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The Efficacy of Low-Intensity Acceptance and Commitment Therapy on Employee Turnover Intentions and Team Productivity: A Single-Group Pre-Post Study

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Abstract
Employee turnover and declining productivity remain pressing concerns for organizations operating in competitive labor markets. Acceptance and Commitment Therapy (ACT), a third-wave behavioral intervention centered on psychological flexibility, has shown promise in occupational settings, yet brief, low-intensity adaptations suitable for workplace delivery remain comparatively underexplored. The present study examined the efficacy of a six-session, low-intensity ACT intervention on turnover intentions and self-rated productivity among employees recruited through snowball sampling via social media and LinkedIn. Using a single-group pre-post design, 30 employed adults completed the Turnover Intention Scale (TIS-6, adapted from Mobley's conceptualization of withdrawal cognitions) and the Task Performance subscale of the Individual Work Performance Questionnaire (IWPQ) before and after the intervention. Paired-samples t-tests revealed a statistically significant reduction in turnover intentions and a statistically significant increase in self-rated productivity

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from pre- to post-intervention, both with large effect sizes. Findings suggest that even a brief, low-intensity ACT protocol may meaningfully reduce employees' intentions to leave their organization while improving perceived task performance. Implications for organizational mental health programming, along with limitations related to design, sampling, and measurement, are discussed.

Keywords: Acceptance And Commitment Therapy, Turnover Intention, Employee Productivity, Low-Intensity Intervention, Psychological Flexibility, Snowball Sampling

Introduction

Voluntary employee turnover and declining productivity are among the most costly challenges facing contemporary organizations, with replacement costs, lost institutional knowledge, and reduced team morale frequently cited as downstream consequences (Mobley, 1977). As labor markets have become more competitive and remote or hybrid work arrangements have reduced the visibility of employee distress, organizations have increasingly sought brief, scalable psychological interventions that can be delivered without the time and resource demands of traditional long-term therapy.

Acceptance and Commitment Therapy (ACT) is a third-wave behavioral intervention built around the construct of psychological flexibility: the capacity to remain in contact with the present moment and to persist in or change behavior in the service of chosen values, even in the presence of distressing thoughts or emotions (Hayes et al., 2012). Unlike interventions that target the content of negative thoughts directly, ACT emphasizes a shift in one's relationship to those thoughts, which has made it attractive for occupational applications where rumination, disengagement, and burnout often precede withdrawal behaviors such as turnover intention.

Most existing workplace evaluations of ACT involve multi-session protocols delivered over many weeks. Less is known about whether a low-intensity adaptation — a brief, structured protocol delivered in a small number of sessions, consistent with stepped-care models of intervention — can produce measurable change in organizationally relevant outcomes such as turnover intention and self-rated productivity. The present study addresses this gap by evaluating a six-session, low-intensity ACT protocol in a sample of employed adults recruited online.

Given the practical constraints of recruiting currently employed individuals for psychological intervention research, participants were recruited using snowball sampling disseminated through social media platforms and LinkedIn, allowing access to a geographically and organizationally diverse pool of working adults willing to participate anonymously online.

Literature Review

Theoretical Framework: Acceptance and Commitment Therapy

ACT rests on the psychological flexibility model, which comprises six interrelated processes: acceptance, cognitive defusion, contact with the present moment, self-as-

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context, values clarification, and committed action (Hayes et al., 2012). Rather than aiming to eliminate distressing internal experiences, ACT trains individuals to relate to thoughts and emotions with greater openness while taking action consistent with personally held values — a framework that maps naturally onto workplace constructs such as engagement, role clarity, and discretionary effort.

ACT in Occupational Settings

A body of occupational research has linked ACT-based interventions to improvements in employee mental health and work-related functioning. Bond and Bunce (2003) reported associations between psychological acceptance, job control, and indices of mental health and performance among employees, while Flaxman and Bond (2010) found that worksite stress-management training grounded in ACT principles was associated with improved psychological outcomes among distressed employees. Lloyd, Bond, and Flaxman (2013) further proposed that psychological flexibility functions as a mechanism through which ACT-based interventions reduce burnout. Collectively, this literature suggests psychological flexibility as a plausible mechanism linking brief ACT interventions to workplace outcomes, though direct evidence concerning turnover intention specifically remains limited.

Turnover Intentions: Conceptual Background

Mobley's (1977) intermediate linkage model conceptualizes turnover as the endpoint of a withdrawal process that begins with job dissatisfaction, proceeds through thoughts of quitting and intentions to search for alternative employment, and culminates in an explicit intention to leave the organization. Because intention to quit is consistently identified as the strongest proximal predictor of actual turnover (Mobley et al., 1978), it represents an appropriate and ethically tractable outcome for brief intervention research where actual attrition cannot reasonably be tracked within a short study window.

Linking Psychological Flexibility to Turnover and Productivity

Theoretically, reduced psychological flexibility — manifesting as cognitive fusion with negative evaluations of one's job, experiential avoidance of workplace stressors, and disengagement from valued aspects of one's role — may both elevate turnover cognitions and erode sustained task performance. If a low-intensity ACT protocol can shift psychological flexibility even modestly, corresponding change in both turnover intention and productivity would be expected, even though the two constructs are not assumed to be strongly correlated with one another, since they reflect different facets of the withdrawal-versus-engagement continuum.

Rationale for a Low-Intensity Protocol

Consistent with stepped-care frameworks in which low-intensity interventions are offered as a first-line, resource-efficient option before more intensive treatment is considered, the present protocol was deliberately constrained to six sessions to test whether organizationally feasible “doses” of ACT can produce detectable change,

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rather than evaluating the more resource-intensive protocols typical of clinical ACT trials.

Hypotheses

H1: Employees will report significantly lower turnover intention scores following a six-session low-intensity ACT intervention compared to baseline.

H2: Employees will report significantly higher self-rated productivity scores following a six-session low-intensity ACT intervention compared to baseline.

Method

Research Design

This study employed a single-group, within-subjects pre-post design. All participants received the same six-session low-intensity ACT intervention, with outcome measures collected immediately before the first session (Time 1) and within one week of completing the sixth session (Time 2). No control or comparison group was included.

Participants and Sampling Procedure

Thirty currently employed adults (N = 30) were recruited using snowball sampling. Recruitment posts describing the study and eligibility criteria were circulated through social media platforms and LinkedIn; interested individuals who met inclusion criteria were invited to share the study with eligible colleagues and contacts in their own networks. Inclusion criteria were: (a) current full-time or part-time employment of at least six months' tenure, (b) age 18 or older, and (c) no concurrent enrollment in individual psychotherapy. All participants provided informed consent prior to baseline data collection.

Table 1

Sample Demographic Characteristics (N = 30)

Variable	M / n	SD / %	Range
Age (years)	32.40	6.05	22–41
Gender – Male	15	50.0%	—
Gender – Female	15	50.0%	—
Organizational Tenure (years)	4.21	2.35	0.5–9.8

Instruments

Turnover Intention Scale (TIS-6). Turnover intention was measured using a six-item scale adapted from Mobley's (1977) conceptualization of withdrawal cognitions, consistent with short-form turnover intention measures used in applied organizational research (e.g., Roodt, 2004). Items (e.g., “I often think about quitting my current job”) were rated on a 5-point Likert scale (1 = strongly disagree, 5 = strongly agree), with

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total scores ranging from 6 to 30 and higher scores indicating greater turnover intention.

Productivity Scale. Self-rated productivity was measured using the Task Performance subscale of the Individual Work Performance Questionnaire (IWPQ; Koopmans et al., 2014), a psychometrically validated five-item measure of an employee's perceived effectiveness in completing core job tasks. Items were rated on a 5-point frequency scale (1 = seldom, 5 = always), with total scores ranging from 5 to 25 and higher scores indicating greater self-rated productivity.

Intervention: Low-Intensity ACT Protocol

The intervention consisted of six structured sessions (approximately 45–60 minutes each), delivered once weekly over six consecutive weeks via secure video conferencing. Sessions followed a manualized low-intensity adaptation of standard ACT protocols, condensing the six core processes into a brief, skills-focused format: (1) orientation and values clarification, (2) creative hopelessness and willingness, (3) cognitive defusion skills, (4) present-moment awareness and brief mindfulness practice, (5) self-as-context and committed action planning, and (6) consolidation, relapse prevention, and review of values-based action steps. Each session included brief psychoeducation, an experiential exercise, and a short between-session practice task.

Procedure

Following informed consent, participants completed the TIS-6 and IWPQ Task Performance subscale online at baseline (Time 1). Participants then completed the six-session intervention individually with a trained facilitator. Within one week of the final session, participants completed the same measures again (Time 2). No identifying organizational information was collected in order to protect participant anonymity given the sensitive nature of turnover-related disclosures.

Data Analysis

Data were analyzed using descriptive statistics, Cronbach's alpha reliability estimates, Pearson product-moment correlations, and paired-samples t-tests to compare Time 1 and Time 2 scores. Effect sizes were calculated using Cohen's d for paired samples. The alpha level for statistical significance was set at .05.

Ethical Considerations

Participation was voluntary and uncompensated beyond the intervention itself; participants could withdraw at any stage without penalty. Informed consent emphasized confidentiality, the limits of a brief non-clinical intervention, and signposting to professional mental health resources where appropriate.

Results

This section presents descriptive, reliability, correlational, and inferential findings for the synthetic dataset generated to illustrate this analysis.

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Descriptive Statistics and Reliability

Table 2 presents means, standard deviations, ranges, and Cronbach's alpha reliability coefficients for the Turnover Intention Scale and Productivity Scale at Time 1 (pre-intervention) and Time 2 (post-intervention).

Table 2

Descriptive Statistics and Reliability for Turnover Intention and Productivity Scales (N = 30)

Scale	M	SD	Range	α
Turnover Intention – Pre	21.37	3.61	14–27	.85
Turnover Intention – Post	14.50	3.53	6–24	.79
Productivity – Pre	14.07	3.13	8–21	.82
Productivity – Post	17.60	3.64	10–25	.86

Both scales demonstrated good internal consistency at both assessment points, with alpha coefficients ranging from .79 to .86, indicating reliable measurement throughout the study period.

Correlational Analysis

Table 3 displays Pearson correlations among the study variables. Turnover intention scores were moderately stable from pre- to post-intervention ($r = .68$, $p < .001$), while productivity scores showed a weaker, marginal association across time points ($r = .34$, $p = .064$). Turnover intention and productivity were not significantly correlated with one another at either Time 1 ($r = -.24$, $p = .194$) or Time 2 ($r = -.20$, $p = .292$), suggesting these two outcomes, while both responsive to the intervention, reflect relatively distinct constructs rather than a single underlying factor.

Table 3

Pearson Correlations Among Study Variables (N = 30)

Variable	1	2	3
1. Turnover Intention – Pre	—		
2. Turnover Intention – Post	.68**	—	
3. Productivity – Pre	−.24	−.19	—
4. Productivity – Post	−.25	−.20	.34

Note. **$p < .01$. *Productivity Pre–Post correlation, $r = .34$, $p = .064$.*

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Paired-Samples t-Tests

Paired-samples t-tests were conducted to evaluate change from pre- to post-intervention on both outcome variables. As shown in Table 4, turnover intention decreased significantly from Time 1 to Time 2, $t(29) = 13.14$, $p < .001$, with a very large effect size ($d = 2.40$). Productivity increased significantly from Time 1 to Time 2, $t(29) = -4.96$, $p < .001$, with a large effect size ($d = 0.91$). Both hypotheses (H1 and H2) were therefore supported.

Table 4

Paired-Samples t-Test Results for Turnover Intention and Productivity (N = 30)

Measure	Pre M (SD)	Post M (SD)	t	df	p	Cohen's d
Turnover Intention	21.37 (3.61)	14.50 (3.53)	13.14	29	< .001	2.40
Productivity	14.07 (3.13)	17.60 (3.64)	−4.96	29	< .001	0.91

Discussion

The present study examined whether a brief, low-intensity ACT intervention delivered over six sessions could produce measurable improvement in two organizationally important outcomes: turnover intention and self-rated productivity. Consistent with both study hypotheses, participants reported significantly lower turnover intention and significantly higher productivity at post-intervention, with effect sizes that, if replicated in a controlled trial, would be considered very large by conventional benchmarks.

These findings are broadly consistent with the psychological flexibility model underlying ACT (Hayes et al., 2012) and with prior occupational research linking acceptance-based processes to improved work-related functioning (Bond & Bunce, 2003; Flaxman & Bond, 2010). One plausible interpretation is that brief defusion and values-clarification exercises reduced participants' fusion with thoughts about quitting, while committed-action planning translated into more consistent task engagement.

Notably, turnover intention and productivity were not significantly correlated with one another at either assessment point. This pattern suggests that the intervention may have influenced these two outcomes through at least partly distinct pathways, rather than through a single shared mechanism, and underscores the value of measuring both constructs separately rather than assuming that reduced withdrawal cognitions automatically translate into improved performance.

Limitations

Absence of a control or comparison group precludes causal attribution of observed change to the intervention itself, as opposed to regression to the mean, testing effects, or maturation.

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Snowball sampling via social media and LinkedIn likely produced a self-selected sample of employees who were already motivated to engage with a wellbeing intervention, limiting generalizability.
All outcomes were self-reported; objective indices of productivity (e.g., supervisor ratings, output metrics) or actual turnover behavior were not assessed.
The small sample size (N = 30) and short post-intervention follow-up window limit statistical power for subgroup analyses and preclude conclusions about durability of effects.
Organizational and team-level variables (e.g., supervisor support, team composition) that may moderate intervention effects were not measured.

Conclusion

Within the constraints of a single-group pre-post design, a brief six-session low-intensity ACT intervention was associated with significant reductions in turnover intention and significant increases in self-rated productivity among employees recruited online. These preliminary findings support further investigation of low-intensity ACT as a scalable, workplace-feasible intervention, ideally using randomized controlled designs, objective performance indicators, and longer-term follow-up to establish causal efficacy and durability of effects.

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