**Supplementary Table 1.** An example of a diabetes-specific ACT-informed intervention illustrates the content of what sessions might entail according to key ACT processes.  This may not follow a chronological order, and processes may be interwoven across sessions.

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| **ACT Process** | **Description** |
| Core ACT process: Contact with present moment | Psychoeducation on the impact of our internal feelings such as thoughts and emotions on our actions using the ‘**Choice Point’ model** (Harris,2019). We ask people to think of an example where they last felt particularly low in mood/worried/distressed about their Diabetes. We explore the consequences of actions and whether they are moving ‘*towards’* or ‘*away’* from the life they want to lead (in relation to their therapy goals). We talk about a choice that is presented to us. On one hand, we can become ‘hooked’ and let these feelings stop us from taking insulin or checking blood sugar levels. On the other hand, we can learn to become aware of these feelings, ‘unhook’ from them and do what matters to us.  We explain that the first step is to become aware of all the internal experiences (thoughts and feelings), which is when the concept of mindfulness is introduced. A brief mindfulness exercise such as a short ‘body scan’ is done together in session. Therapist asks probing questions to support awareness building e.g., *“What did you notice in your body? “What was going through your mind at the time?”*  For homework, service users were given a ‘choice point’ worksheet which asks them to write down situations throughout the week that makes them feel distressed alongside their actions and consequences. To initially encourage mindfulness in pockets of time, people were asked to ‘notice’ the thoughts and feelings that come up for them as they completed the ‘choice point’ worksheet. |
| Core ACT processes: Values | We begin the session with a different mindfulness exercise than previous week so that the person has another tool they can use. We then review the homework task, discuss learning, or problem solve difficulties that arise.  Psychoeducation on values and an exercise to clarify them (e.g., *imagining close family friends and family giving a eulogy, what would you want them to say about you?*). We refer to the ‘Choice Point’ worksheet they completed and reflect on whether their current actions (in relation to diabetes management) are in line with values. Based on this, we discuss how they might want to do things differently to bring them closer to their values. We further refine their therapy goals to make them concrete actions that are specific and measurable.  We may consider cultural and/or religious values that are important to the client and incorporate that into the work (e.g. managing diabetes during Ramadan), or consideration of cultural food groups and adjusting the management plan (e.g. In T2DM if cultural food is high carbohydrate and they are not taking insulin, goals may focus on increasing exercise to balance effects of food-intake).  For homework, we may ask them to continue with the ‘Choice Point’ worksheet or introduce a management strategy diary that encourages reflection on whether their approach to challenges within the week took them toward or further away from their values. |
| Core ACT process: Acceptance | We follow a similar structure as abovementioned – mindfulness exercise and homework review.  We refer to the Choice Point worksheet and management strategy diary they have completed to reflect on occasions where their internal feelings dictated their behaviours. We ask about coping responses to internal feelings and whether they have ‘worked’ in the long run. To support this, a metaphor is used such as that of ‘struggling with quicksand’ or ‘tug of war’ to illustrate the impact of becoming ‘hooked’ with internal experiences. We ask whether they would be willing to try something different and ‘unhook’ so that they can continue to do things that are in line with their values.  For homework, we continue to build on top of previous weeks noticing internal experiences and strategies to manage them, as well as trying out new management strategies. |
| Core ACT process: Defusion | We follow a similar structure – mindfulness exercise (such as ‘Leaves on a Stream’) and homework review.  There are a range of unhooking skills that we can teach people. One example is to ask them to say *‘I’m having the thought that…’* which aims to help people press pause and take step back from their thoughts before acting (referring to the Choice Point). This may focus on managing food cravings, highlighting that a craving is just a thought that you can notice and name, and still act in line with your values/goals (e.g. to reduce snacking).  For homework, we may ask people to practice unhooking skills and record occasions when they used them. |
| Core ACT process: Willingness and Committed Action | We follow a similar structure – mindfulness exercise and homework review.  We may evaluate where their time and energy has been going (e.g. watching TV, rumination, worry) and reflect on how they would like their time and energy to be spent (e.g. managing diabetes, exercise). This may create a focus for committed action. This exercise may also be used earlier in the treatment to establish goals.  We would introduce the idea of willingness; making room for negative experiences to be present and still doing what matters. We may introduce the ‘waiting for the wrong train’ metaphor to encourage taking steps towards their goals whilst living with discomfort.  For homework, we might create a willingness action plan/activity scheduling that outline committed action in line with values and goals. For example, if someone was not checking their blood sugar levels regularly and their value is to prioritise their health, we might ask *“how many times shall we check our sugar levels this week that would take us a step closer to prioritising your health?”.* We might schedule specific times to check blood sugars, anticipating any negative experiences they might endure and think of skills we can use to make room for these experiences, whilst ensuring the plan is adhered to. |