

ACT AND “WORKING WITH PARTS”

USEFUL TIPS FOR ACT PRACTITIONERS

by Dr Russ Harris

Author of *The Happiness Trap* and *ACT Made Simple*





A VERY USEFUL METAPHOR

Talking about “parts” is a useful metaphor for bringing core ACT processes to life. For example, we may talk about “the part of you that notices” to reference self-as-context, or “the part of you that cares” to tune into values. Or we may say things like, “There’s a part of you that wants to move forwards here, and another part that’s really scared to do so.” Or we may talk about “different parts of your mind”, such as the “inner critic”, the “dictator”. Often (but not always), when we talk of a “part” in ACT, it’s a user-friendly metaphorical term for deeply-entrenched cognitive/emotional repertoires.

The metaphorical language of "working with parts" is more commonly associated with models such as Gestalt, Transactional Analysis (TA), and Internal Family Systems Therapy (IFST). However, it's also very much alive and well in ACT. If this is not already evident to you, I trust it will become so as we recap ACT's non-pathologising stance to these recurrent cognitive/emotional patterns: how we non-judgmentally notice and name them, turn toward them with openness and curiosity, explore their "purpose", understand how they've functioned in the past, accept them, appreciate what they have to offer, link them to values, and so on. *Note: we will not look at how to integrate ACT with other models. Rather, we'll explore how "working with parts" is intrinsic to the ACT model - whether or not we explicitly use the term "part".*



NAMING OUR “PARTS”

In ACT, we often label recurrent patterns of cognition/emotion with terms such as “stories”, “themes”, “narratives”, “core beliefs”, “patterns”, or “schemas”. As a user-friendly alternative to such terms, we can refer to such patterns as “parts”. For example, instead of (or in addition to) talking about the “not good enough story” or the “abandonment theme”, we may prefer to talk about “the part that keeps saying you’re not good enough” or “the part that’s trying to save you from abandonment”.

In ACT, we often give names to various “parts”, to facilitate defusion and acceptance. For example, we may ask a client: “So this part of you that’s always criticising you, judging you, putting you down – what would you call it? If you wanted to give it a label or a name that encapsulates all those different thoughts, and the feelings that go with them?” And if the client struggles to come up with a name, we may suggest one: “The Inner Critic” or “The Dictator”. Similarly, we may refer to a cognitive process such as worrying in terms of “the part of you that’s trying to keep you safe, protect you from danger, help you prepare for the worst” or “the protective part” or “the caretaker”. We may even go further and ask the client to imagine what this particular part would look like and sound like if it were a person, animal or cartoon character – which opens wide the door to defusion.

More simply, we may say things like “so there’s a part of you that thinks ABC” or “there’s a part of you that feels DEF”. However, if we’re using metaphors like “passengers on the bus” then instead of talking about a particular “part” we may refer to a “passenger”. Likewise, in the “many selves” exercise, the word “self” is used rather than “part” – e.g. your strong self, your professional self, your suffering self. But you could easily change “self” to “part” and call it the “many parts” exercise. It’s exactly the same exercise; only the metaphorical label changes.

GUIDE, COACH OR FRIEND

In ACT we often compare “parts” of our mind (i.e. repertoires of cognition) to a guide, coach, or friend. We can then play with these “parts” to foster cognitive flexibility or self-compassion. Here are a few examples:

Wise Guide/Reckless Guide

Therapist: So, there are different “parts” of your mind, that show up at different times. Sometimes the “wise guide” pops up and gives us great advice to help us get on in life.

Other times, the “reckless guide” pops up: encouraging us to take reckless risks or put ourselves in danger. So right now, which guide is talking?

Overly Helpful Friend/Genuinely Helpful Friend

Therapist: Hmmm. Remember we talked about how our mind can sometimes be an “overly helpful friend”? Do you think that’s maybe what it’s doing right now? Suppose your mind wanted to be genuinely helpful, rather than overly helpful, what might it say about this?

Harsh Coach/Kind Coach

Therapist: You know, there are two types of coaches in school sports. There are harsh coaches, who yell at the kids, call them names, come down hard on every mistake, constantly judge, compare, and criticize. And there are kind coaches, who encourage the kids, build on their strengths, and give genuine feedback about mistakes in a kind and caring way. Good news is, the harsh coaches are a rapidly dying breed. Do you know why?

Client: Why?

Therapist: Because kind coaches get much better results. So right now, which one is talking: the harsh coach or the kind coach?



THE SIX “PURPOSE” QUESTIONS

ACT takes a non-pathologising to all private experiences (thoughts, feelings, emotions, memories, urges, sensations); we validate and actively foster an inclusive, accepting stance towards them. Early work in ACT often involves noticing, naming and normalising 'difficult' patterns of cognition/emotion: a good place to start for both defusion and acceptance. Often, a powerful next step is to look at the “purpose” of this cognition or emotion or cognitive/emotional pattern: the ways in which it’s “trying to help”. We may explore questions such as:

- **What’s it trying to help you escape or avoid?**
- **What’s it trying to help you get or achieve?**
- **What’s it trying to help you do differently?**
- **What’s it trying to help you learn?**
- **What’s it trying to tell you is important, really matters?**
- **What’s it trying to tell you about looking after yourself or others?**

Such questions commonly connect clients with values, values-based goals, or important aspects of life that require addressing. Thus the popular ACT saying: "your pain is your ally". In addition, they can foster acceptance: they can help us to see that these painful repertoires are not "the enemy"; they are not your mind & body trying to "sabotage" you. Rather they are normal, natural, valid, and understandable aspects of being human.

We can use any or all of these questions, to uncover the “purpose” of a “part”. For example, the part of you that’s scared, worried, fearful, hesitant to take risks, reluctant to try new things ... is basically trying to keep you safe, protect you from harm, ensure you don’t get hurt.

Most clients, with a bit of gentle prompting, can answer the “purpose” questions for themselves. But if not, we can help them out with some psychoeducation. For example, we may explain that: “So this part of you that says it’s pointless, meaningless, hopeless, useless, won’t work, no point in trying ... it’s basically trying to save you from failure, discomfort, anxiety, getting hurt. It knows that if you were to commit to doing something different, that’s risky; you might fail; you might get hurt; you might invest all that time and energy to no avail, so it’s all a big waste. Even the thought of leaving your comfort zone to try something new brings up all sorts of difficult thoughts and feelings – especially anxiety – so this part of you is trying to save you from all that discomfort. That’s why it talks you out of trying.”

Very often (but not always) the "purpose" of problematic cognitive/emotional repertoires is safety/self-protection/self-care, so there are many ACT metaphors that address this: the "don't get killed" machine, "caveman mind" metaphors, "radio doom & gloom", "this is your mind doing its number one job: trying to keep you safe, stop you getting hurt", and so on. When we understand the “purpose” of a given part (i.e. how it’s trying to help) that can foster both acceptance and self-compassion.





TRAUMA AND THE ORIGIN OF “PARTS”

In “Trauma-Focused ACT”, we take the time to explore the history of trauma-related cognitive/emotional repertoires – how they originated, and the useful functions they had in surviving trauma. For example, in cases of abuse in childhood by a caregiver, the child may develop a strong repertoire of self-blame - *It’s my fault, I made it happen, I’m bad, I deserve it* – which persists into adulthood. Typically, in TFACT, we call these “themes”, but you can use any other terms you prefer: narratives, stories, schemas, and so on. So if you like the metaphor of “parts”, then instead of calling it the “it’s my fault” theme, you could call it the “blaming part” or “the part that blames you”.

We might then discuss the following: A child unconsciously needs to maintain a positive view of her caregivers, no matter what they do wrong, because they are the child’s life support system. If the child consciously acknowledges that her “life support” is a source of threat & danger, this is truly terrifying. Therefore, when caregivers are abusive, children will often automatically and unconsciously blame themselves for it: “It’s my fault”. This helps protect a child from the terrifying and painful reality of their caregiver(s). Following this discussion, we may then reframe this theme or part as a “protective theme” or a “protective part” (as opposed to the more typical phrase: “your mind trying to keep you safe”).

(If you don’t know much about the new paradigm of Trauma-Focused ACT, there’s a quick overview here: [chapter one of the textbook “Trauma-Focused ACT”](#))



“PARTS” AND THE DELETE BUTTON

We have many different “parts” inside us, and they’re there to serve a purpose – to help us avoid/escape things we don’t want, or get things we do want, or do things differently, etc. It’s important to emphasise with clients that we can’t simply get rid of “troublesome” or unwanted parts. As the ACT saying goes, “There’s no delete button in the brain.”

However, although we can’t remove "old parts", we can learn to live with them peacefully, cooperate with them, find what’s helpful in them, and actively make good use of them when possible. (Just as we do with all difficult thoughts, feelings, emotions, memories, etc.)

Notice that this concept, and all the ones we covered earlier, are all intrinsic to ACT. All we need do to "work with parts" is to change the term we use. Instead of a term like "theme", "narrative", "story", "schema", "core belief", "your mind beating you up", "your mind trying to keep you safe", "the inner critic", "the dictator", "radio doom and gloom", we use the term "part" as a convenient way to label a recurrent cognitive/emotional repertoire of clinical interest.



ATTACHMENT THEORY AND “PARTS”

In “Trauma-Focused ACT”, we also embrace attachment theory, so we can explore the origin of parts with reference to attachment style. Two areas we commonly focus on are: a) what the client finds threatening in relationships and b) how they try to get their needs met in relationships. So when repertoires of cognition/emotion trigger fused or avoidant problematic interpersonal behaviours, although we typically label them as “themes” or “patterns”, we can, if preferred, refer to them as “parts”. For example:

“So this part of you is trying to keep you safe. It’s reminding you, way back in the past when (your caregiver) did ABC, things like XYZ happened – so watch out, or it may happen again.”

“So this part of you is trying to help you get your needs met. It’s reminding you, way back in the past the way to get these needs met from (your caregiver) was to do XYZ – so it's telling you: *stick with that strategy, because it worked well in the past!*”

“So this part of you is trying to help spare you from getting hurt. It’s reminding you, way back in the past, (your caregiver) could never meet these needs, and that was so painful for you. So it’s warning you not to even try getting your needs met in this relationship, or you’ll just get hurt again.”



CONFLICT BETWEEN "PARTS"

When parts seem to conflict each other, we can explore what each part has to offer, and thereby help them “cooperate” with each other. In ACT, this type of work technically is classed as “flexible perspective taking” to foster “cognitive flexibility”.

As we explored earlier, every “part” is “trying to help” us: to escape/avoid things we don’t want, or access things we do want, or do things differently, or learn important lessons, or remember what’s important to us. So we can explore how each conflicting part is trying to help the client.

From there, we may go on to explore how these parts may “work together” towards therapy goals; in other words, what can be taken that’s useful from each repertoire? This kind of work is especially useful with “passengers on the bus”: we can explore how each passenger is trying to help, and see if there are ways to make good use of what it has to offer.

This work is also useful for developing self-compassion. We can identify a “self-critical” part and ask the “purpose questions” (page 5) to identify what it’s trying to help the client to get, avoid, do differently etc. Then we can work on developing a self-compassionate part that can effectively help the client with these things, but in a kind, caring, supportive manner (for example, using values for motivation rather than self-criticism, as in the donkey/carrot/stick metaphor).

Some ACT practitioners go even further with this, utilising the popular “empty chair” technique (originally from Gestalt therapy) to encourage the client to actively “take the role” of and “speak for” the different parts.



“PARTS”: DEFUSION & ACCEPTANCE

Almost all defusion techniques involve the non-judgmental noticing and naming of recurrent patterns of cognition. So instead of calling it “the ‘not good enough’ story” or “the ‘can’t do it’ theme”, we may talk about “the self-critical part” or “the self-doubting part”.

Another important aspect of defusion is “looking at the mind’s purpose” in generating these thoughts: what it’s trying to help you escape/avoid, or gain access to, or do differently etc. There's some powerful reframing going on here: your “mind” is not your enemy, out to sabotage you, but more like an “overly helpful friend”, trying hard to help you, but doing so in ways that are, unfortunately, ineffective. From here, we can easily segue into techniques like “thanking your mind”: *Thanks mind. I know you’re just trying to help me XYZ - and it’s okay, I’ve got it handled.* Similarly, when we tease out the underlying “purpose” of a “part”, we reframe it; for example, we see that fearful/worrying/hesitant/avoidant part is actually a “self-protective part” or a “caretaker”, trying to keep you safe. We may then “thank the part” rather than “thank the mind” (or even “thank this part of the mind”).

When we understand the “purpose” of any cognition, emotion, or cognitive/emotional repertoire facilitates acceptance; when we realise it's not out to sabotage us or make life miserable, but actually there to help, it's much easier to apply the four As of acceptance: acknowledge, allow, accommodate, appreciate. This same wisdom applies to all "parts" of ourself.



“PARTS”: PRESENT MOMENT AND SELF-AS-CONTEXT

Over the years, I’ve become somewhat disenchanted with terms like the “observing self” or the “noticing self”; I much prefer to talk about the “part that notices” or the “part of you that notices everything”. We can invite clients to use that "noticing part" or "observer part", to notice literally anything present: their thoughts, emotions, sensations, the world around them, and so on.

Similarly, at any point in an any session, we can ask a client to notice if a particular part is active - and if so, what’s it saying or doing? What thoughts or feelings are showing up? Is it "urging" the client to do something in particular? And if they act on that urge, will it take them toward or away from the life they want?



“PARTS”: VALUES, GOALS, COMMITTED ACTION

We can tease out values and goals from almost any painful emotion or cognition, through exploring the “mind’s purpose” in generating the thought, or the “brain & body’s purpose” in generating the emotion. (We can use any or all of the “purpose” questions on page 5) And of course, this applies to “parts” too. Asking the “purpose” questions of any “part” will usually connects us with important values and goals, or areas of life we need to address, and we can then translate this into effective, values-guided action.

An important part of action-planning is to anticipate psychological barriers. So in the same way that we ask clients, “How will your mind try to talk you out of doing this?” and “What difficult feelings are likely to show up?”, we may ask, “Which part is likely to show up when you do this?”, “How might this part try to talk you out of it?”, and so on.

A standard element of ACT is to pre-empt that fear/anxiety/doubt/uncertainty are guaranteed to arise when we step out of our comfort zone, take risks, try new things, face up our fears, tackle our problems, experiment with new behaviours, and so on. Indeed, even just the thought of doing something differently can trigger high anxiety. Similarly, we can pre-empt that “the protective part” or the “fearful part” or “the caretaker” or “the security guard” will show up and try to “do its job”: to keep you safe, stop you from taking risks, etc.

“PARTS” AND AMBIVALENCE

We can use the metaphor of “parts” to help clients accept their ambivalence (i.e. conflicting thoughts and feelings) about making changes or following a particular course of action. For example: “There’s a part of you that has a small glimmer of hope, and another part that feels completely hopeless,” or “There’s a part of you that’s wants to do something different, and another part that wants to keep things as they are,” or “A part of you that’s ready to do this, and another part that’s terrified.”

We can normalise and validate these conflicting parts: as soon as we contemplate stepping out of our comfort zone, the self-protective part rises up. We can help clients to accept that “both parts will be coming along for the journey”. Then, as discussed earlier, we explore what each part “has to offer” and how we can “make use of their wisdom”.

IN SUMMARY

When folks ask me about how to integrate ACT with models such as Gestalt, TA, or IFST, I answer: “*I don't have a clue!*” As I know almost nothing about any of those models, I'd never try to advise on integration. But “working with parts” ... well, that's a different story. Leaving other models aside, we can use the metaphorical language of “parts” in ACT, without needing to bring in anything new. As I said right at the start, ACT's non-pathologising stance to recurrent cognitive/emotional patterns: non-judgmentally noticing and naming them, turning toward them with openness and curiosity, exploring their “purpose”, understanding how they functioned in the past, accepting them, appreciating what they have to offer, linking them to values, and so on all of that is intrinsic to ACT, whether or not we explicitly use the term “part”. So I encourage you to go off, be creative, and enthusiastically play around with these ideas.

And ... if you’re looking for more training in ACT, you may like to check out the next and final page of this eBook, which lists my extensive range of online courses.

Good luck with it all,

Cheers, Russ Harris

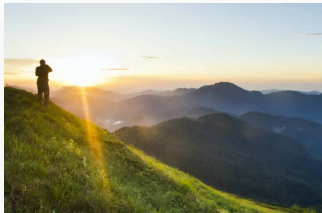
About Russ




Dr. Russ Harris is an internationally best selling author, medical doctor, psychotherapist, life coach, and consultant to the World Health Organisation. He has directly trained over 80,000 psychological health professionals in the ACT model (in Australia, Europe, UK and USA), and his textbook for professionals, ACT Made Simple , has sold over 150,000 copies. Of the nine books he has written, the best known is The Happiness Trap, which has sold over one million copies, and been translated into thirty languages.


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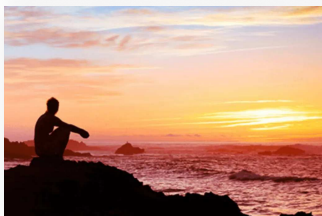


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