

Thanks for joining us on Not Boring CEs, where we don't think you should be bored to death while getting your Continuing Ed. Keep listening here, then hop over to notboringces.com to get all your online CE credits. Alright, y'all, let's get to learning.

Dr. Alexa Bonacquisti is a clinical psychologist with expertise in reproductive health psychology and perinatal mental health. She is certified in perinatal mental health (PMH-C) through Postpartum Support International, and she has nearly 15 years of experience providing psychological assessment and treatment to women across the lifespan, with specific expertise in treating perinatal mood and anxiety disorders and supporting women with the transition to parenthood. She also has experience working with women and families who are navigating stressful reproductive life events, such as pregnancy loss, infertility, birth trauma, and infant admission to a neonatal intensive care unit.

Dr. Bonacquisti earned her PhD in clinical psychology at Drexel University, with a concentration in health psychology. She completed an APA-accredited clinical internship at the University of North Carolina School of Medicine in Chapel Hill, specializing in women's mental health and behavioral medicine. Her postdoctoral fellowship focused on perinatal mental health in Drexel University's Department of Psychology and Mother Baby Connections program.

As a licensed psychologist and Assistant Professor of Clinical Psychology at Philadelphia College of Osteopathic Medicine, Dr. Bonacquisti's clinical and research interests focus on reproductive-related mood and anxiety disorders and mental health outcomes that occur in the context of reproductive functioning and coping with stressful reproductive events. In addition, she is interested in developing and evaluating innovative psychological treatments in these contexts, such as the use of Acceptance and Commitment Therapy (ACT) during the perinatal period. Dr. Bonacquisti is dedicated to the provision of evidence-based interventions and empathic clinical care. Her clinical work focuses on treating women across the lifespan, with an emphasis on the psychological aspects of the reproductive journey.

Allison Puryear (she/her): Welcome back to Not Boring CEs. I'm here with Alexa Bonacquisti, and we are going to be talking about using Acceptance and Commitment Therapy for perinatal mental health.

Allison Puryear (she/her): I'm excited as somebody who struggled with PPD postpartum depression back with my first daughter. Gosh!

Allison Puryear (she/her): Almost 11 years ago

Allison Puryear (she/her): and that subsequently made me terrified that I would have it again with my second but I got really good care, and I want there to be more people out there providing really good care. So everybody has the benefit of what I was able to experience during one of the darkest parts of my entire life.

Allison Puryear (she/her): So thank you for being here, Alexa. I really appreciate it.

Alexa Bonacquisti: Yes, I'm so excited to be here. Thank you for having me and for sharing. You know your personal experience, because I think that is something so many, so many women go through that and don't know that other people are are feeling the same way, and.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Important, you know, to talk about it. So I'm really glad to be here with you today.

Allison Puryear (she/her): Yay awesome. Well.

Allison Puryear (she/her): where should we start? Should we kind of first just do some definitions or some explanation of perinatal mental health

Allison Puryear (she/her): topics, diagnoses, issues. We start there.

Alexa Bonacquisti: Absolutely.

Alexa Bonacquisti: Yeah. So when we talk about the perinatal period typically the term "perinatal" refers to pregnancy and up to like one year, postpartum. The definitions kind of vary depending upon, you know, different settings and and things like that. And then you'll typically hear people talk about postpartum. Which is the period after delivery.

Alexa Bonacquisti: and kind of thinking about different stressors and challenges that happen during that timeframe, as well.

Alexa Bonacquisti: So, yeah, so that's sort of what we're thinking about as far as terminology. With respect to this time period. And this transition.

Allison Puryear (she/her): Absolutely. And so

Allison Puryear (she/her): there are a lot of things going on with the perinatal experience that might not be happening just in somebody's non perinatal experience their day to day lives? Can we.

Allison Puryear (she/her): Talk about that, and how that contributes to psychological distress.

Alexa Bonacquisti: Yes.

Alexa Bonacquisti: So yeah, I think it's important to think about the broad range of experiences that individuals may have during pregnancy. And then in the transition to parenthood. So I can talk to you a little bit about some of the psychological symptoms or concerns or diagnoses that we might see and then maybe

Alexa Bonacquisti: connect to that with, like some of the aspects of the perinatal experience that I think exacerbate or contribute to that. So a lot of people know about postpartum depression. There's been a lot of advocacy and a lot of attention to that topic in the last. Maybe, you know, 20 years or so. Still, a lot of work that needs to be done, and a lot of awareness that that we still need to bring about. But I think a lot of people are more aware of postpartum depression which

Alexa Bonacquisti: refers to

Alexa Bonacquisti: depressed mood, sadness, lack of interest or pleasure, and things that you used to enjoy, irritability, sleep disturbances which is always challenging when we have a newborn so that kind of that symptom can be a little tricky to assess there, changes and appetite, feelings of guilt and worthlessness and shame, and sometimes suicidal thoughts or

Alexa Bonacquisti: suicidal attempts, so

Alexa Bonacquisti: lot of different things that can happen. In terms of depression. And we see that there's a range. So some people may experience depressive symptoms that wouldn't necessarily meet criteria for a psychiatric diagnosis. But they're still affecting their life, and they're functioning. And so we kind of look at it like on a continuum where people may experience that. And then another really common experience during the perinatal period is anxiety.

Allison Puryear (she/her): Hmhm.

Alexa Bonacquisti: So it's often co morbid with depression. It's often, I think, recognized less frequently, you know, than we might recognize depression. I think anxiety. In some ways it's like, become more of a normative experience like, Oh, yeah, of course, you're a new mom. You're anxious, but it can be really debilitating, it can negatively affect functioning.

Alexa Bonacquisti: And so what we see with anxiety is, yeah, just frequent worries, rumination. Sometimes like avoidance of different activities or experiences which can ultimately yeah, really affect again, people's functioning and their overall wellbeing.

Alexa Bonacquisti: Whom.

Allison Puryear (she/her): Yeah. And I think about how so much of this is not talked about. Like, I know, I was kind of afraid to say out loud all the things I was thinking and feeling, and you know everything's disrupted. Hormones are out the window. Your like sleep is out the window. There's you're not.

Allison Puryear (she/her): You're already not your quote, unquote, normal self. Having just had a baby to be able to gather your typical internal resources to reach out to the people that you love and let them know you're struggling

Allison Puryear (she/her): and it it feels very common to me

Allison Puryear (she/her): like, just off the top of my head. I've got an acquaintance who had perinatal. OCD. I had a close friend who had

Allison Puryear (she/her): perinatal psychosis.

Allison Puryear (she/her): and like

Allison Puryear (she/her): big deal things that like take over your whole life.

Alexa Bonacquisti: Hmm.

Allison Puryear (she/her): And can be.

Allison Puryear (she/her): can really color the way that you are looking at being a parent especially if it's your first time as a parent

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Absolutely. Yeah. I think that kind of connects to this idea of like, what is it about the postpartum or the perinatal period that that uniquely contributes to psychological distress. And I think a lot of what you're saying in terms of some of the stigma around it, and people feeling hesitant to disclose what

Alexa Bonacquisti: what's truly happening because of the shame or the guilt that they may experience around that

Alexa Bonacquisti: and also thinking about. Yeah, what are the this. We talked about depression and anxiety, but we certainly see perinatal OCD perinatal PTSD, perinatal psychosis like there's a range of you know, even bipolar disorder, like a range of

Alexa Bonacquisti: different symptoms and experiences that can happen during the postpartum period that either are like an exacerbation of pre-existing symptoms, or sometimes a new onset of symptoms.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: And so I sort of really think about it. Thinking about like the unique kind of aspects of the perinatal period, from like a bio-psycho-social perspective.

Alexa Bonacquisti: So.

Alexa Bonacquisti: considering the from the biological contribution, like the hormonal shift that happens.

Alexa Bonacquisti: Which some individuals are really uniquely vulnerable to that change in hormones.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: We kind of see that over the course of pregnancy progesterone and estrogen are gradually increasing, and then at the time of delivery there's a pretty dramatic drop off in those hormones, and some people are just uniquely vulnerable to that shift in hormones which can exacerbate psychiatric symptoms, or, you know, cause some of those disturbances in mood and functioning

Alexa Bonacquisti: also see, just like the physical changes. Right? Like your body, looks different, feels different. The physical recovery that's required after birth.

Allison Puryear (she/her): Yeah, which nobody talks about like I felt so prepared for the actual birth experience. But nobody was like, then you're gonna be wearing a diaper for like weeks and like it's gonna be a mess, and it's all gonna hurt.

Allison Puryear (she/her): and you're not gonna sleep. And all of it.

Alexa Bonacquisti: Nobody is prepared for that, and I talk with so many, so many clients who are feel really, yes, shocked and like

Alexa Bonacquisti: just they had thought so much about the birth, and like taking care of the baby, but didn't.

Allison Puryear (she/her): Anything else.

Alexa Bonacquisti: What is this gonna feel like for me? And yeah, the physical recovery can be incredibly challenging and then doing all that like without sleeping, and you know care of a newborn is really hard.

Allison Puryear (she/her): Yeah, absolutely. And I'm

Allison Puryear (she/her): I don't think that I appreciated how powerful hormones were until my postpartum depression experience, because all like this was a wanted pregnancy. This was a

baby we had like hoped for. We had. We were financially set up. We were emotionally as ready as one can be to be. Apparently we had every

Allison Puryear (she/her): we had everything we wanted. And yet I was. I was battling, not just driving down the street and never coming back

Allison Puryear (she/her): like that was my my darkness. It wasn't, thank goodness, it wasn't suicidal ideation or attempts, but it was like this baby would honestly be better off without me because I would. I'm such an

Allison Puryear (she/her): awful mother.

Allison Puryear (she/her): and like I mean, she's like 2 weeks old, like I haven't even had a chance to be an awful mother, you know, if I was gonna be one, I was just doing my best. But I knew logically.

Allison Puryear (she/her): because of my training as a therapist like. Okay, this is probably PPD, but I didn't have any clue what to do with that.

Allison Puryear (she/her): And still wouldn't. If somebody came into my office with PPD. I'd be referring them right out because it's still it sinks into my heart a little too much. It's still too close.

Alexa Bonacquisti: Yes, yes, and it's really scary and overwhelming. And those thoughts are very common. This thought, not a good mom, I have. Yeah, the baby be better off without me? And even if that doesn't move into active suicide ideation, you know what that kind of thought do in terms of your behavior, and you're bonding with the baby, and just your quality of life and your functioning.

Alexa Bonacquisti: And it is really scary and overwhelming. And it does kind of happen for a lot of people like very quickly with your experience.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Yeah, and that kind of gets into like the psychological pieces. So we talked about the biology.

Alexa Bonacquisti: the psychological aspect, the thoughts, the emotions, the attributions that you make and the interpretations you know that you make that can certainly contribute to increased distress.

Alexa Bonacquisti: This feeling of like this is supposed to be the most joyful time in my life, you know, like you were saying, we're set up. We wanted this baby. We're we planned for this.

Alexa Bonacquisti: and then, when it doesn't feel the way you imagined.

Alexa Bonacquisti: People are just like, that's so. Such a shift in expectations and perspectives that that can feel really really, challenging and really upsetting.

Allison Puryear (she/her): Yeah, absolutely. And and shameful like, it goes back to that shame piece and not talking about it because everybody that's visiting you is like, Oh, are you so happy? And you just say yes, because, like

Allison Puryear (she/her): you don't want to be like no, it's the worst I've felt in my life because it's not what's expected. And then what are those people gonna do about it? You know.

Alexa Bonacquisti: Right exactly, and you feel really alone and really isolated.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: And start to feel like there's something wrong with you. You made a mistake. You shouldn't be a mother, or you know, and that that does also really then it becomes very cyclical in terms of how it continues to

Alexa Bonacquisti: to manifest.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Mmhm.

Allison Puryear (she/her): And I I think it's really important for providers to know that

Allison Puryear (she/her): there, there is data that shows that certain people are gonna be more

Allison Puryear (she/her): kind of set up for postpartum depression. It doesn't mean they're gonna get it necessarily. But if you've got a client who has struggled with an eating disorder in the past, or is currently struggling with an eating disorder or like major depressive

Allison Puryear (she/her): disorder? Are there other kinds of disorders or diagnoses, or experiences that can really

Allison Puryear (she/her): lay a groundwork or or make somebody predisposed to a perinatal mental health condition.

Alexa Bonacquisti: Yes, yeah, I think it's really important to look at somebody's psychological history

Alexa Bonacquisti: and also their prior experiences, their learning history, right? Just their the context of their life. Because there are certainly you know, we have evidence to suggest that

there are certainly experiences and diagnoses and symptoms that might predispose someone to having challenges during the the postpartum period.

Alexa Bonacquisti: So certainly a history of depression and anxiety, or OC. Or eating disorder. So any kind of psychiatric history. Might

Alexa Bonacquisti: the reproductive kind of trigger might exacerbate or lead to like a new episode of those ex. You know, those symptoms so doesn't happen for everybody, you know. It's nothing to guarantee, but it's kind of something that you might want to think about and maybe be prepared for. I always encourage. For you know, pregnant people to get into therapy during the pregnancy, because then you can

Alexa Bonacquisti: build up that support and start plan and and have that support established before you know you deliver.

Alexa Bonacquisti: So that's sometimes can kind of help help with that process. And then I also think about individuals who have had reproductive. You know, stressors. So people who've experienced infertility or pregnancy loss people who have had you know, any kind of traumatic history also might be predisposed to having some different challenges during the postpartum period.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: So kind of thinking about what? That, what that looks like? People who've experienced a traumatic birth. And now

Alexa Bonacquisti: the implications of that.

Alexa Bonacquisti: Yeah, I think there's a lot. Then, yeah, can kind of contribute to just that feeling of I. This is not looking like how I imagined, like I should be happy, I should be feeling differently. And then that shame and guilt, you know, that comes from that.

Allison Puryear (she/her): Are breast feeding issues, also correlated.

Alexa Bonacquisti: Yeah, so it's very interesting. The literature on breastfeeding, and how the like. What that looks like in terms of mental health outcomes. I mean, I have noticed just in my clinical practice that

Alexa Bonacquisti: there's a lot of. And this also kind of gets to that social part of like the the expectations and the messages that people receive about the way they should be feeding their baby, and like what's best way to do it, and

Alexa Bonacquisti: and that can cause a lot of anxiety and a lot of obsessional kinds of thoughts and behaviors. So sometimes those messages, yeah, I think, can create a lot of stress, and also

put a lot of pressure on on, you know, new mothers who are maybe wanting to breastfeed, but finding it really challenging and having a lot of anxiety and distress around that.

Allison Puryear (she/her): Yeah, yeah.

Alexa Bonacquisti: Yep.

Allison Puryear (she/her): So if it just really feels like there's just this gauntlet that

Allison Puryear (she/her): mothers have to run through in a very particular way throughout their life, pregnancy, and postpartum in order to avoid a perinatal mood disorder. I mean, it's not the majority of women who experience a perinatal mood disorder, but it's still like it feels like a lot of things have to fall into place.

Allison Puryear (she/her): And yeah, at a very messy time in life.

Alexa Bonacquisti: It is right. It's a huge identity shift. It's a huge life shift. It's just a change in perspective. There's more expectations, more demands, you know. So there's a lot

Alexa Bonacquisti: that I think everybody feels that to some degree. And then for some people it is more severe and more significant, which would, you know, warrant the more of the kind of diagnosis of a perinatal mood or anxiety, disorder.

Allison Puryear (she/her): Yeah. So I'm thinking about like different modalities. And I know you're an ACT therapist,

an Acceptance and Commitment Therapist. Can we talk about how the ACT perspective

Allison Puryear (she/her): differs from some other approaches.

Allison Puryear (she/her): and maybe if there's anything that works in conjunction like psycho pharmacology, or something like that.

Alexa Bonacquisti: Yeah, sure. Yeah. So ACT. I think so ACT as the third wave behavioral therapy and

Alexa Bonacquisti: ACT really emphasizes psychological flexibility

Alexa Bonacquisti: and acceptance of both internal and also external experiences.

Alexa Bonacquisti: While really emphasizing the use of goals and values to guide behavior, change.

Alexa Bonacquisti: So I think there's a number of different ways that ACT it may be uniquely like, well suited to treating postpartum distress. You know we see that it? There's a lot of similarities in terms of ACT and other kinds of modalities. But then some unique aspects. Where, you know, it looks a little bit of a departure from from other types of treatments.

Alexa Bonacquisti: And so we have really good evidence to to suggest. There are a number of types of you know, therapies and interventions that are effective.

Alexa Bonacquisti: and ACT, I think, in, you know, at least in my experience and the research I've done. My my own practice is that it offers like a unique perspective or a different way of of looking at some of these problems and

Alexa Bonacquisti: thinking about it from that new perspective can be really helpful. During this period of transition and upheaval for so many individuals.

Alexa Bonacquisti: So I think a couple of ways that it really differs. One, you know, thinking about that idea of the shame and guilt and the stigma.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: And some of the, you know ACT talks about this difference between like primary emotion, so like the the response that you have, and then, like the judgment that you have about your own response or your own thoughts, your own emotions? And that that's really what is unworkable. So it's not like the initial emotion that you have, but it's the judgment that you make of it. Where you start to say, Oh, I I'm not enjoying this. I'm not happy. I'm a bad mom, and this.

Allison Puryear (she/her): Me!

Alexa Bonacquisti: And that, you know. And then that is kind of problematic. You know, ACT also really emphasizes

Alexa Bonacquisti: noticing and becoming aware of our thoughts without making attempts to change them, or to eliminate or suppress or avoid them.

Alexa Bonacquisti: so that might look different from some other types of therapies that are are focused on like looking at evidence and trying to change thoughts, whereas ACT is more about. You know the thought is what it is, and we can let it be there, and we don't have to engage with it. What we want to do is notice it and acknowledge it, and then

Alexa Bonacquisti: turn towards our values, and what is most important to us.

Alexa Bonacquisti: rather than getting really caught up in in that thought, and and how we want to change it, you know. So I think that can be really helpful for for postpartum moms.

Allison Puryear (she/her): Yeah, absolutely.

Allison Puryear (she/her): And

Allison Puryear (she/her): isn't something that they can kind of just start doing on their own in most cases, like, I'm assuming that, like

Allison Puryear (she/her): therapy, or or a friend who just is psychologically minded in this way can

Allison Puryear (she/her): can be really instrumental in helping them grasp that

Allison Puryear (she/her): instead of just their brain feels like a scrambled egg, anyway, and trying to like sort this out on their own.

Alexa Bonacquisti: Yes, definitely. Yeah, I think it is really approachable. Like.

Allison Puryear (she/her): Anything.

Alexa Bonacquisti: Does make a lot of sense on the surface for for people. When I explain this to them, this idea that we can have this thought, I'm a bad mom.

Alexa Bonacquisti: and what does that thought make us want to do? It makes us want to maybe withdraw from the baby or have somebody else take care of the baby. Well, we can have that thought, and we can still go and hold the baby and rock the baby. And that thought doesn't have to be related to our behaviors. That concept is really helpful, for for so many people.

Allison Puryear (she/her): Absolutely.

Alexa Bonacquisti: Yup, yeah.

Allison Puryear (she/her): Yeah. And I think I mean, I

Allison Puryear (she/her): in ACT with non-perinatal people.

Allison Puryear (she/her): I think about how it's also equally effective.

Allison Puryear (she/her): I think, because somebody's perinatal. We also know their hormones are all over the place, and that can be another kind of like explain explanation, for

Allison Puryear (she/her): why that thought is not actually them like they are. Not that thought. It's like

Allison Puryear (she/her): we can further distance it by being like right now. Your hormones are Wackadoo and

Allison Puryear (she/her): it's it's really having you invest in these these thoughts that are just thoughts, they're not you.

Allison Puryear (she/her): So

Allison Puryear (she/her): this is, I guess, one good thing about hormones being wild.

Alexa Bonacquisti: Exactly. Yeah. I always say, like, this is a story that your mind is telling you.

Allison Puryear (she/her): -

Alexa Bonacquisti: And

Alexa Bonacquisti: yeah, I mean, I love that of like, Yeah, your hormones, your. There's. There's a lot of reasons why your mind is creating that thought.

Alexa Bonacquisti: But just because you think, if you think something doesn't mean it's true, it doesn't mean that it reflects anything about reality like we can have many, many thoughts, and that's just what our mind does. It creates thoughts, and it doesn't mean that we have to do anything with it, or doesn't mean that we have to buy into it or believe it. And just noticing the flow, and that conscious awareness of the thoughts popping into our mind and

Alexa Bonacquisti: and like, that's just, you know, there's that thought and and ACT we call them like sticky thoughts.

Alexa Bonacquisti: So everybody, you know everybody has these thoughts that for them are just particularly sticky meaning. They pop up frequently, or you know, and just noticing like, yeah, that's that thing that my mind does. And

Alexa Bonacquisti: that's okay. Like, I don't have to do anything with that.

Allison Puryear (she/her): Yeah. And I'm thinking about how like they can probably identify sticky thoughts from before this.

Allison Puryear (she/her): phase of their life right? But if this is their first time. Being a parent, this this is a brand new sticky thought, and it is like glue. It's it's not a post, it's sticky. It's like glue sticky, and how

Allison Puryear (she/her): Probably relating it back to other sticky thoughts that they've had throughout their life as like this is similar to.

Allison Puryear (she/her): I'm not smart enough, or you know that kind of thing. This is just the perinatal version.

Alexa Bonacquisti: Exactly. Yes, I think that's a really good way of describing. It is absolutely like you've had these experiences before. And what's happening now is, you're you're in a totally new role and a new situation, and you've never done this before. And even if you've had another baby, even if this is like your second kid. You still have never parented this baby and this experience in this life and this time. And so everything is new.

Alexa Bonacquisti: and it makes sense that

Alexa Bonacquisti: you're feeling the way that you're feeling and having the thoughts that you're feeling, you know, having the thoughts that you're having and and kind of. We can connect that to feelings and thoughts that you've had before, and.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: You know, and I think that

can be really illuminating for people to to see that pattern.

Allison Puryear (she/her): Absolutely. Yeah.

Alexa Bonacquisti:

Allison Puryear (she/her): Yeah, what kinds of resistance do you see? That's maybe different for a perinatal population with.

Alexa Bonacquisti:

Allison Puryear (she/her): With some of these techniques that you don't see as often in a non perinatal population.

Alexa Bonacquisti: yeah, I think some of the challenges or areas of resistance might kind of come around just like increased demands, lack of time

Alexa Bonacquisti: the shift in identity and roles that happen. So a lot of the coping skills or the resources that people may have had previously. Now, all of a sudden the context has changed, and so they're not able to engage in the same way that they were before, or perform the same kinds of tasks. So

Alexa Bonacquisti: I think that can be a challenging area. And you know, with like one of the ACT concepts is present moment awareness and mindfulness which is used in a lot of different kinds of therapies. And I think patients will be like, well, I don't have time to like

meditate for 20 min, or, you know, like I have a new baby, I can't and so we talk about well, how? How can you incorporate this mindfulness into activities that you're already doing.

Alexa Bonacquisti: So like when you're holding the baby, or you know it's 3 am. And you're feeding the baby instead of sitting there and like scrolling on your phone and like googling things. And, like, you know, looking on social media and getting and comparing yourself to others.

Alexa Bonacquisti: Is there a way that we can tap into that present moment awareness. And I wonder if we could be curious about what that would feel like and how it might feel different. So can look at the baby. Can you notice, you know, what does the baby look like? What do they smell like? What's happening around you in this room.

Alexa Bonacquisti: And so it's an activity that, like you're already doing, you're already up at 3 am feeding the baby.

Alexa Bonacquisti: We do that in a mindful way. So like, that's an example of sort of how we might work around some of the challenges or the resistance, you know, that could come up.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: Yeah.

Allison Puryear (she/her): It's interesting. This is kind of an aside, but I'm realizing, like every conversation I end up having with clients around mindfulness. That's not like meditation conversation, but exactly what you're talking about of, like just being aware of what you're doing when you're doing it.

Allison Puryear (she/her): Every conversation I have around that involves us putting down our phones.

Allison Puryear (she/her): And I'm trying to remember before phones what we were doing that made us less mindful, because I know we weren't all walking around mindful in the 90s, you know. But just like what what we were using to distract ourselves. Maybe a discman.

Allison Puryear (she/her): but it's I'm I'm

Allison Puryear (she/her): curious.

Allison Puryear (she/her): outside of this conversation, just like the impact of that

Allison Puryear (she/her): of of such easy, accessible distraction and such engaging distraction. How that has changed over the years and in our like. If we were to measure mindful moments throughout a day, if it's significantly less, or if it's just different.

Alexa Bonacquisti: Do not.

Allison Puryear (she/her): I don't know.

Alexa Bonacquisti: It's a really good question, and I think that is something I mean. I I don't know that I have a good answer to it. But it's something I've also thought about like, how has that changed the experience for people? And you know they might. And then, that, you know, is really relevant to this. The ACT concepts, too, of like you, might have an uncomfortable emotion or thought.

Alexa Bonacquisti: and that might cue you to go to your phone and start like trying to deflect yourself to avoid that thought.

Alexa Bonacquisti: Content on the phone could also be distressing, or bring up other negative feelings or emotions.

Alexa Bonacquisti: Or like. An hour goes by. And you're like, Oh, I just was on my phone for an hour like now, I don't feel that wasn't consistent with my values that was not fulfilling or meaningful, and then starting to feel worse about yourself and and your behaviors.

Alexa Bonacquisti: So it does seem. Yeah, it's it is.

Alexa Bonacquisti: It's an interesting kind of paradigm shift when we think about what that means for psychological wellbeing and functioning. And

Alexa Bonacquisti: yeah, a lot of research happening, I think in that area now.

Allison Puryear (she/her): Absolutely.

Allison Puryear (she/her): Yeah, so let's can we talk some of the core components, we've we've touched on some of them, but the core components of ACT and

Allison Puryear (she/her): Why, those are really really helpful for people going through perinatal mood disorders.

Alexa Bonacquisti: Mhmm.

Alexa Bonacquisti: Yeah, so there are 6 core components of ACT. And all of these 6 components support the this idea of psychological flexibility.

Alexa Bonacquisti: So we have mentioned some of them. So one of these components is, is acceptance.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: And so psychological acceptance refers to this idea that we can embrace and be open to both our internal and external experiences without making attempts to change or avoid or suppress.

Alexa Bonacquisti: And so this, yeah, this can be really difficult. And it's a practice. It's not like, it's something that you do one time. And you're like, Okay, I engaged in acceptance like.

Alexa Bonacquisti: So it's kind of like a life philosophy and a life stance like, I'm going to be open to

Alexa Bonacquisti: all of the experiences that are happening

Alexa Bonacquisti: and everything that I'm feeling, and that I'm thinking and approach that with curiosity and really, truly embracing it without trying to to change it.

Alexa Bonacquisti: So that's one of the components that you know, that is used in ACT another one is this idea of cognitive diffusion. And so with cognitive diffusion. This is changing our relationship to our thoughts.

Alexa Bonacquisti: So we may notice that we have a thought.

Alexa Bonacquisti: and similarly to acceptance, instead of trying to modify it or change it or get rid of it.

Alexa Bonacquisti: we allow it to be there.

Alexa Bonacquisti: So we notice that

Alexa Bonacquisti: we experience it. But we create space in between ourselves and our thought.

Alexa Bonacquisti: So another one is this idea of selfish context.

Alexa Bonacquisti: And this is a really abstract concept. But the general idea of it is, is wanting to convey this point, that you are not your thoughts and your emotions.

Alexa Bonacquisti: Is this observing self? You know this self that exists as the context for the thoughts that you have and the emotions that you feel.

Alexa Bonacquisti: so that you know sometimes people feel really overwhelmed by the thoughts and the emotions.

Allison Puryear (she/her): But.

Alexa Bonacquisti: I think that, like there is a you inside that's experiencing those, and that they're separate, like from who you are as a person.

Alexa Bonacquisti: So that can be really powerful. One of the metaphors that I love about this to convey. This is this idea of the sky and the weather.

Alexa Bonacquisti: So like.

Alexa Bonacquisti: you know, if you imagine that. Your different emotions and thoughts are like weather patterns in the sky. So it's like a thunderstorm over here and like over here. It's sunny, and there's like a hurricane happening here, and you kind of get patience to talk about what what those storms, or those you know, weather events feel like.

Alexa Bonacquisti: and then you arrive at this idea that they are actually the sky, and they are the context in which, like all of this, is happening, and the weather can't hurt. The sky like the weather is is happening, but it's not the sky, and the sky is big enough to contain it all, and to hold it all.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: And that, I think, is just like a really beautiful way of of describing that

Alexa Bonacquisti: and can help people to feel like, yeah, I might be having these really distressing or uncomfortable thoughts.

Alexa Bonacquisti: But like I'm the sky, you know, it's it can't hurt me. I'm separate from that. I'm bigger than that.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: You know. So that's a a nice process, I think when yeah, we're talking help postpartum individuals who are

Alexa Bonacquisti: feeling like they're losing that sense of themselves in parenthood. You know that that can really help to to kind of bring that into focus.

Alexa Bonacquisti: and then there's 3 others. So we talked about present moment awareness a little bit.

Alexa Bonacquisti: So this connection to the here and now

Alexa Bonacquisti: might look a little different from other applications of mindfulness. So with ACT. It's not intended to be a distraction. It's not intended to be relaxing, although sometimes

that that does happen like that's a byproduct of it. But the goal is really to just be aware of what is happening in the present moment.

Alexa Bonacquisti: and to notice and nonjudgmentally experience whatever is going on.

Alexa Bonacquisti: So this I found to be really beneficial during the postpartum period. Because oftentimes you're stressed. You're going through your day. You're taking care of all these tasks. You're like thinking and planning, and you know, and sometimes then you realize, like, Wow, I just

Alexa Bonacquisti: spent all this time with my baby. But I didn't actually even notice it, or I wasn't aware of it.

Alexa Bonacquisti: And so this connection to present moment awareness can help people to feel more fulfilled in what they're doing. They can get some more pleasure out of activities. I've talked to so many moms who are like, yeah, I like was like eating lunch so fast like I didn't even taste it like.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: Opportunity for self care and like enjoyment of something aware of it. They weren't there. The mindfulness aspect wasn't, wasn't part of it, and they totally missed it, you know.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: So I think that's really good. And the other way that mindfulness is helpful with respect to ACT is also just.

Alexa Bonacquisti: helps to create the space between your

Alexa Bonacquisti: your reaction and your response.

Alexa Bonacquisti: So allows you to slow things down so that you can notice. Like, I'm thinking this, I'm feeling this, and I can make a choice about how I wanna behave. So don't have to feel like you're just like moving through the world, kind of reacting to things.

Alexa Bonacquisti: But I can really notice.

Alexa Bonacquisti: tap into my values, tap into how I want to be showing up in this moment

Alexa Bonacquisti: and

Alexa Bonacquisti: and be able to make that kind of

Alexa Bonacquisti: that kind of choice that's in service of those values. Which can help, you know, to to move you closer to that rich and meaningful life that you want. And so yeah, values is the the fifth one which is identifying like

Alexa Bonacquisti: what is the most important, most meaningful. You know what what is kind of like the life that you want to be living. And what brings purpose and fulfillment? You know to your life? What are these things that are so deeply important to you.

Alexa Bonacquisti: And how do we bring our behaviors more in line with those values.

Alexa Bonacquisti: So that the things that we do and how we spend our time really support that.

Alexa Bonacquisti: I think this also really connects to what we were talking about. In terms of this, like cell phones and social media.

Alexa Bonacquisti: You know, we will ask people when we're trying to identify and clarify values like when your when your kids look back on their childhood like.

Alexa Bonacquisti: what do you want them to say about it?

Alexa Bonacquisti: Them to say about you, and how how it was, and you don't say this in like a punitive way. Like to show them like, Oh, look! You're not. You're not doing the right thing, but it's more like you're wondering, like it's you're curious about what what is happening in my day to day life? And does it really reflect the things that are most important to me?

Alexa Bonacquisti: So maybe, like you're spending all your day like cleaning your house

Alexa Bonacquisti: like at the moment that might feel really important. But like, do you want your kid to be like, you know. Oh, my house is always really clean as a child. But you know, or do you want them to see, like my mom like played with me. And you know, we had these moments together. And you know, and that kind of connects to the phone use, too, like.

Alexa Bonacquisti: how many, how much time did you spend on your phone? And and is that really consistent with your value? So just a couple of examples, but I think that can be important. And then the final one is this idea of committed action.

Allison Puryear (she/her): Okay, s-.

Alexa Bonacquisti: So that's really putting it all into practice. It's like the behavior changes that reflect everything that we talked about.

Alexa Bonacquisti: So it's being able to really to be committed to the behavioral changes that are implied by all of these different processes, and remaining committed to that in terms of like

this ever expanding pattern of action, so not just doing it one time. But this is like a continual process.

Alexa Bonacquisti: So, yeah, so those are the the 6 core components and kind of how they relate to the perinatal experience.

Allison Puryear (she/her): Yeah, and I think about

Allison Puryear (she/her): it. It almost feels as you describe them. It almost feels like it was created for the perinatal population, you know, like it works with everyone. But it's it's interesting how well suited it is to people that are genuinely in this like temporary discomfort like this. Discomfort isn't gonna last forever, which makes it slightly easier to accept

Allison Puryear (she/her): and

Allison Puryear (she/her): because it's temporary, it also helps with the diffusion and with the self, you know, as contact. Like all these different pieces, it, it falls into place in a lovely way.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Absolutely. I know. I always like to say like it's, you know, it's temporary, which is both a beautiful thing, and it's also a really like sad thing, you know, when you think about this time period when you have a baby and or when your kids are young like it's it, you know, like, hold on, because it goes by fast.

Allison Puryear (she/her): Not.

Alexa Bonacquisti: Which is both

Alexa Bonacquisti: sad and also a relief, you know, and so.

Allison Puryear (she/her): Yeah, when you're in that misery? Absolutely. Yeah.

Alexa Bonacquisti: And being able to experience all of that and hold all of that like. It's okay to feel, you know, all of these different emotions around it.

Alexa Bonacquisti: And I think that's important to validate, you know, for people as well.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: Hmm, yeah.

Allison Puryear (she/her): Yeah. And and whenever anybody's suffering

Allison Puryear (she/her): it always feels like forever.

Allison Puryear (she/her): you know, even even if you know, this is like a temporary hormone glitch combined with all these life changes, and I'm getting support. I think anytime any of us get really

Allison Puryear (she/her): sunk into our suffering because I think we're probably all suffering at some level all the time, but when we're really sunk into a deeper suffering.

Allison Puryear (she/her): it's hard to.

Allison Puryear (she/her): There's the fear that it will always be like this, and then it's hard to pull ourselves out. Just then another thought, diffusion, situation of like, oh, that's a thought, you know, but.

Alexa Bonacquisti: Absolutely.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: I think it can start to feel really hopeless. It can start to feel really. Yeah, like I, things are never gonna be different. Things are never gonna change.

Alexa Bonacquisti: And those early days like, yeah, they are really dark. And babies, you know, newborns like they don't give you a lot of feedback about how you're doing like they cry, and you feed them. And then, you know. So I think that is hard for a lot of people who are used to operating in a world where they get feedback, or they like accomplish tasks.

Alexa Bonacquisti: Having a newborn. You're you're like, you change the diaper, and then you change the diaper again, and then you change the diaper again like that.

Allison Puryear (she/her): Here's noon.

Alexa Bonacquisti: Kind of like accomplish. I mean, there's accomplishment. But it's it's so different what people are used to. And I think that's another way. You know you can help them practice that acceptance and that diffusion around those expectations and.

Alexa Bonacquisti: And

Alexa Bonacquisti: because, yeah, it's a, it's difficult.

Allison Puryear (she/her): Yeah. And I think about especially people who have like colicky babies, or are really really wanting to breastfeed. And it's not going well, you if you feel like your only job is to get them to stop crying by giving them what's what they need, and you can't do that because they're colicky, and all you can do is walk around in a circle with them and hope it

helps, or you're trying to breastfeed. But the latch is off, or whatever like it can feel like failure at a thing that like.

Allison Puryear (she/her): I don't know why any of us thought that should have come

Allison Puryear (she/her): naturally like it. It's just. It's both learned, and it's luck. And sometimes you're not going to get one of those. Sometimes you're not going to get the education, and sometimes you're not going to get the luck and people around. You may be getting both, and that can be really hard.

Alexa Bonacquisti: Yes, right? And that's that. The social comparison.

Alexa Bonacquisti: Which can you know I always. I'm like you. You never know what other people are dealing with, and sometimes you feel like it. You know you're really alone and isolated, and you're the only one having this experience. And so that must mean that there's something wrong with you as a parent or but yeah, there's so much luck

Alexa Bonacquisti: that goes into it. And it really, you could be doing everything absolutely that you can do. And babies might still cry, because that's what babies do. They just cry, and we might not like. There's not a deficiency or something that that is wrong. What you're doing. And

Alexa Bonacquisti: and so that I think helps also, when you think about that from an ACT perspective like

Alexa Bonacquisti: we can experience this and not interpret it or not even try to to find the truth in it, because

Alexa Bonacquisti: with ACT, we're not trying to determine if this is accurate, or if it's true, or if there's a more adaptive way to think about it, what's helpful and effective.

Alexa Bonacquisti: and and that really what becomes important, what's helpful, what's effective? What is values consistent?

Alexa Bonacquisti: Because some of these questions we don't have answers to we won't be able to know. And we also like.

Alexa Bonacquisti: yeah, it just in some ways like, it doesn't really matter

Alexa Bonacquisti: whether

Alexa Bonacquisti: we can, you know, determine evidence for again, something. It's more just like, yeah, what's what's helpful and effective in this moment, and with the kind of parent that I want to be the kind of person I want to be. And how can I show up like that because it's in service of my values.

Allison Puryear (she/her): Yeah. Yeah. And that's

Allison Puryear (she/her): that also takes a lot of being able to access your mind, which can be very hard when you're under slept, and you've got a baby crying in your ear, and it feels like the weight of the world is on you.

Allison Puryear (she/her): It's so.

Allison Puryear (she/her): It really does, in my opinion, require help.

Allison Puryear (she/her): Like. It requires a therapist who knows what they're doing, and or partners and friends and parents, and whomever is in your support system to be able to help get you through.

Alexa Bonacquisti: But.

Allison Puryear (she/her): Requires a vulnerability of being honest about what you're going through.

Allison Puryear (she/her): Just hard. Yeah.

Alexa Bonacquisti: Yes, it's very hard. And I agree, yeah, it does.

Alexa Bonacquisti: you know, having somebody being able to to provide that structure and that context and and teach you those skills.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: I think in ACT I mean, I don't tend to use the word skills a lot, because I don't like to think about it like, here's a fix, or here's something that like a tool that you're gonna use. Cause it's kind of the ACT perspective is a little bit different. But

Alexa Bonacquisti: I I think it can be helpful

Alexa Bonacquisti: to to have somebody who can provide that perspective.

Alexa Bonacquisti: Really engage experientially with you in in the the therapy space, and then help you to see like how you can apply that in in, you know, different experiences that you have. So

Alexa Bonacquisti: yeah. And I think also, like you were saying, bolstering social support is really important.

Alexa Bonacquisti: Helping individuals to feel that you know their emotions and their experiences are acceptable. And

Alexa Bonacquisti: it's okay to feel vulnerable. And it's okay to ask for help, and

Alexa Bonacquisti: that's often something that people are really hesitant to do because of the stigma and the shame. It becomes incredibly important

Alexa Bonacquisti: to get to get that on board.

Allison Puryear (she/her): Absolutely. And I think about programs out there that help bolster that social support along the way like our birth center had like

Allison Puryear (she/her): group appointments, basically where they, instead of saying the same exact thing 30 times in a day. They had, like a group of people who were giving birth in the same month.

Allison Puryear (she/her): Or whose due dates were in the same month, and we became a crew. You know, we really like

Allison Puryear (she/her): we're especially around the time everybody was starting to give birth. It was just so exciting. And so we had this this group of people before we even gave birth, or I gave birth. That was me before I gave birth that

Allison Puryear (she/her): Some of them had given birth, and they were talking about something like recovery. I learned about recovery right before I gave birth, and was like, Oh, shit but

Allison Puryear (she/her): to be able to talk through some of those things with people going through at the same time I was the only one who had PPD. But I was supported.

Allison Puryear (she/her): And then there was another group. I joined. Shout out to Seattle peeps, which is like a group of same kind of thing, is

Allison Puryear (she/her): women in a Zip code who are giving birth in the same month.

Allison Puryear (she/her): and we got together 6 weeks after birth, basically, or 6 weeks after that month started. And so

Allison Puryear (she/her): we were meeting while we were in the fuzz of like, I don't know what I'm doing. Do you know what you're doing? And then there was like an elder mother who was probably 40 or something, but there was like an elder there to help us. And we also became a crew, and I was also the only one struggling with PPD. There. But it was a safe place to talk about it. And

Allison Puryear (she/her): both the places where I talked about it. There were supports in place.

Allison Puryear (she/her): In either the the companies essentially to get help for you if you needed it.

Allison Puryear (she/her): So.

Alexa Bonacquisti: Valuable.

Allison Puryear (she/her): Yeah.

Alexa Bonacquisti: That's great to be able to just feel like you have people who understand and who are going through the same thing, and.

Allison Puryear (she/her): Move.

Alexa Bonacquisti: And really,

Alexa Bonacquisti: yeah, I think that that's a it can help in terms of easing the transition.

Allison Puryear (she/her): Mmhmm.

Alexa Bonacquisti: Role and the new identity. And just that shift and feeling like.

Alexa Bonacquisti: you know, there are are people who get it and who can support and like celebrate those little, those little wins, you know.

Alexa Bonacquisti: I remember the first time my best friend, and she didn't have a baby at this time, but she was like, we're going out. We're going to Target. And like

Alexa Bonacquisti: she helped me like get the stroller set like like figure out how to fold the stroller up and and like I, I remember, like that was life changing for me, just having that support from somebody to be like, yeah, we're just gonna leave the house today with the baby. And I was like, you know, what's going on.

Allison Puryear (she/her): Huh!

Alexa Bonacquisti: That was a big deal. But, like, you know, for everybody else, it's like, Okay, you you left the house, but it's I think you have to have people around who get that. And who can

Alexa Bonacquisti: kind of yeah, just just help you and move closer to that right? And that's that's way that the value sort of kick in it's easier to stay home. It's easier not to to text that group of friends. It's easier not to, you know, be vulnerable. But like, is that really the life you want to be living.

Allison Puryear (she/her): Right. And and it's it's easier, partly because of all the things going on. But also the learning curve is just so steep for freaking everything in a way that I I can't remember having a learning curve that steep and that fast

Allison Puryear (she/her): and to to have to not be surrounded by other people who have been through it or going through. It is hard.

Alexa Bonacquisti: Yeah.

Allison Puryear (she/her): yeah. And I think about.

Allison Puryear (she/her): you know, tailoring care to kind of individual personal characteristics like those moms who really want to get it right? Or

Allison Puryear (she/her): different reproductive histories. I think about

Allison Puryear (she/her): honestly, most of my friends who've had some

Allison Puryear (she/her): some help medically to be able to either get pregnant or maintain pregnancies. And there's just

Allison Puryear (she/her): there's more fear on their end. I know there was a lot more fear of miscarriage for me with my second, because I'd had multiple miscarriages in between my kids, and how I was afraid that was setting me up for postpartum anxiety. And just

Allison Puryear (she/her): how can you tailor care based on those specific clients needs within the structure of ACT.

Alexa Bonacquisti: Yes, yeah, I think ACT is really flexible

Alexa Bonacquisti: and very experiential.

Alexa Bonacquisti: And I think in those ways that does really help to be able to tailor the care, and to really meet people where they are.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: The 6 processes that I described. You know there's no like order that you have to move through them or no place you have to start, and as you learn more about them, you see, like how interconnected they are, which I think that really helps you to be able to to kind of tailor things. There's there's no particular yeah, like way that it has to flow.

Allison Puryear (she/her): Hmm.

Alexa Bonacquisti: So I found that to be really helpful. And I think, yeah, certainly, being able to talk about values and talk about the kind of life that you, you know, most deeply want to create and live.

Alexa Bonacquisti: That really helps you to design and develop. You know, a a treatment approach or interventions that are gonna reflect what people need in that moment.

Alexa Bonacquisti: And that emphasis on values, and just that, always holding the value as like the guide post

Alexa Bonacquisti: And it's not, you know, my value as the therapist, or you know, society's value. But it's like, Yeah, what is really deeply, you know, most meaningful and important for you. And what would a fulfilling life look like for you and then helping people to create that, you know, is really rewarding. I think your point about yeah. People have had different reproductive challenges or experiences, and how that might contribute to anxiety. For example.

Alexa Bonacquisti: and being able to help them notice how those prior experiences are affecting them.

Alexa Bonacquisti: That what that looks like behaviorally, and

Alexa Bonacquisti: is that something that again is keeping them from moving closer to their values?

Alexa Bonacquisti: So I'm thinking of. Yeah, you had mentioned, like, some people maybe want to do it right or do it perfectly.

Alexa Bonacquisti: People who feel like I've had a lot of losses. And so this is like, maybe my one chance. And I I wanna make the most of it, or I want to have it feel a certain way or look a certain way

Alexa Bonacquisti: and helping people to see like, okay, this is what is happening in my mind, you know. And what is that costing me. And is that actually moving me closer, farther away from my values? I had somebody that you know, I people that I have worked with, who? Yeah, we're kind of really anxious about

Alexa Bonacquisti: different experiences, and used that to dictate like places. They would go or things they would do because

Alexa Bonacquisti: they had in their mind that they had to do it a certain way, and if they couldn't do it that way, then it was like not worth doing, and being able to really like, examine that, and and

Alexa Bonacquisti: and talk about

Alexa Bonacquisti: the unique histories and the reasons why they're having those thoughts, but noticing that again, the thoughts don't have to dictate our behavior, and they don't have to reflect. You know what it is that we choose to do.

Alexa Bonacquisti: And I think that has been really helpful for a number of people too.

Allison Puryear (she/her): Absolutely.

Allison Puryear (she/her): Yeah, and I think about just like value space living in general and how

Allison Puryear (she/her): sometimes it's hard for us to pin down our values. And if this is somebody's first time

Allison Puryear (she/her): trying to do that when they're maybe not

Allison Puryear (she/her): as well slept. They're having a hard time thinking there's brain fog, all those kinds of things. How do you help them think through identifying their values?

Allison Puryear (she/her): What are some ways that you make that more accessible to them?

Alexa Bonacquisti: Yeah, so it can be difficult to to be specific about values. Or to really think about what's important

Alexa Bonacquisti: especially people who maybe have, because in in the way that they're trying to manage like depression and anxiety, they they're so focused on. I want to feel better. I want to get rid of the anxiety. I want to get rid of the depression that then they lose touch with what really is important to them, and can kind of cloud, their ability to to see clearly, you know, and and think clearly about what it is that they want.

Alexa Bonacquisti: So I do a lot of psycho education around what values are. The difference between values and goals so describe it like, you know, goals are like

Alexa Bonacquisti: things that you can check off. It's something that you can have or or not.

Alexa Bonacquisti: but a value. It's like a direction. So it's like you're moving east.

Alexa Bonacquisti: You can always keep moving East like you're never going to get there. You. It's it's just the direction that you're moving in. And then those that are the goals become like little, you know, check marks along the way that support

Alexa Bonacquisti: that overall, you know, value. So I think, framing it like that, you know, talking to people about like, if a value of yours might be education and learning. Maybe getting a

college degree is a goal that supports that value. But you can always be learning, and you can always be, you know, educating yourself and having new experiences.

Alexa Bonacquisti: So I give a lot of like practical examples like that.

Alexa Bonacquisti: There's also different kinds of exercises. There's a values card sort where there's a number of different values that you present and then people can sort them in different ways and and prioritize them. values. Compass is another kind of useful like way to think about values where there's a list of different life domains. And then using this compass like framework, how do we? How do we?

Alexa Bonacquisti: Which, yeah, I guess, like, identify which which values are more prominent for us, and which are some areas that we might be not as aware of. And how do we see our behavior spinning into that?

Alexa Bonacquisti: And I also do just kind of a lot of like, had said before. When you're when your when your child looks back on their life, or when you look back on your life like, what do you want it to have stood for like? What do you want to be able to say about it? And sometimes that can bring some things into focus as well for people which is really helpful.

Allison Puryear (she/her): Absolutely I think about

Allison Puryear (she/her): for. And I think just for anybody listening.

Allison Puryear (she/her): just taking a moment to think through that, like

Allison Puryear (she/her): I know for me. I spend more time on my phone than I want to. Like that is outside my values in a way that I don't want my kids to

Allison Puryear (she/her): their vision of me in their head. I don't want it to be like the top of my head as I'm looking down at my phone. You know I want it to be of me, smiling at them. I want it to be of us like playing or engaging in some way that has them feeling loved.

Allison Puryear (she/her): And

Allison Puryear (she/her): that's often the driving force, if I'm like, Oh, I'm on my phone. I need to put it away, or I need to use my app that blocks my social media access, or whatever.

Allison Puryear (she/her): that's usually my driving force is my my kids. I'm wanting them to

Allison Puryear (she/her): have memories of me not the top of my head.

Alexa Bonacquisti: Yes, yeah. And it's it's such a I mean the transition to parenthood. It's it's such a

Alexa Bonacquisti: unique time. And I think often a time where people start to take stock of their life. And

Alexa Bonacquisti: you know, like, it's because it's such a transformational shift.

Alexa Bonacquisti: I found that people are really almost like primed to connect with values.

Allison Puryear (she/her): Become.

Alexa Bonacquisti: And so it's like a great opportunity to really bring that into it. And they're sort of already like reconsidering their life. And you know it just often does kind of work perfectly to be like, okay, so yeah, let's let's really, you know, think about how you spend your time. And and I think, like I said before, you know, not in a punitive way or a way of like I'm judging you for being on your phone, or I'm judging you for doing this or that.

Alexa Bonacquisti: But yeah, I wonder you know what what might be different if we made that change. I wonder, you know. And and again curious and open rather than going through it from this posture the stance of like, oh, now I'm I'm the worst mom. Look! I'm on my phone all day like this is terrible.

Alexa Bonacquisti: you know, taking away that judgment and just noticing and and yeah, trying to see how you can bring those behaviors more in line with the values.

Allison Puryear (she/her): Absolutely.

Allison Puryear (she/her): I feel like, we've gotten like, we've had such good rich

Allison Puryear (she/her): like conversation about both ACT and perinatal

Allison Puryear (she/her): disorders. And how they, the interplay of the 2. Is there anything you feel like? You really want to make sure therapists know.

Alexa Bonacquisti: -

Allison Puryear (she/her): Going forward.

Alexa Bonacquisti: yeah, I think there's it's important to.

Alexa Bonacquisti: you know, if you if you want to work in this space and you wanna work in this combination of ACT and and seeing perinatal patients. Yeah, I think it's important to kind of think about your own experiences. And you know as an ACT therapist.

Alexa Bonacquisti: you are as a human being.

Alexa Bonacquisti: subject to the same dilemmas of living, and the same pain and the same suffering and the same psychological inflexibility. Right? That our patients experience or our clients experience?

Alexa Bonacquisti: And so, yeah, I think that is an important

Alexa Bonacquisti: piece, too, is to think about how you show up in in the therapy room.

Alexa Bonacquisti: and the experiential nature of ACT, I think, really helps to cultivate this sense of like we're in this together, like.

Allison Puryear (she/her): M-hmm.

Alexa Bonacquisti: We're on the same level here. We all experience these things because we're humans. And life is hard. And being a human means that we're gonna have negative thoughts and negative emotions right? Like, there's something special about me because I happen to be sitting in the therapist chair and you're in the clients chair like, you know, we're all kind of in this together. And I, really, that that approach really resonates with me.

Alexa Bonacquisti: and I think it can be an important way of being able to provide that empathy and that non judgmental acceptance and that validation. And and just knowing.

Alexa Bonacquisti: yeah, that that life is really difficult, and what people are experiencing and is not aberrant, or abnormal or dysfunctional like, it's just it's just life.

Alexa Bonacquisti: And so yeah, kind of what I would say as a as a starting point, you know, for people wanting to

Alexa Bonacquisti: to to do this kind of work. It's very rewarding. It's very validating, and you have a lot of opportunity to have long lasting effects that really benefit not only your your client, but their children, their families, their communities. So yeah, difference.

Allison Puryear (she/her): Yeah. And it it's my bias somebody who's been a client for PPD, that's also a therapist that I feel like

Allison Puryear (she/her): therapists wanting to work with perinatal population need specific training in the perinatal population. Is that something you agree with.

Alexa Bonacquisti: I do. Yes, yeah, I do think. It is important to

Alexa Bonacquisti: have specific training in this area. And there's a lot of great organizations that have different certifications and that provide opportunities for increased training. But I do think it is such a vulnerable time. It's a unique like phase of life that it's important that you, you

know, do commit to that ongoing education and training. If if this is an area, you know that you wanna work in.

Allison Puryear (she/her): Yeah, amazing. Alexa, thank you so much. I really appreciate it.

Alexa Bonacquisti: Yeah, thank you so much for having me. It was a great conversation, and I really appreciate it.

Allison Puryear (she/her): Have a really great day.

Alexa Bonacquisti: Thank you.

I hope that broadened your clinical horizons! Head over to notboringces.com to get your CE credit. Wanna have a Not Boring conversation with me about your clinical area of expertise? You can apply there, too. If you like this conversation, leave us a five star review, tell a friend, and be sure to subscribe for future conversations.