

New study provides clinicians with better analysis of psychological flexibility

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According to figures from NHS England, some 1.4 million people were referred for NHS mental health therapy during 2017. This does not take into account people who accessed mental health therapy from private sources.

Increasing numbers of people of all ages experiencing some form of [psychological distress](#) are well-documented and reported in the media. A key therapeutic resource for clinicians and their clients is Acceptance and Commitment Therapy (ACT), where difficult feelings are not eliminated but rather accepted by clients so that they can commit to move towards behaviour and goals in line with their chosen values.

A core element of ACT is psychological [flexibility](#), which helps people get unstuck, deal with stress, improve wellbeing, but also build more meaningful lives around what it is they really value. To date, clinicians have had little scientific understanding of how the different component elements of psychological flexibility worked together to help cope with psychological [distress](#). It appeared to be a 'one size fits all' construct, thereby limiting a clinician's ability to tailor ACT to the individual needs of their clients.

New research from the University of Chichester, published in *Behavior Modification*, has for the first time analysed degrees of psychological flexibility and identified three distinct classes. It is thought that a knowledge of these classes among clinicians will help them to better tailor the ACT offered to their clients—with benefits not just for the

client but for public health in general.

The research team found three classes of psychological flexibility: high, moderate and low. Those in the low psychological flexibility subgroup reported the highest levels of psychological distress, compared to the lowest levels of psychological distress reported by those in the high psychological flexibility subgroup. Clearly, the therapeutic requirements for those with high levels of psychological distress are very different to those at the other end of the spectrum—by providing information on classes of psychological flexibility, the research team have presented clinicians with invaluable diagnostic tools upon which to create more individual therapeutic solutions.

It is hoped that their findings will stimulate further, much-needed research on the subject.

The study was led by Dr. Ian Tyndall and Dr. Antonina Pereira from the Department of Psychology at the University of Chichester. Dr. Tyndall commented: "Our study provides a clearer view to clinicians of the wider spectrum of psychological flexibility, which we hope will help them to facilitate greater change in their clients, in a way which is better tailored to their needs. With more and more people presenting with psychological distress, and seeking professional assistance with their conditions, it is important that the concept of psychological flexibility provides the necessary nuance to underpin successful therapy. Our study is an important addition to the literature, and we are looking forward to initiating further research in this area."

The research team at the University of Chichester worked with colleagues from Coventry University, the University of Milano-Bicocca, Italy, Trinity College Dublin and Maynooth University, Ireland.

More information: Ian Tyndall et al, Profiles of Psychological

Flexibility: A Latent Class Analysis of the Acceptance and Commitment Therapy Model, *Behavior Modification* (2018). [DOI: 10.1177/0145445518820036](https://doi.org/10.1177/0145445518820036)

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