

ACT PEER CONSULTATION GROUP MISSION STATEMENT

The purpose of the ACT Peer Consultation Group is twofold:

1) To provide ongoing didactic and experiential training in the competent use of ACT with a variety of clinical problems. Certain group members may serve as the senior content experts; however, as participants in the consultation group attend and participate over time, they will be expected to actively present material to others (the see one, do one, teach one model) and take responsibility for the direction of the group. Group members also commit to outside learning in the form of reading books, intentional practice, attending trainings, and/or joining the ACT listsev, as it is impossible to cover every aspect of the model in a two hour monthly meeting.

2) To provide consultation to individuals who are working to apply ACT in their clinical work. This group is for people who are actively using ACT in their clinical work and want to improve their application of ACT principles. Consultation may involve case conceptualization, practicing experiential exercises, role-plays, or discussion of whether ACT is appropriate for a given patient or presenting problem.

Participant agreements:

- ~ While not diminishing the importance of other forms of knowledge, we agree that this is an ACT-focused consultation group, not a general consultation group. Thus, we will work to focus the group on the application of ACT principles and work to come back to these principles when the focus wanders.
- ~ Group members agree to hold the content of what others say in the consultation groups confidential out of respect to the attendees and the individuals with whom we work - this is important both with respect to the sharing of difficult clinical cases and for experiential exercises that may occur in the group.
- ~ Group members also agree to practice radical respect for one another and to realize that they are in the "same soup" with one another - just as we strive to do with clients in therapy.
- ~ Discussion of group process is not a primary goal of the group, although if there are issues present in real time in the group that are relevant to the understanding of the ACT model, those can be used as in vivo examples.

Group values:

- ~ Creating caring communities (perhaps with as small as two members, like with our clients) where people are supported in living toward possibilities that they may not even see, rather than living out of limiting ideas of how they think life works. We will work to bring this sense of freedom and possibility into this group.
- ~ Lifelong learning and nurturing a "beginner's mind" to remain open to surprise, wisdom, and wonder.
- ~ Openness to alternative perspectives.
- ~ Living a life that is present, open, and authentic.
- ~ Making this work more manifest in our own lives and in teaching it to those who also care to learn about it.

Individual commitments that have been spoken to thus far:

- ~ I commit willingly to feeling what I will feel when I model what I know, both verbally and nonverbally, about how to live ACT.
- ~ I will work to shape the group process so that we have a group that doesn't simply talk about ACT, but actually does ACT in our meetings.
- ~ I will work to create an experience of choice in the group, not coercion.
- ~ I commit to valuing the values of those in this group.
- ~ I commit to willingly to experience whatever shows up for me. I am committed to willingly have my discomfort in our group.
- ~ I will bring my full self to the meetings.
- ~ I commit to doing the hard work in life (in addition to during group) that I ask my clients to do each day by showing up fully ~ not attempting to check my insecurities at the door on the way in
- ~ I commit to be an active and willing participant in the group.
- ~ I will prepare for the group meetings in some way, either preparing a case, a question, or an intention for myself for the meeting.
- ~ I will not buy the story "yeah, but I'm not as real of an ACT therapist as X" as that only serves an avoidance function for me and does not move me towards being the therapist I want to be for the clients I serve.
- ~ I commit to process experiential exercises from an honest personal standpoint and not attempt to separate my own experience from that which "clients" experience.
- ~ I commit to allowing everyone in our group space to experience what they experience - not rescuing others - when painful internal experiences arise in relation to an experiential exercise or discussing challenging clinical work.
- ~ I commit to being open to feedback from the group with a corresponding willingness to ask questions if I do not understand or disagree.
- ~ I plan to use the ACT model consistently during the 2-hour meeting in order to learn new skills and to practice and refine those skills I am familiar with.
- ~ In order to learn, I commit to act, fail, learn and continue to advance my knowledge of ACT.
- ~ I commit to practice risk-taking in both presenting and playing the "therapist role" in our meetings.
- ~ I will appreciate the efforts of all other group members and support them where I can.
- ~ I will respect others and value their contributions.
- ~ I commit to work toward differentiating between that which is ACT-consistent and that which is ACT-inconsistent.
- ~ I commit to asking questions when I'm not sure of something
- ~ I am committed to offering myself as a resource for the training mission of the group.
- ~ I am committed to making the group a place where I choose to grow and learn about ACT and functional contextualism. I will do this even if my thoughts and feelings suggest otherwise, and will make an effort to be there with patience and compassion.
- ~ I commit to having fun developing deeper, richer relationships with those that I share time on Friday afternoon.