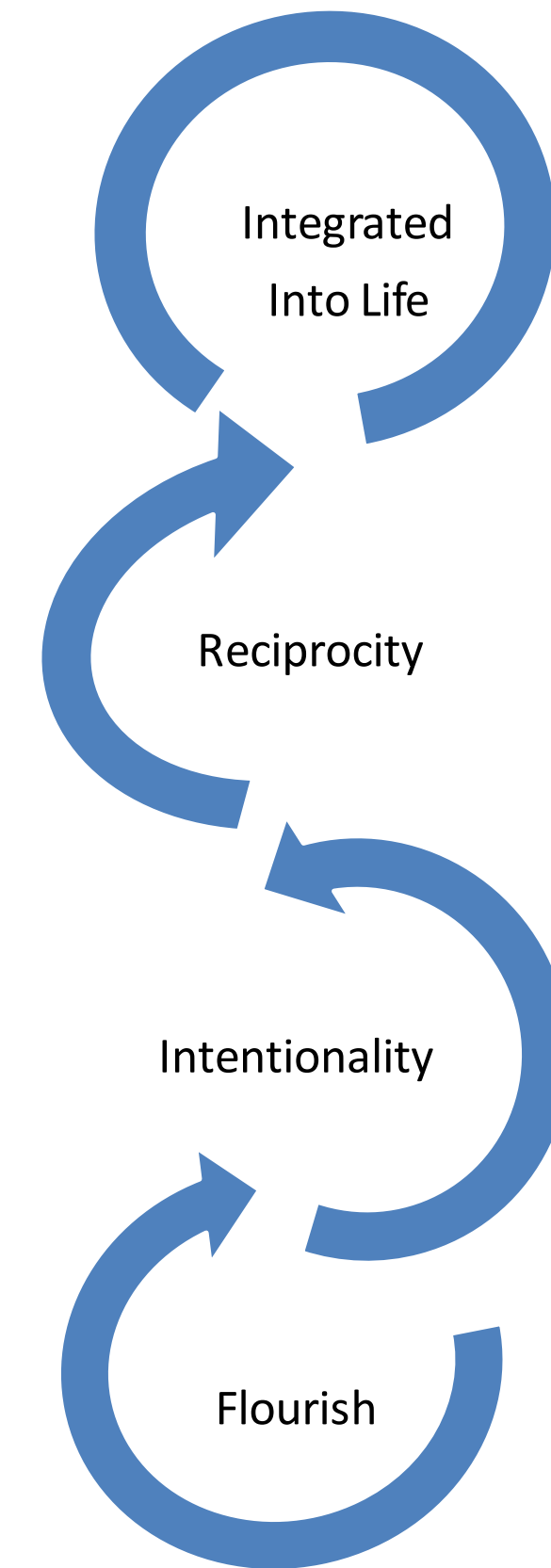






# Envisioning a Positive Continuum

- Survival vs Flourishing
- Being intentional in choosing meaningful self care
- Authentic and ethical exchange of strategies between MHP and client
- Effective strategies are integrated not added onto busy lives





# ACT Framework

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Introducing the core ACT  
processes and linking to  
burnout





## **Poll Question #2**

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What is your experience with/exposure to ACT?



# ACT for Professional Burnout

## Populations:

- Variety of healthcare, social care, and public service settings

## Findings:

- Decreases in psychological distress, reduction in burnout, and improved stress management
- Improvements in mindfulness skills and values-based behavior
- Most effective for those with higher distress at baseline

## Limitations:

- Small samples, interventions not always well defined or using specific protocols, limited follow-up

Towey-Swift, Lauvrud, & Whittington, 2022; Reeve, Tickle, & Moghaddam, 2018; Prudenzi, et. al., 2022



# Psychological Flexibility

**Be Present**

**Open Up**

**Do What Matters**

Attention  
to Present

Acceptance

Self as  
Observer

Cognitive  
Defusion

Values

Committed  
Action



# Cultural Considerations

## **The Ecologically Validity Model (EVM):**

- A cultural adaptation framework which specifies the need to conduct content and intervention delivery adaptations by considering cultural dimensions of:
- Language, persons, metaphors, content, concepts, goals, methods, and context.

## **Community-Based Participatory Research (CBPR) principles.**

- A more equitable, collaborative research process of adaptation involving active participation of local community leaders, researchers studying the issues, and the ultimate beneficiaries of interventions.
- Involves principles of:
  - Co-learning and reciprocal transfer of expertise,
  - Shared decision-making power, and
  - Mutual ownership of the processes and products of the research

## **Why ACT for diverse populations**

- Does not rely on diagnosis for intervention, which may reduce stigma
- Decreases power dynamic and encourages collaborative relationships in treatment
- Fosters acceptance of identity development processes (e.g. racial identity or sexual/gender identity development)
- Common value of metaphor/storytelling as means for change
- Can layer on other frameworks, leaving room for adaptation or incorporation with other models that are specific to cultural ways of knowing
- Open to multi-determined sources of suffering and causes for seeking treatment



# Be Present

## What?

- Noting what is happening right now
- Paying attention in a specific way – on purpose & without judgement
- The power of the pause – putting a space between a big emotion and our actions

## How?

- Formally & informally
- As a start or end to a session
- Within session
- Observer exercises
- Somatic approaches
- Modeling
- Dropping anchor



# Being Present and Burnout

- Pay attention to how we engage in addition to what we are teaching
  - Notice flexibility
  - Embody the processes
  - Engage pain and caring
  - Initiate, model, and support change
- Vulnerability, authenticity, genuineness
- Developmental process for therapists
- Internal checks and balances that can help you stay balanced
- Degree of presence require and burnout





# Open Up

## What?

- Noticing thoughts rather than being caught up in them
- Thoughts are just thoughts – we are not our thoughts
- Noticing when thoughts aren't helpful
- When the mind feels judgmental
- When thoughts feel old and familiar

## How?

- Before, during, or after a challenging situation
- Unhooking
- Passengers on the bus, apartment tenants, internal hijackers, uninvited party guests
- Metaphors: sky/weather, waves/ocean, being the mountain



# Opening Up and Burnout

## Notice

- What internal stuff is showing up?
- Difficult or unwanted thoughts, feelings, images, memories, sensations
- Where is it located in the body? Where do you notice it most? Shape, size, outline, etc.

## Name

- This is frustration, anger, annoyance, etc.
- Here is sadness, regret, shame, loneliness, etc.
- I'm having the thought \_\_\_\_\_

## Allow

- Breathe into it, make room for it, hold it gently
- Allow it to be there, allow it to freely come and go
- Therapist choice points of moving through burnout



# Do What Matters

## What?

- Values vs. Goals
- Who and what are important to you
- What you want to be about or what kind of person you want to be
- How you want to treat yourself and others
- Linking your goals and actions, big and small to those values

## How?

- Connecting to values in various domains (therapist, partner, sibling, friend, athlete)
- Noticing where values come from
- Noticing alignment or misalignment with systems you're a part of
- Values card sort
- Stuck Matrix
- Life compass exercise

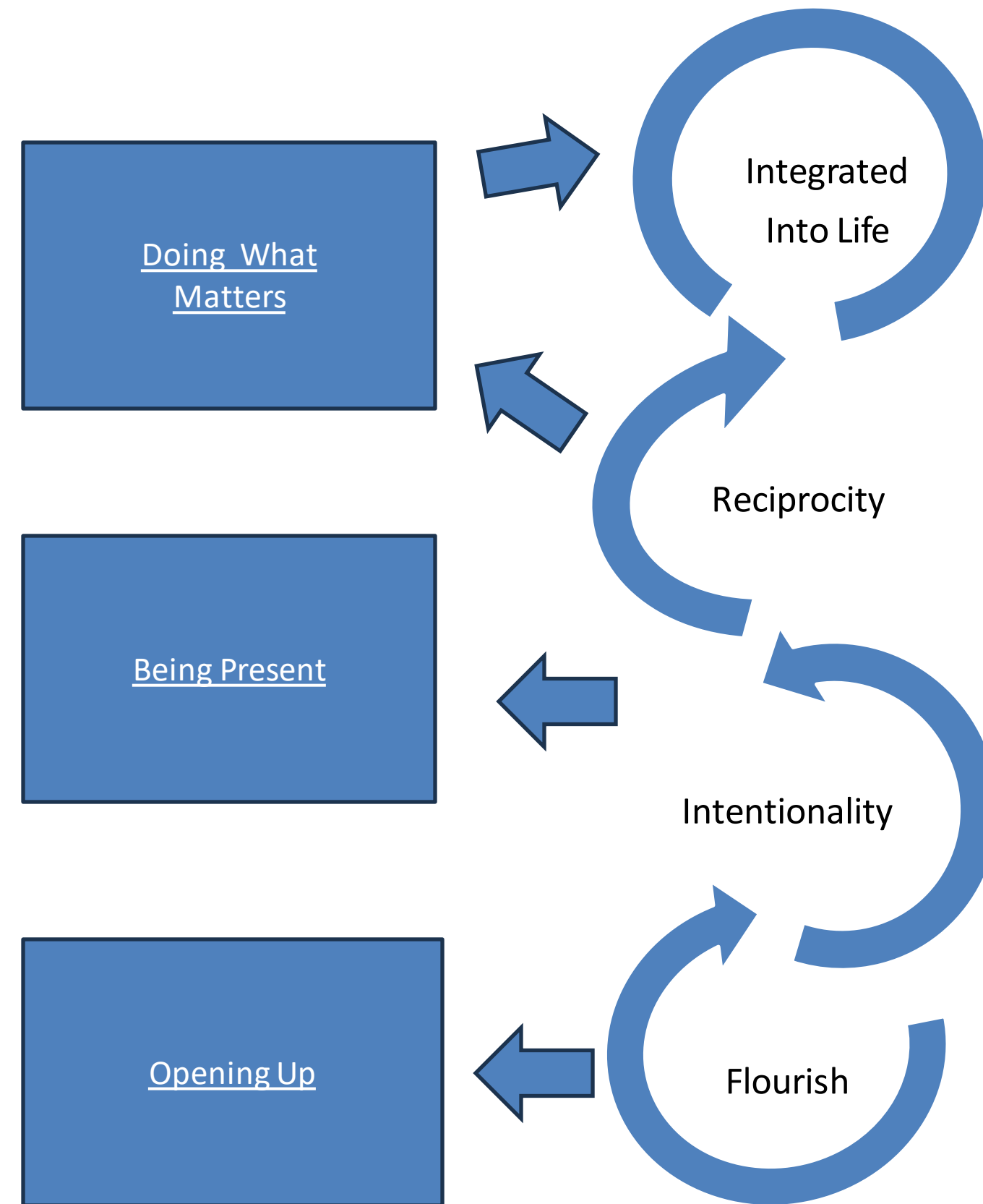


# Doing What Matters and Burnout

- Where is this leading you? Why are we doing this?
- Are you doing enough of “what matters” to you to feel satisfied? What is getting in the way?
- What qualities are you showing in your sessions? In your life outside of work?
- What does this remind you about the sort of person, the kind of therapist you want to be?
- Is what you are doing Workable?



# Using ACT to Build the Positive Continuum





# Experiential Exercise

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Experientially participating  
in ACT related burnout  
strategies





# Theory, Assumptions & History of IFS Model

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# Experiential Exercise

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Un-blending to increase Self  
Energy





# Theory of Mind

## Self

Pre-existing, universal human quality, self-actualized aspect of an individual. The Self of the client heals parts or Self of therapist heals parts.

## Protective Parts

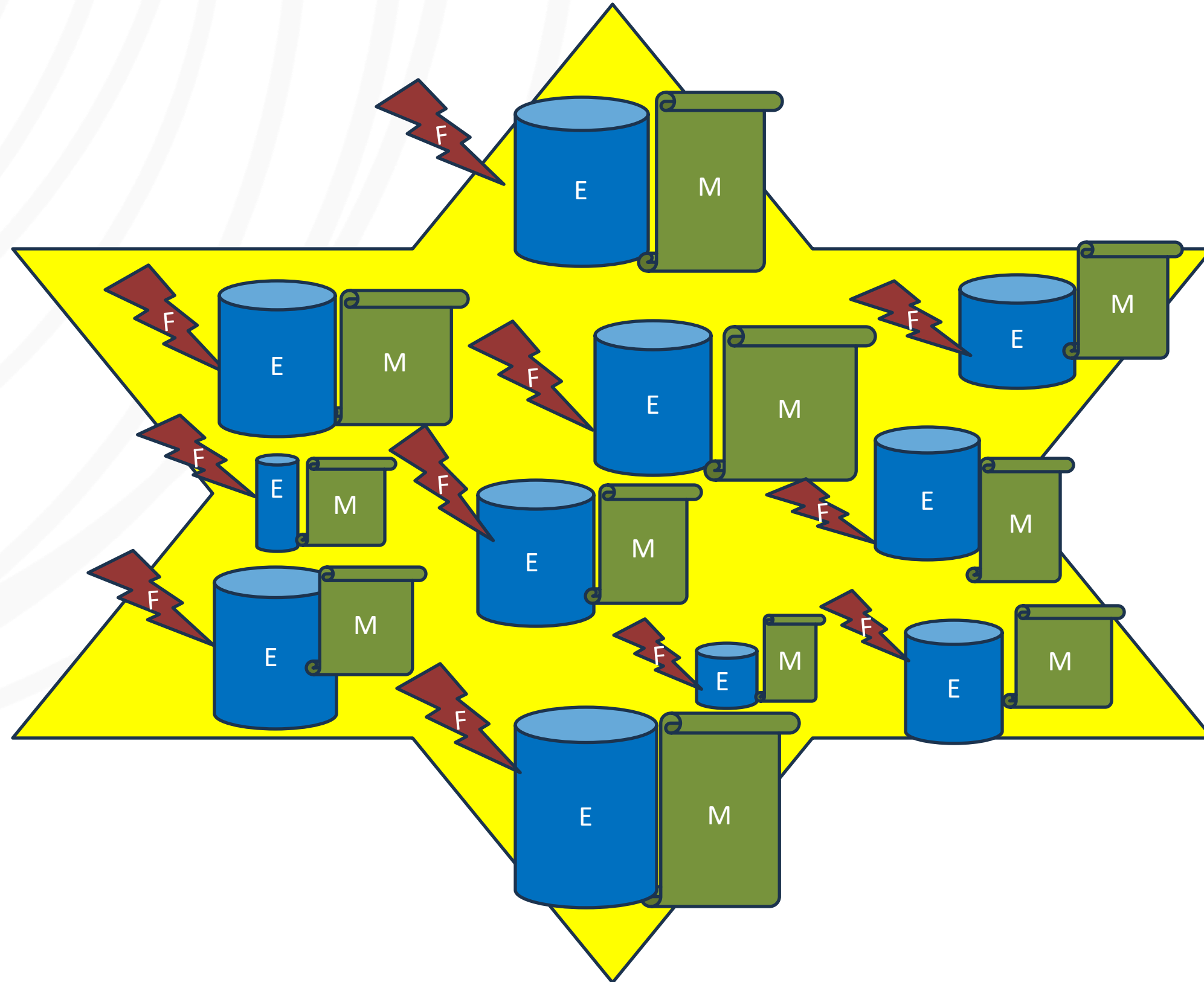
Two types, proactive and reactive.

## Burdened Exiles

Parts that are kept protected from the rest of the system to prevent emotional flooding.



# Self Blended with Parts





# Qualities of Self

- The 8 C's
  - Curiosity
  - Clarity
  - Compassion
  - Courage
  - Confident
  - Creativity
  - Calm
  - Connected
- The 5 P's
  - Presence
  - Patience
  - Perspective
  - Playfulness
  - Persistence





# Goal of IFS: A Self-led system

## Un-blending

Self from parts.

## Befriending

Protective parts

## Gaining Consent

From protective parts to work with Exiles

## Healing Exiles

Witnessing and letting go



# Locating a Target Part

## Find

- Breathe. Let the body be comfortable. Allow the attention to focus inside the body.
- Where in or around the body do you notice indicators of a Part?
- Look for body sensations, images, memories, thoughts or feelings.

## Focus

- Turn your attention inside and focus on Parts.
- Are any internal feelings/thoughts being dismissed as unimportant or unreal?
- Let your Parts know there is room for all Parts and there will be time for all Parts.

## Flesh Out

- Can you see, hear, feel a more prominent Part? Do you sense it in some other way? If not, how do you experience this Part?
- How old is this Part? How old does it think You are?



# Locating a Target Part

## Feel

- Ask yourself, how do you feel TOWARD this Part?
- Are some qualities of Self present? 8 C's. 5 P's.
- Critical mass of Self Energy. A little Self Energy goes a long way.

## Separate

- If qualities of Self are not present, this is likely a second Part reacting to the Target Part.
- Ask if the reactive Part can give You some space to get to know the Target Part.

## Focus

- If the reactive Part is unwilling to separate, focus on the reactive Part.
- How do you sense the reactive Part (new Target Part)?
- How do you feel TOWARD this Part?



## Evidence for improved professional functioning using IFS

- Mojta, Falconier & Heubner, 2014
- Dolbier, Soderstrom & Steinhardt, 2001
- Steinhardt, Dolbier, Mallon & Adams, 2003
- Robinson, Flowers & Burris, 2006







# IFS for burnout in peer reviewed journals

- Self Leadership Scale measuring the "8 C's." (Steinhardt et al., 2003)
  - Validity, consistency and reliability of measure.
- Self leadership significantly related to enhanced psychological, health and work outcomes in 270 university students and 160 corporate employees. (Dolbier et al., 2001)
- "Workaholics" have higher rates of burnout and statistically significant lower rates of Self leadership. (Robinson et al., 2006)



# IFS Session Example

- [Therapist unblending his own parts from Self before session.](#)
- D. Scott Clip 2
  - <https://youtube.com/clip/Ugkx-Fa5Y0sQ9s-vtfuLZ-L4evnRQMF6Dkha>
- D. Scott Clip 3
  - [https://youtube.com/clip/Ugkx0nDmVvAV1BC8y-NT32Si7\\_w2lgKtYjPN](https://youtube.com/clip/Ugkx0nDmVvAV1BC8y-NT32Si7_w2lgKtYjPN)
- D. Scott Clip 4
  - <https://youtube.com/clip/UgkxtGzVjtFJc5vLfTg6EptGMD6j56NUdWMB>





# IFS at the Frontera

## Legacy Burdens

Burdens inherited from family and culture. Deron & Schwartz posit- in the U.S.

collective burdens include patriarchy, racism, individualism and materialism

## Healing Cultural Trauma with IFS

Training offered by Deran Young, LCSW and Richard Schwartz

## Black Therapists Rock

Mission: Reverse racial trauma through collective healing.

BTR-IFS Partnership

## Psychedelic-Assisted Psychotherapy

Use in MAPS Phase 3 FDA Research  
[IFS founder Schwartz on risks of MDMA-assisted psychotherapy for trauma](#)



# IFS Resources

[IFS Provider Directory](#)

[PATH to Recovery Support Groups](#)

[Podcasts](#)

[IFS publications data base with research applicability scores](#)

[Training in IFS](#)



# IFS Origins and Organization

## Richard Schwartz

Ph.D. Marriage and Family Therapy, from Purdue University. Eating disorders clinical research (Schwartz, 1982)

## IFS Institute

Mission: to bring more Self leadership to the world.

## IFS Trainings

Inclusive, high demand, high cost, low supply.

## Foundation for Self Leadership



# Foundation for Self Leadership Vision

The IFS Universe: Promoting Self Leadership for Inner Serenity and Global Peace

**HEALING** ←

→ **WELL-BEING**

**Through the Professions**

**Through Direct Public Outreach**

Healthcare		Education & Human Services		Governance	Law, Politics & Peacemaking	Families & Parenting	Relationships	Coping & General Empowerment
Mental Health	Physical Health	School Counseling	Social Services	Business Management & Organizational Development				
Treating PTSD & Effects of Trauma	Health Coaching	Dealing with Bullying Issues	Shelters & Homelessness	Executive Coaching	Mediations & Arbitration	Adolescents Counseling	Couples Counseling	Life Coaching
Treating Anxiety & Depression	Treating Auto-immune Diseases	Dealing with Issues Relating to Sex, Drugs & Alcohol	Care for Military Veterans	HR Trainings	Prisoners' Counseling & Re-entry	Senior Care	Mediating Family Feuds	Self Help: Adults
Treating General Addictions	Pain Management	Hyperactivity & Attention Deficit	Domestic Violence & Women Shelters	Personnel Crisis Management & Communication Consulting	Resolving Issues with Gangs & Neighborhood Tragedies	Overcoming Crises at Home	Strengthening Business Partnerships	Self-Leadership for Young Adults (Mobile Apps)
Treating Eating Disorders	Overall Wellness	Building self-esteem and self-confidence	Soup Kitchens	Leadership Training Programs	Post-War Reconciliation – Generational Healing & Forgiveness	Instituting Peace and Harmony at Home	Resolution of Community Conflict	Personal Growth & Development



# Personal Burnout Prevention Plan

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## Sample Burnout Awareness and Action Plan

SAMPLE	Internal stuff that shows up in the mind (thoughts, memories, images, etc.)	Internal stuff that shows up in the body (feelings, sensations, etc.)	Away Moves (ineffective or values inconsistent actions/behaviors)	Towards Moves (effective, skillful, or values consistent actions/behaviors)
<b>Green</b>	Thinking of people/work fondly, Growth oriented (self and other), Thinking about trying new/scary things	Excitement, curiosity, humor, vulnerability, pride, gratitude, openness, lightness,	Minimal, aware when they're happening, intention, still compassionate toward self when they happen	Exercise (run, gym, yoga), hobbies (old and new), cooking/eating yummy things, time with friends, time outside
<b>Yellow</b>	I have to hurry, I don't have time, I have to be/do better, I can't mess up I can't rely on others, When can I go to bed,	Impatience, urgency, frustration, fatigue, guilt, tightness, tension	Cleaning as avoidance, too much TV/couch time, showing up 2 minutes late to things	Compassion, find breaks in workload, mini breaks during day, take meetings outside, asking for support to schedule hobbies and exercise, my own therapy
<b>Red</b>	Judgements (I'm incompetent, they're incompetent) Questioning self (did I pick the right career) Escape fantasies (what if I just call out sick, how can I get out of this)	Overwhelm, hopelessness, irritability, anger, tearful, heavy, exhaustion	Major avoidance, not talking to others/getting support, sleeping too much, not cooking/order out a lot, saying no to things I'd usually like to do, yelling	Talk with supervisor to get support in reducing workload, taking vacation, MH day, etc., solitude, backpacking, time outside, travel, time with closest family/friends, walks, my own therapy





# Resources





# ACT Resources

- **General ACT Website:**

- <https://contextualscience.org/>

- **ACT Training:**

- <https://psychwire.com/harris>
- <https://contextualscience.org/calendar>

- **Self-guided ACT:**

- <https://thehappinesstrap.com/>

- **ACT for Kids and Teens:**

- <https://dnav.international/>
- <https://www.youtube.com/watch?v=efKKTpcNuHQ>

- **ACT for BIPOC:**

- [https://med.emory.edu/departments/psychiatry/\\_documents/\\_documents1/actforantiracism.pdf](https://med.emory.edu/departments/psychiatry/_documents/_documents1/actforantiracism.pdf)
- <https://txicfw.socialwork.utexas.edu/effective-cultural-adaptations-to-ebps/>
- <https://www.drjspayne.com/>

- **Other:**

- <https://www.rikkekjelgaard.com/free-stuff/>
- <https://theocdstories.com/episode/dr-patricia-zurita-ona-wise-moves-in-act-based-erp/>
- <https://www.actmindfully.com.au/free-stuff/>



# Professional Burnout Resources

- Professional Quality of Life Measure
  - <https://proqol.org/proqol-measure>
- Self-Care Assessment:
  - <https://socialwork.buffalo.edu/content/dam/socialwork/home/self-care-kit/self-care-assessment.pdf>
- Addressing Burnout in the Behavioral Health Workforce Through Organizational Strategies:
  - [https://store.samhsa.gov/sites/default/files/SAMHSA\\_Digital\\_Download/pep22-06-02-005.pdf](https://store.samhsa.gov/sites/default/files/SAMHSA_Digital_Download/pep22-06-02-005.pdf)



# Q&A

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Next month!

# **Ethical Guidelines for Supervisory Competence: From Theory to Practice**

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Friday, July 21, 2023

10:00 a.m. - 12:00 p.m. MST

Robin Lange, Ph.D. and Rachel Hopkins, Psy.D.

**[www.ucebt.com/events](http://www.ucebt.com/events)**



# Volunteer Young Adult Community Action Group

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- Currently recruiting volunteers
- High school and undergrad
- Interest in mental health
- Meet several times each month with our clinicians to:
  - ✓ Discuss mental health issues facing young adults today
  - ✓ Brainstorm ways to address the most pressing issues
  - ✓ Plan outreach activities that support mental health and social justice in the community
  - ✓ Go out into the community and make a difference!

**[www.ucebt.com/volunteer](http://www.ucebt.com/volunteer)**



# We are hiring!

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- DBT Program Director
- Assessment and Testing Psychologist
- Psychotherapist
- Human Resources Specialist

**[www.ucebt.com/employment](http://www.ucebt.com/employment)**



# Contact UCEBT

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Connect on Social Media



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