

Please note: this document builds on important content discussed in chapter 10 of 2nd edition of ACT Made Simple.

Q: Can You Drop Anchor Lying In Bed?

Absolutely. And this is a great practice for those clients who complain they can't get out of bed in the morning; they lie there feeling depressed or anxious or hopeless, worrying or ruminating or beating themselves up for staying in bed. The therapist might explain it this way:

Therapist: So I'm wondering if you've be willing to tweak this exercise, so you can do it in bed on those mornings when you can't seem to get up?

Client: I'm not sure what you mean?

Therapist: Well, let's suppose you're lying in bed, and you're tired, anxious, depressed ... you're worrying, you're ruminating ... giving yourself a hard time

Client: That sounds like every morning

Therapist: So, can you practice dropping anchor as you lie there? Start by acknowledging the thoughts and feelings: "Tightness in my chest, knots in my stomach, worrying about work, judgments about being a loser, feeling hopeless". And then, come back into your body. Are you typically on your back, front or side?

Client: All of them. I keep tossing and turning.

Therapist: Okay, well let's say you're on your back. You can modify this for other positions. So you've acknowledged your thoughts and feelings; now you come back into your body. You push your head backwards into the pillow, straighten your spine, straighten your legs and dig your heels down into the mattress. And you straighten your arms and push them into your sides. So you're lying there stiff as a board, straight as an arrow. And you say to yourself, "Here's my body around my feelings". And then you unstiffen. You kick your legs, wiggle your toes, flap your arms, wiggle your fingers. And you remind yourself "I have control over my actions."

Client: Okay. I think I get where you're going with this.

Therapist: It's basically the same thing you've just been doing in that chair. And the third step is to engage with the world around you: look around your bedroom, notice 4 or 5 things you can see, 3 or 4 things you can hear, and so on.

Client: And if I'm still lying there after that?

Therapist: Rinse and repeat. You keep trying different things to come back into your body and regain control of your actions. Wriggle and stretch and move and kick; just keep moving. Put on some music and sing if you like. Try mixing it up: alternate between stiffening up like a board and flailing around or stretching out. Treat it like an experiment; play around and find what works for you; it's different for everyone.

Client: That's it?

Therapist: Well, the idea is to keep repeating the three steps as you do that: acknowledge your feelings, come back into your body, engage with the world around you.

Client: And how long do I do that for?

Therapist: As long as it takes to get you out of bed. What I suggest is, work your way over to the edge of the bed and hang out an arm and a leg over the side, until you're on the point of falling out. And stay like that for a while and notice how you're just on the cusp of staying in and getting out. And then ever so slowly, without doing something to injure yourself, go that next step and ease yourself out onto the floor.

Client: And do the same on the floor?

Therapist: If necessary, sure. But hopefully you'll be back into your body enough that you can get up and start your morning routine.

There are numerous variations on the suggestions above, of course. For example, the client could practice tensing and relaxing muscles, or altering her breathing patterns, or drinking a glass of water,

or mindfully listening to music, or doing certain yoga poses, or even grabbing a jar of hand cream from the bedside table and gently massaging it into her hands and arms! If possible, enlist the client's creativity in dreaming up these new morning routines.