# Acceptance and Commitment **Therapy for Post-Stroke** Adjustment Difficulties: A Case Study



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#### INTRO

- Post-stroke adjustment difficulties are common (e.g., depression, anxiety, fatigue, altered self-concept, low sense of selfefficacy).
- Recent reviews suggest insufficient evidence for the efficacy of psychological interventions for these difficulties.

#### **METHODS**

- Case study
- A man in his 40s diagnosed with partial anterior cerebral circulation infarction

#### Main Presenting Difficulties

- Anxiety, low mood, sleep and eating difficulties, lethargy, dizziness, headaches, brain fog
- Design
- 4 x weekly baseline outcomes (B1 B4)
- 6 sessions of ACT via telemedicine (S1 to S6)
- 4 x weekly post-intervention outcomes (P1 - P4)
- 3-month (3M) & 6-month (6M) follow-ups

#### **Outcomes Measures**

- Clinical Outcomes in Routine Evaluation (CORE-10; Barkham et al., 2013): psychological distress and depression
- Valuing Questionnaire (VQ; Smout et al., 2014): enactment of personal values
- Comprehensive Assessment of Acceptance and Commitment Therapy Processes (CompACT; Francis et al., 2016): psychological flexibility

#### RESULTS

- Increased psychological flexibility
- No longer met clinical cut-offs for psychological distress and depression
- Able to enjoy family time
- Returned to work

#### DISCUSSION

 Further large-scale research comparing the efficacy of ACT to currently recommended alternative treatments (i.e., solution focused therapy, motivational interviewing) is needed.





# ACT appears to be an efficacious treatment for poststroke adjustment difficulties, even when delivered via tele-medicine.





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### Figure 1 **Choice Point Model**



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