

Steven C. Hayes ‘Why can’t we speak to the deepest issues of meaning, love and loss?’

Kal Kseib meets Steven C. Hayes,
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How do your ideas connect with your values?

I’ve tried in my career to be less concerned about brand names and personal applause, and more concerned about building community and connecting to this larger value of ‘how can we best serve people using science?’. I get more excited in my personal work about supporting the work of others. I mean I’m productive, I do research, I write books. But to this day I’ve never not responded to an email. If a patient contacts me and says, ‘I’m in misery, what do I do?’: yeah, it might be two or three sentences, but I’m going to try and do something. So my value is being of use and building a community that can profoundly be of use – trying to bring science into alignment with what society needs and wants from us. And I don’t think we’ve always served that.

You’re one of the founders of acceptance and commitment therapy, or ACT. What is the greatest opportunity ACT has in today’s world?

Reaching the culture. My son’s favourite cartoon show is *Steven Universe* – it’s very sweet. Garrett is a kind of a meditation or mindfulness person, a wise adult. She sings a song called ‘Here comes a thought’, and the show notes say she got it from ACT. The first stanza is ‘flexibility, love and trust’, and it walks through what to do with difficult thoughts. It talks about seeing and feeling, and watching the thought. And they actually lie on the ground like they’re watching clouds. I started crying seeing it because I’m thinking, ‘how many children have shame that they’re carrying?’ It’s got to be a large percentage of children, right? And they can’t talk to their parents, and they can’t talk to their peers, because what is it they’re going to say? ‘Just don’t think about it.’ And it’s like pouring gasoline on a fire, it’s just a horrible thing to do to shame... it’s saying there’s something wrong with you for feeling and thinking that, and you just need to think differently and it’ll go away. We can do something a lot wiser than that.

It sounds like a powerful message.

Will a young child – a six- or seven-year-old – hear a

song on a cartoon show and behave differently?

I don’t know. But I do know that 17 million people have listened to this song, and that’s a lot. There are some children there that will be moved by it.

So can we put this into the culture in such a way that it has a chance to bump people in a healthier and more helpful direction? That’s the kind of science I would like to see us do. There are studies that show if you change, your friends are more likely to change in the direction you’ve changed, along with their friends and the friends of their friends. If you’re a fairly socially active person and you stop smoking, about 10,000 people are influenced. The idea that we, as psychologists, are just working with people one at a time, or in small groups, it’s bullshit. We’re working with the entire freakin’ culture. But if we can just figure out what the processes are and how to put it into human lives, artists will help us, industry and business will help us. Start-ups will help us. We’re not out there fighting this fight alone, but let’s fight it with good science linked to processes of change that really matter.

Where is ACT heading now?

It seems to me that the field is moving from an era of protocols for syndromes into an era of processes-linked procedures. The way I like to say it – there are a lot of ‘p’s in it – processes linked to procedures that help with problems but also promote the prosperity of people. Understanding what it is that the person really wanted from us.

Psychologists are everywhere, they’re in everything. But there’s a cacophony of voices. If we focus on processes, that mediate and moderate outcomes and on the procedures that move them, suddenly all of these school differences begin to diminish and we can focus on how the process is moved and how best we do that. I’m looking forward to seeing more of what I already see, which is a deeper sense of cooperation. So where ACT is heading, I think, is being at the leading edge of a larger thing. And if we get there, psychology as a field will become much, much more relevant, but in a coherent way.



What will be the greatest challenge in getting there?

There are philosophical divisions which are real, and you simply can't ignore those. But some of these are theoretical divisions and I think it's time to put some of these behind us and get on a page of evidence-based processes. We're going to need different kinds of studies. We're going to need better science. Laboratory science linked to clinical science is a vital part of your tradition here in the UK, whereas in the US it almost died out – and it will be about bringing some of that back. We became very good at doing randomised clinical trials for syndromes and it's going to be painful to put some of that aside, because that can only take you so far. If you add mediation and moderation you can do a lot, but even then we have different trajectories – some people are succeeding, some people are failing. And we can't just call that

error. These are human lives, not errors. And so one of the big challenges scientifically is how we do that in a way that really is respectful to the individual and yet is progressive. The old solutions, the single case designs, the randomised trials, are just not adequate. I think we're going to need very big data sets that are very intensive and individualised. It's the kind of thing that an NHS, let's say, could actually do as we gather more process-oriented focus. We have a chance to do it.

When are you at your most focused?

I would say in two areas. One is when I'm in front of pain – my own pain or the pain of others, from my children to the people that I work with professionally. I do a lot of work trying to dig into pain, and so pain to me is a focus point because of the possibility inside. It's an energy and it's not something that needs to be

subtracted or eliminated. It's an energy that's very powerful. If you go and look at my first TED talk, I talk about where I started the ACT journey – at two o'clock in the morning on a shag carpet. I just made a turn as I kind of hit rock bottom. But that turn was inside the energy of anxiety. Later on I found out it was inside the energy called 'sadness'. My own history of domestic violence, of witnessing it, kind of broke through. Some 'ah ha' memories showed up.

So, when I'm in front of somebody who's in pain, I'm focused because what I feel is the *possibility*. A metaphor I use a lot is like the pivot in a hinge. If you're going to open a door, you don't actually push it in the direction you want to open it... the hinge swings it round. And it's like that. You can swing this energy around, and a good clinician knows how to do it, to take the energy that's inside – sadness, anxiety, urges, et cetera. – and swing it around towards a life worth living. Most experienced clinicians wake up in those situations. If you're in front of a client hearing a big, heavy, interpretive, cognitively entangled 'blah, blah, blah', part of you is fighting to stay awake. But if you get down to just the pain of it, I've not met a good clinician who doesn't wake up. I don't think it's just because they want to get rid of it and subtract it, it's because they feel in that energy, something really important can happen right here. And I think that's the place where I have the single most focus.

If I had another one it would be when I see the potential for bringing together elements of the community or the intellectual tradition that I'm trying to put together. And so I wake up and focus in conversations with my colleagues. I see the possibility for connection and participation in combination, so I think of myself like a catalyst.

What is the most important lesson life has taught you recently?

A painful one is to see is that in my focus I sometimes leave people I love behind. My wife teases me over this ability to focus, which is both a good and bad thing. But if I put an intellectual issue that I'm chewing through in front of me, my focus will narrow. I think love is an open process and that a lot of the work we're doing in therapy is really teaching people how to take a more loving approach to themselves and others. But love also requires this broader focus sometimes, and the lesson would be to make sure that I stay broad enough to not let people that I love fall out of focus. So that's a dance, of 'how do we narrow in our focus, and also broaden out our focus?'. And I think we're doing that clinically all the time. I just had a *painful* talk with one of my elder children about something I missed over about a two-year period in their childhood and as it was told I was like, 'Of course I shouldn't have missed that. How was I not there for you during that?'

So I catch that in myself with enough regularity to know that it's a really important thing to work on. It's a lifelong issue. I'm sure a lot of people can relate to it because if you're very productive and working hard,

every moment you're focused on one thing you're not focused on something else.

Is it something you've become better at over time?

I think I have got better at it, but I'm still not that good! It's a work in progress, but aren't we all? I don't think there's any finish line. I don't think we get an award at the end. I think we probably just keep working, keep chopping.

What advice would you give aspiring psychologists?

I think the biggest thing that people need to bring to their work is the whole of themselves. In these roles that you may be in as a psychologist – research, clinical, academic or teaching – you can sometimes forget why you're in the field. You get caught up in the problems in the clinic, with your clients, with your colleagues – it's all the normal things, right? But, you know, psychologists are studying this pivot point of human behaviour and their doing of that is human behaviour, so you constantly have this reflective quality. Your field will never leave you. There's no moment in which you're alive where the feeling will leave you. Maybe that's true in some ways with biology, physics, chemistry, but it doesn't seem to be quite as dominant as in psychology.

So I always tell young psychologists 'bring what you really, really care about to the work', and there's this other part if you're going to do it as a scientist – as an empirical person – of holding that in check, in the sense that there's something inside your caring that's important, and we filter what we do and what we learn and what we know, though this *kabuki* dance of scientific evidence. I think students, or young professionals in general, sometimes feel they have to either forget who they are – follow the rulebook, or fit into the role – or take the approach of 'forget all that science stuff, I believe this because of some personal story'. Either one of those is a mistake, I think.

When I teach brand new students, say, research methods, the very first thing I get across is this: the modal number of citations for a publication in psychology is *zero*, which means nobody has been influenced by it enough to actually put in writing that it mattered. So I only want something that you really have heart for, something that deep down you think might really matter. And then I tell them, 'and by the way, your research idea almost certainly is a bad idea', because that's how it [the modal number of citations] gets to zero. From there we can figure out a way that maintains the heart, and that won't have zero citations. There's like this dialectic of 'how do we come into our field as social human beings with this core of caring, and nurture and sustain that, but also learn how to channel our interest and questions in a way that will have a long term impact on the world – on our clients and on our colleagues?'

What's something people don't know about you, that if they knew, they would be surprised?

I think people are sometimes surprised that if I wasn't going to be a psychologist, my other big thought about what I would be is a carpenter. I'm a veteran re-modeller, I'm tearing down my house all of the time. People sometimes think I'm a geek, but I can put in plumbing and I've built an entire house from nothing, from the foundation to the roof – done everything myself. So I'm a builder and I try to bring that sensitivity into what I do research-wise and clinically also. I want to build something that lasts and that matters, and I think we've been able to do it in some of the work we've been doing in CBT and ACT, and Mindfulness and ACBS etc.

What are you most grateful for recently?

Well, other than my health, which at my age is where I would always start, I'm grateful for my family.

I sometimes think about this:

'Would I be able to function in the way that I'd want to in trying to promote and foster the work and help people, if I didn't have my family with me?' Especially my wife, who is one tough cookie. She doesn't let me get away with anything! If I'm doing something that's bullshit, she knows it almost before I know it. And yet she

really deeply loves me and accepts me for who I am, and that's pretty sweet. I have four kids: a 11-year-old boy, I've got a 25-year-old girl, a 28-year-old son, and a 47-year-old daughter – which if you do the math means that I'll have had children in the home (by the time little Stevie goes to college) for 55 straight years!

My kids are teachers, and blessings in my life. And I've let them down and I've been there for them. I think I've been a pretty good dad, but not always. And so I'm thankful for that, too. They're willing to hold up a mirror and still give me a hug. They know the places where I've succeeded and failed as a dad. My eldest son now is in my universe, he's working for New Harbinger Publications as an acquisitions editor, which is kind of crazy – it's really, really neat. My middle two are in film. And then I watch this amazing 11-year-old that I've got – little Stevie – who's in a full time gifted and talented class. He's a brainiac and turning out such interesting things. He says 'hey Dad, did you know...?' and half the time the answer is 'no, I didn't know that!' And he's in the fifth grade! So, I'm thankful for my family.

Imagine that all of your 41 books and hundreds of publications have been wiped out, and it's your final day; everyone you've ever cared about is by your bedside. What three things you know to be true about the world would you share with them?

I could get it down to one, which is that love isn't everything, it's the only thing. Within the psychological flexibility model, I challenge my students by saying

to them, 'turn that into a sentence, and then turn that into a word.' And the two words they come up with are 'love' and 'be'. I know it sounds kind of 'hokey', and my more critical science colleagues are probably wrinkling their noses, and I understand that. Here's the way I sometimes say it: Think of somebody who profoundly lifted you up – a coach or a teacher, a lover, a spouse, a teacher, a friend, a therapist – pick one – and let me ask you a few quick questions: 'Did you feel profoundly accepted for who you were? Were you constantly judged by that person or did judgement seem to be far away? When they were with you, were they with you and attentive and here and now? Or were they constantly looking at their watch with their mind halfway somewhere else? And did your values matter to that person, or were they willing to ride over what you deeply care about? Could you be together in different ways that fit the situation but that wouldn't violate values (it wasn't always one way, the high way, if you didn't agree)?'

"I only want something that you really have heart for, something that deep down you think might really matter"

It might not escape you that I've just gone around the flexibility hexagon of Acceptance and Commitment Therapy with those questions. So, 'did you feel loved and empowered by that person?' I think you're probably going to answer 'yes'. Well, when our clients come to us, I think they're looking for the same thing. And

no, we're not their friend, we're not their lover, we're not their spouse, we're not going home with them, but we're going to create a loving space for them to be whole human beings in the therapy room and – if we're successful – in their lives. Why can't evidence-based psychology talk about things like that? Why can't we speak to the deepest issues of meaning, love and loss; of life and death; of purpose, connection and contribution; in a way that does justice to the human depth of these issues and their social importance?

And so 'love is not everything, it's the only thing', isn't just a personal thing – I think we kind of feel that. I think most people can relate to it in some point in their lives. Could we also make it at the centre of what we're doing as a field clinically, with our colleagues, in our communities and in our homes? Because it looks to me like what this world needs is to learn how to be with ourselves and others in a way that is empowering and loving. If our field could be about that I think we'd be stepping up to what people want from behavioural science and from psychology – how to be more effective and whole in their lives. I would like to see us change the scientific conversation towards processes that liberate people, and I think if we do that as a field the human community will feel as though they met the challenge that they gave to us.

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