

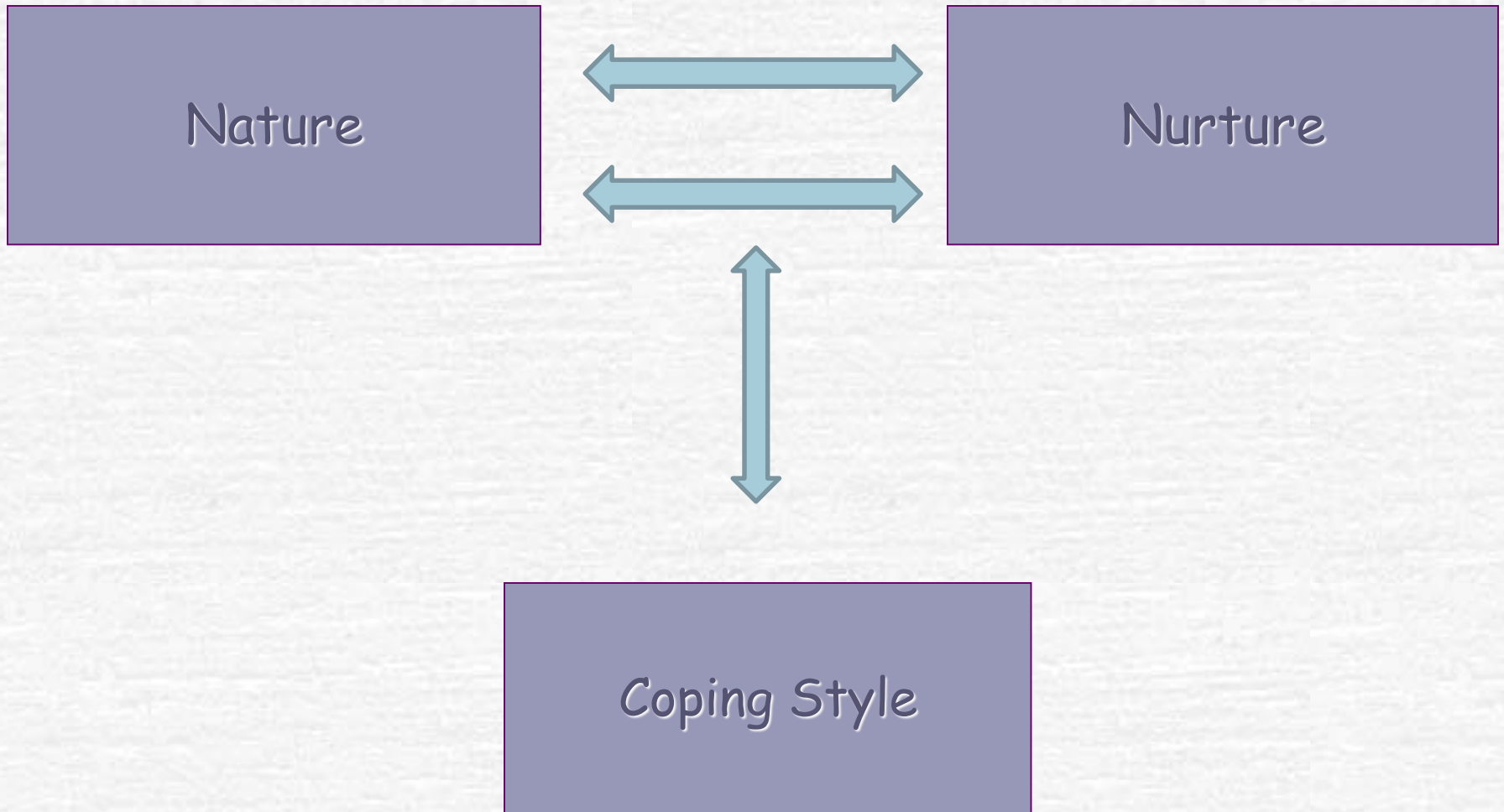
Part 1 Overview

- ✓ Introduction to DBT Model
- ✓ Key Tools for DBT Individual Therapy
 - Prioritizing Treatment Targets
 - Chain Analysis
 - Diary Card
- ✓ Teaching Skills

DBT Model Key Points

- ✓ Bio-Social Theory
- ✓ Dialectics
- ✓ Acceptance: Validation
- ✓ Change: Behaviorism
and Chain Analysis

Personality Development



Emotional Dysregulation

“Nature”

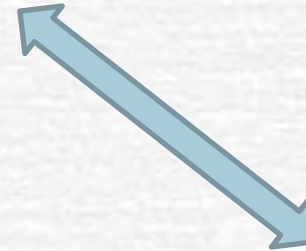
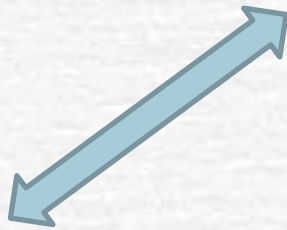
High emotional vulnerability
High Impulsivity/Constraint
High threat sensitivity

Invalidating
Environment

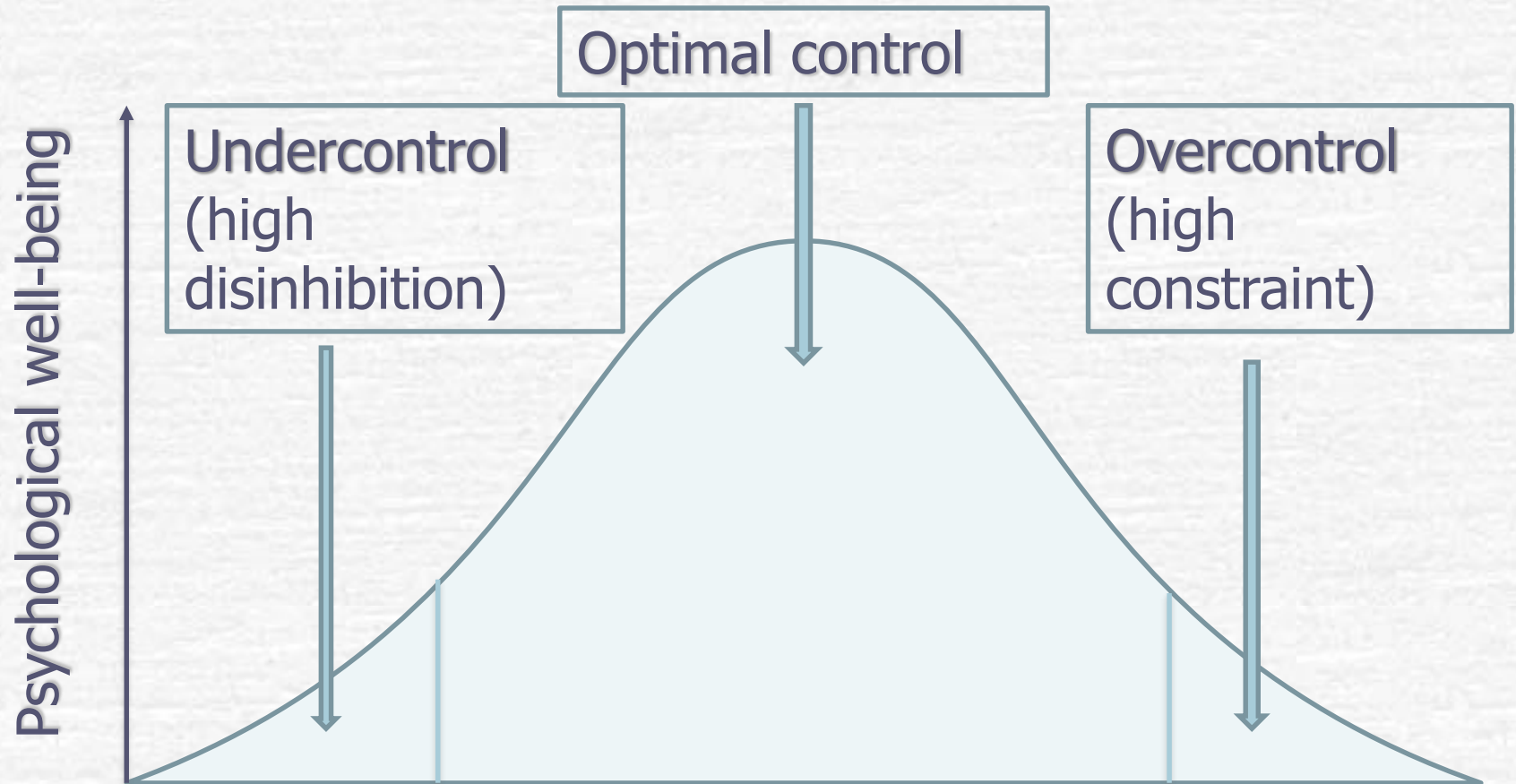
“Nurture”

Emotional
Dysregulation

“Coping”



Self-control



Self-control tendencies

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graph TD; A[EMOTIONAL DYSREGULATION] --- B[SELF DYSREGULATION]; A --- C[COGNITIVE DYSREGULATION]; B --- D[INTERPERSONAL DYSREGULATION]; C --- E[BEHAVIOURAL DYSREGULATION]; D --- E;
```

**EMOTIONAL
DYSREGULATION**

**SELF
DYSREGULATION**

**COGNITIVE
DYSREGULATION**

**INTERPERSONAL
DYSREGULATION**

**BEHAVIOURAL
DYSREGULATION**

Behaviours to increase and decrease

Increase	Decrease
Self-regulation/mindfulness	Self-dysregulation
Distress Tolerance	Behavioural Dysregulation
Emotion Regulation	Emotion Dysregulation
Interpersonal Effectiveness	Interpersonal Dysregulation
Dialectical thinking	Cognitive Dysregulation

Emotionally Dysregulated Individual

- Self Dysregulation
 - Identity confusion, sense of emptiness or of being “bad” or damaged
- Behavioral Dysregulation
 - Self-harming behavior, impulsive behavior, aggressive behavior
- Emotional Dysregulation
 - Intense labile emotions, problems with anger, fear, shame, sadness
- Cognitive Dysregulation
 - All or nothing thinking, negative expectations, low hope
- Interpersonal Dysregulation
 - Lack of consistent friends, lack of assertiveness, fear of abandonment, non-verbal learning disabilities, problems with authorities, disruptive or aggressive behavior

Bio-Social Theory

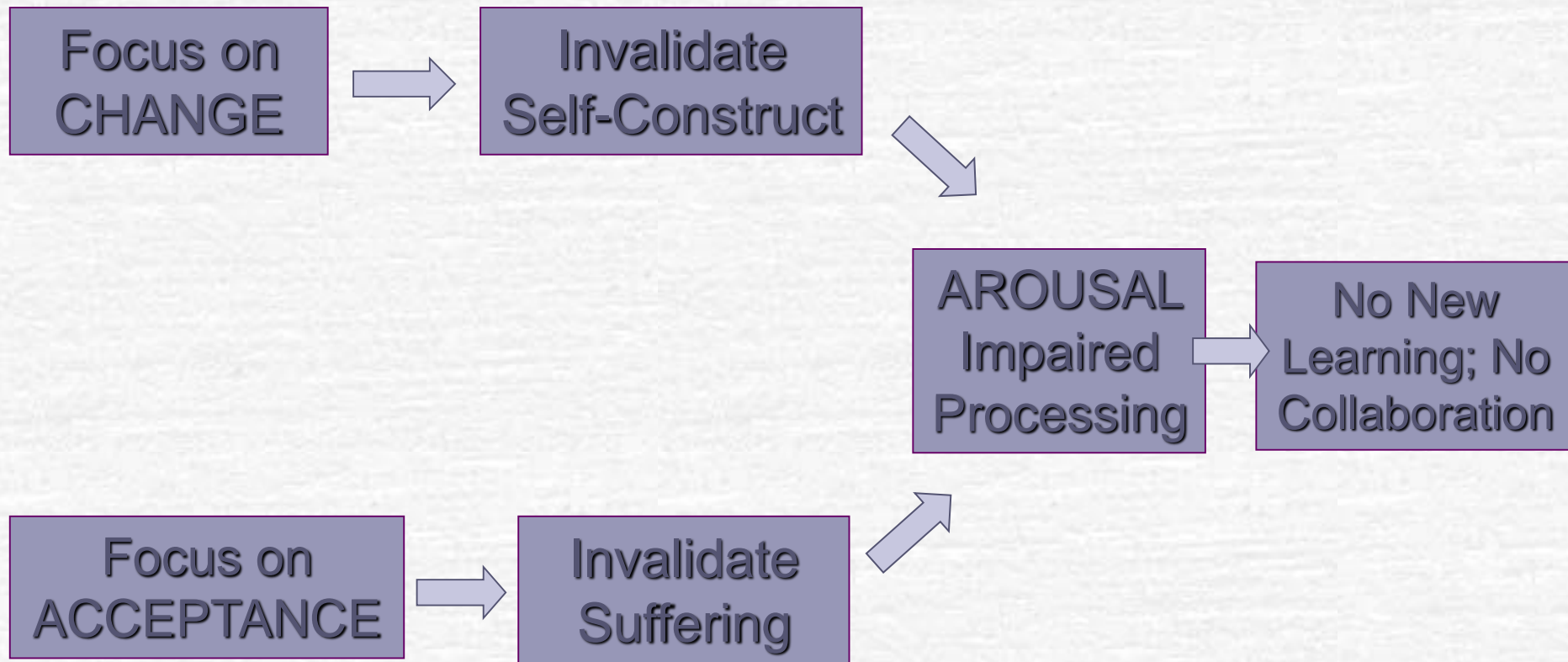
The Huge Point!!!

- ✓ Maladaptive behaviors are our clients best attempt to solve PROBLEMS
- ✓ DBT stresses figuring out the original PROBLEMS and why the "solutions" are working to help the client manage the PROBLEMS
- ✓ DBT Skills Training teaches and reinforces new, more effective "solutions"

Dialectical Behaviour Therapy (DBT)

- Comprehensive treatment program developed by Marsha Linehan in the 1980s
- Focus is on reducing suicidal behaviour by helping clients build a “life worth living”
- Developed for women with BPD; reformulated for multidagnostic treatment-resistant populations

Problem with standard treatments



Solution

Apply a dialectical approach

Validate uncontrollable, helpless
experience of intense emotional arousal
(ACCEPTANCE STRATEGIES)


AND

Teach emotion modulation
(CHANGE STRATEGIES)

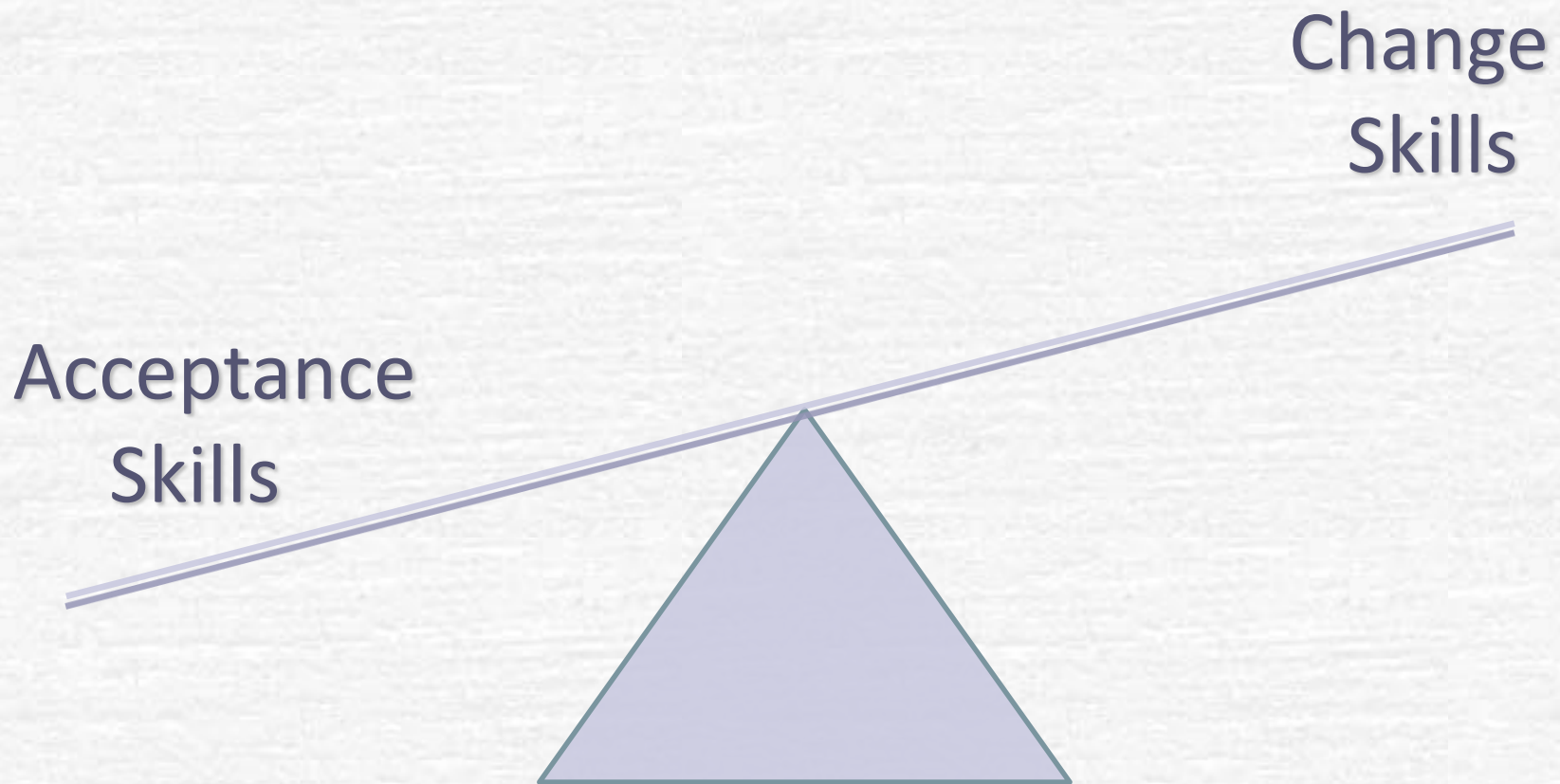


Dialectical Behaviour Therapy (DBT)

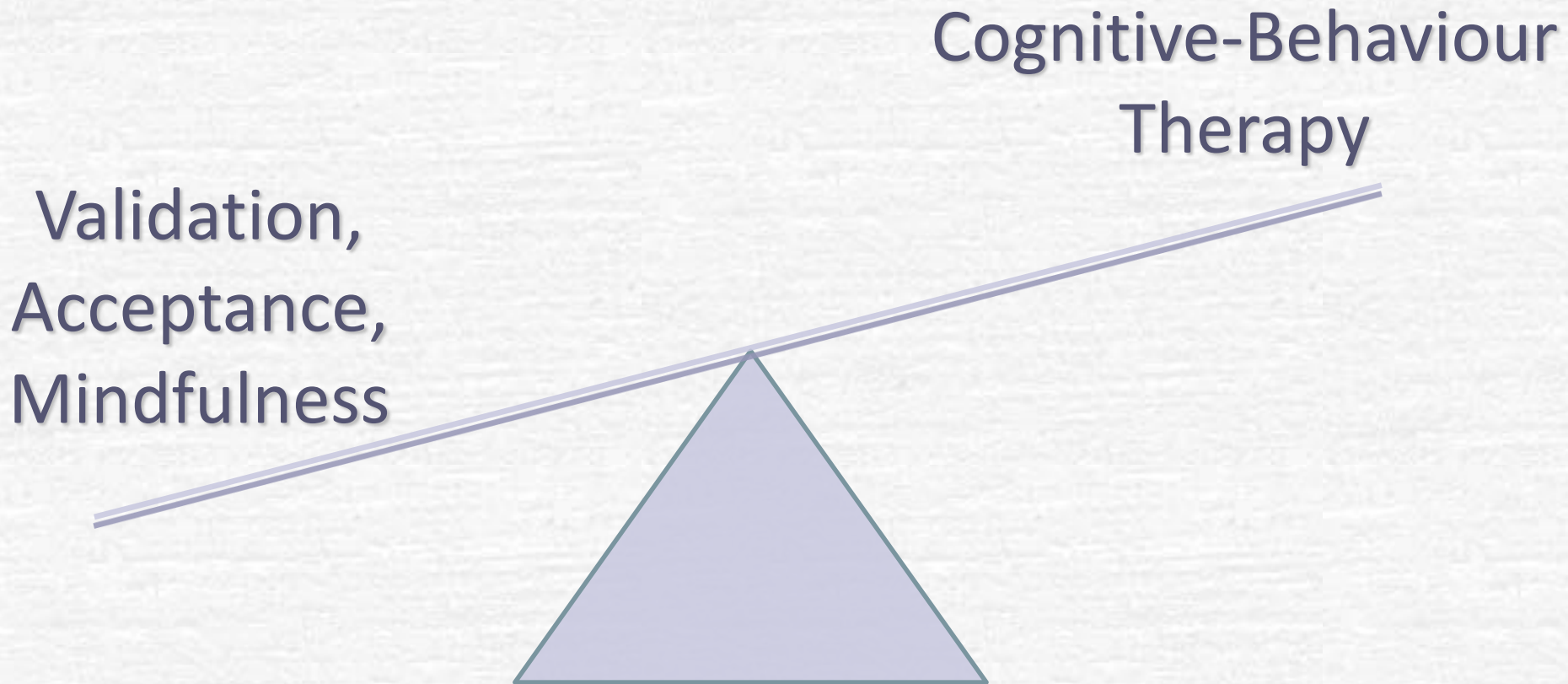
Rooted in

- Behaviour therapy,
 - Zen practices, and
 - Dialectical philosophy (the tension between polar opposites – between acceptance and change)
- 

Teach two new sets of behaviour:



Core treatment strategies:



Comprehensive & Adapted DBT

Standard/Adherent DBT includes

- individual treatment,
- group treatment,
- between-session skills coaching, and
- consultation team for therapists (clinicians working with people with BPD need support)

Adapted for inpatient, forensic, and adolescent populations

Five functions of DBT

- ✓ Structure the environment
- ✓ Increase motivation/Prioritize Targets
- ✓ Teach skills
- ✓ Increase generalization
- ✓ Support team




Key Tools

For Individual Therapy






Prioritizing Treatment Targets

- ✓ Life Threatening
 - ✓ Therapy Interfering
 - ✓ Quality of Life Interfering
 - ✓ Skills deficits
- 



Dialectics

Balancing
Acceptance and Change



Dialectics: The Worldview

- ✓ Truth is complex (paradoxical)
- ✓ No one has an absolute hold on the truth
- ✓ Contradictions can be reconciled
- ✓ Dialectics is a Process where each step provokes its opposite

Dialectics: How does it feel?


- All or Nothing thinking feels galvanizing, strong, rigid
- Dialectical perspective feels curious, creative and fluid

How to stay Dialectical

- ✓ Ask "what am I missing?"
- ✓ Don't prove yourself right
- ✓ Balance acceptance with change
- ✓ Balance structure with nurturing
- ✓ Step towards middle of caretaker dialectical dilemmas



Validation

- To promote self-acceptance and self-compassion
 - Acceptance is not the same as approval
 - Acceptance is not praise
- 

Levels of Validation

1. Listening & observing
2. Accurate reflection
3. Articulating the unverbalyzed
4. Validating in terms of past experiences or biological vulnerability
5. Validating in terms of current circumstances
6. Radical genuineness

Levels of Validation

LEVEL 4. VALIDATING BEHAVIOUR IN TERMS OF PAST EXPERIENCES OR BIOLOGICAL VULNERABILITY

- Especially helpful when a person is highly judgmental of their own reactions
- “It makes sense to me that your reaction was so extreme. Given your history with your father, I can imagine how sensitive you are to people trying to exert authority over you.”

Levels of Validation

LEVEL 5. VALIDATING BEHAVIOUR IN TERMS OF CURRENT CIRCUMSTANCES

- Validate the valid and do not validate the invalid; especially helpful when a client has difficulty trusting their reactions
- “I can completely understand why you felt so angry. It sounds like your DCS worker really misunderstood your situation. It seems as though you got pretty extreme though and she is no longer willing to work with you because of it. We should work on how to manage those feelings so you can respond in ways that don't make your situation worse.”

Levels of Validation


LEVEL 6. RADICAL GENUINENESS

- Be typical of how you act in other relationships: neither overly sweet nor aloof.
- Have accurate expectations (not treating patients as fragile and also not ignoring true limitations); being willing to be vulnerable (self-disclose reactions) when this would be helpful
- Communicates that patients are equal, capable, and valid



When to Validate




Before suggesting a
change in behavior



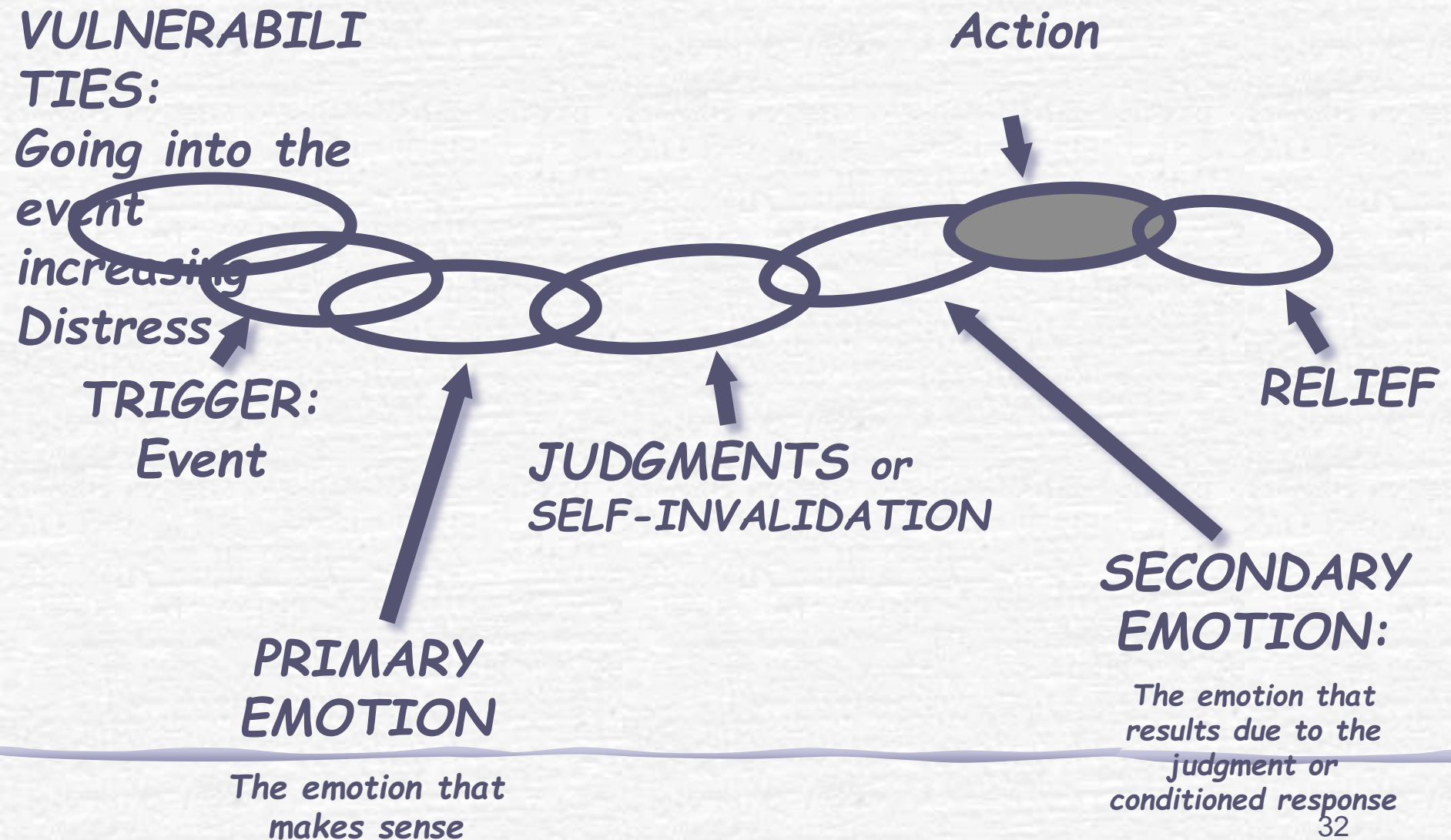
Change Strategies

Behaviorism

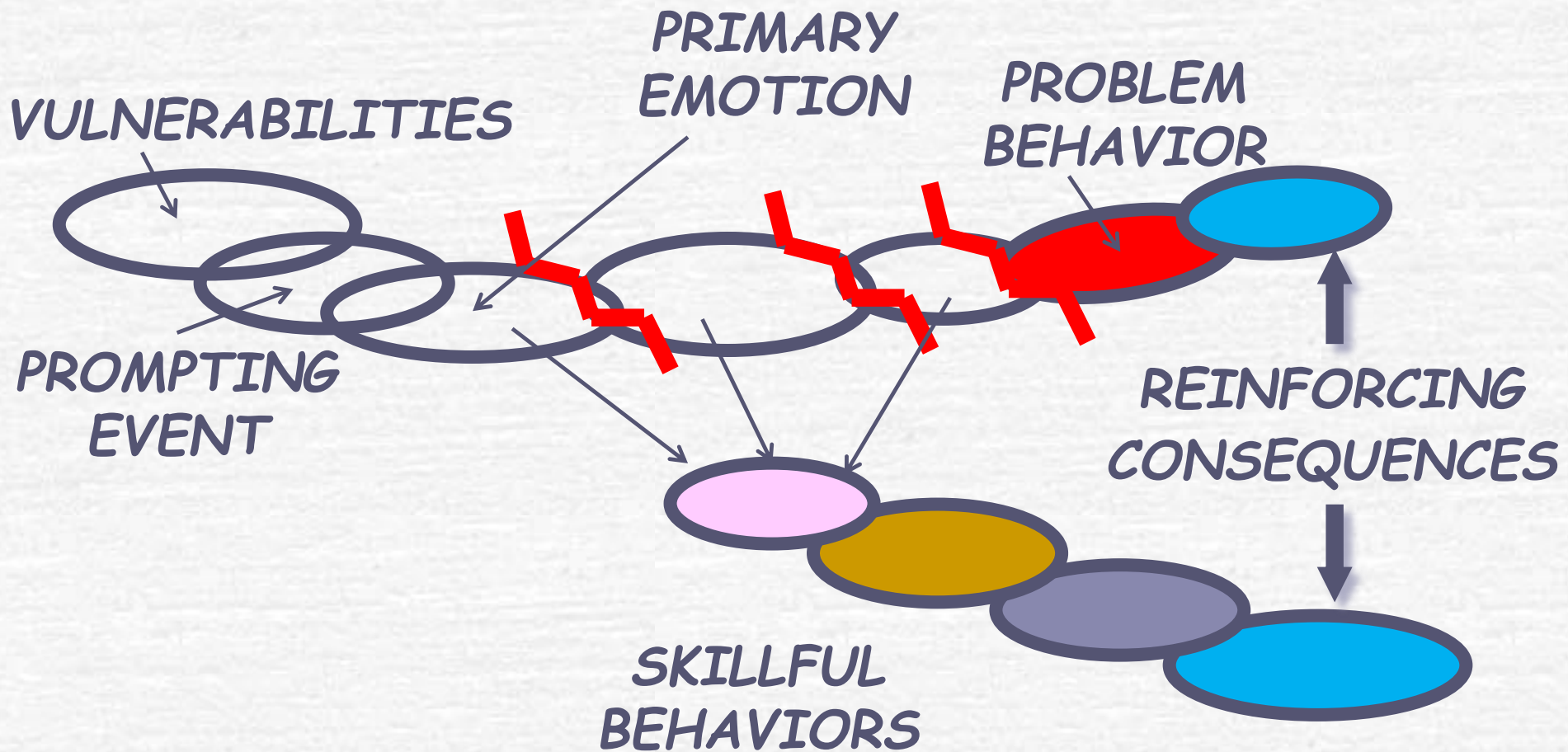
Chain Analysis

Trigger (e.g., yelled at by peer; difficult family session; had negative memory; put on freeze)	Primary emotion (e.g., sad; fearful; hurt; embarrassed; disappointed; frustrated; lonely)	Judgments (e.g., "I'm worth-less"; "She's a b"; "Nothing will get better"; "He hates me")	Secondary emotion (e.g., angry; ashamed; hope-less; depressed; panicked)	Event/Action (e.g., self-harm; suicidal attempt; attacked peer; yelled at staff; kissed peer)	Consequences (e.g., felt relief; felt ashamed; received con-sequence; sup- port from staff)
					
Skills I could have used (e.g., radical acceptance, build positive experiences, FAST):	Skills I could have used (e.g., allow emotion, ride the wave, opposite action):	Skills I could have used (e.g., describe, nonjudgmental stance, validation):	Skills I could have used (e.g., identify primary emotion, opposite action, Wise Mind):	Skills I could have used (e.g., distract, self-soothe, GIVE):	Skills I could have used (e.g., DEAR MAN; self- soothe, observe):
How I could have used these skills (e.g., plan pleasant event after family session):	How I could have used these skills (e.g., remind-ing myself feelings will pass; fully participating in group):	How I could have used these skills (e.g., Saying "She hurt my feelings"; Saying, "Sadness is normal"):	How I could have used these skills (e.g., Noticed I was really hurt, rather than angry; gently avoided peer):	How I could have used these skills (e.g., Telling peer gently that she hurt me; drawing; used lotion):	How I could have used these skills (e.g., DEAR MAN for support <i>before</i> harm; self- soothe for relief)
Going forward, I commit to:					

Example: Chain Analysis



Changing Behavior



How to do a chain analysis with a client:


1. Define Problem Behavior
2. Consequences of Behavior
3. Describe Prompting Event in Environment
4. Describe Vulnerability Factors
5. Secondary emotion
6. Interpretations
7. Primary emotion
8. Skills used
9. Skills resident could have used
10. The Plan for Repair
11. Review New Skill and Practice

Chain Analysis Step 1: Clearly define the PROBLEM BEHAVIOR


- ✓ Examples: Cutting, damaging a room,
- ✓ The description should be **specific**.
- ✓ The intensity of the behavior should be noted. (I banged loudly on the door shouting "I hate you")
- ✓ Vague terms "I went off" should be **AVOIDED**.

WARNING:
Anticipate obstacles
to being specific (for client AND you)

1. Big emotions
2. Lack of skill
3. Negative self-talk
4. Lack of hope
5. Lack of motivation
6. Starting with conclusions




Chain Analysis Step 2: Describe the Prompting Event in the environment


- ✓ Examples: Parent gives parenting advice
 - ✓ The first and exact event that started the chain
- 

Chain Analysis Step 3: Describe Vulnerability Factors

- Examples: Lack of sleep, Bad phone call with mother last night
- Are there factors that made the problem behavior more likely to happen now?



Chain Analysis Step 4: Consequences of Behavior

- ✓ Be specific
 - ✓ Think short term and long term
 - ✓ Think POSITIVE as well as negative
- 


Chain Analysis Step 5: Skillful Solutions

- ✓ Identify the maladaptive links in the chain
- ✓ What's the easiest way to get off the chain?
- ✓ Replace unskillful thought/skill/behavior with skillful thought/skill/behavior

Chain Analysis Step 6:


What is the plan for prevention?

- ✓ How can they reduce vulnerability factors?
- ✓ How can they increase positive behaviors?
- ✓ How can they increase emotional experiencing?
- ✓ Can they reduce likelihood of prompting event by working out a relationship problem, avoiding risky situations?




Chain analysis Step 7: What needs to be repaired?

For example,


- ✓ A hole in the wall
 - ✓ A damaged relationship
 - ✓ Thoughts about self
- 

Chain Analysis Step 8: The Plan for Repair

- ✓ Fix the wall
- ✓ Apologize
- ✓ Add something to the group
- ✓ Teach what you've learned about skillful behavior
- ✓ Do something nice
- ✓ Hint: Have client come up with the plan



Chain Analysis Step 9: Review New Skill and Practice

- Rehearse skill before re-entering environment
- 



Teaching DBT Skills



Teaching NEW SKILLS

1. Learn the idea of a skill in your head

Directions, examples, modeling

2. Practice using the skill

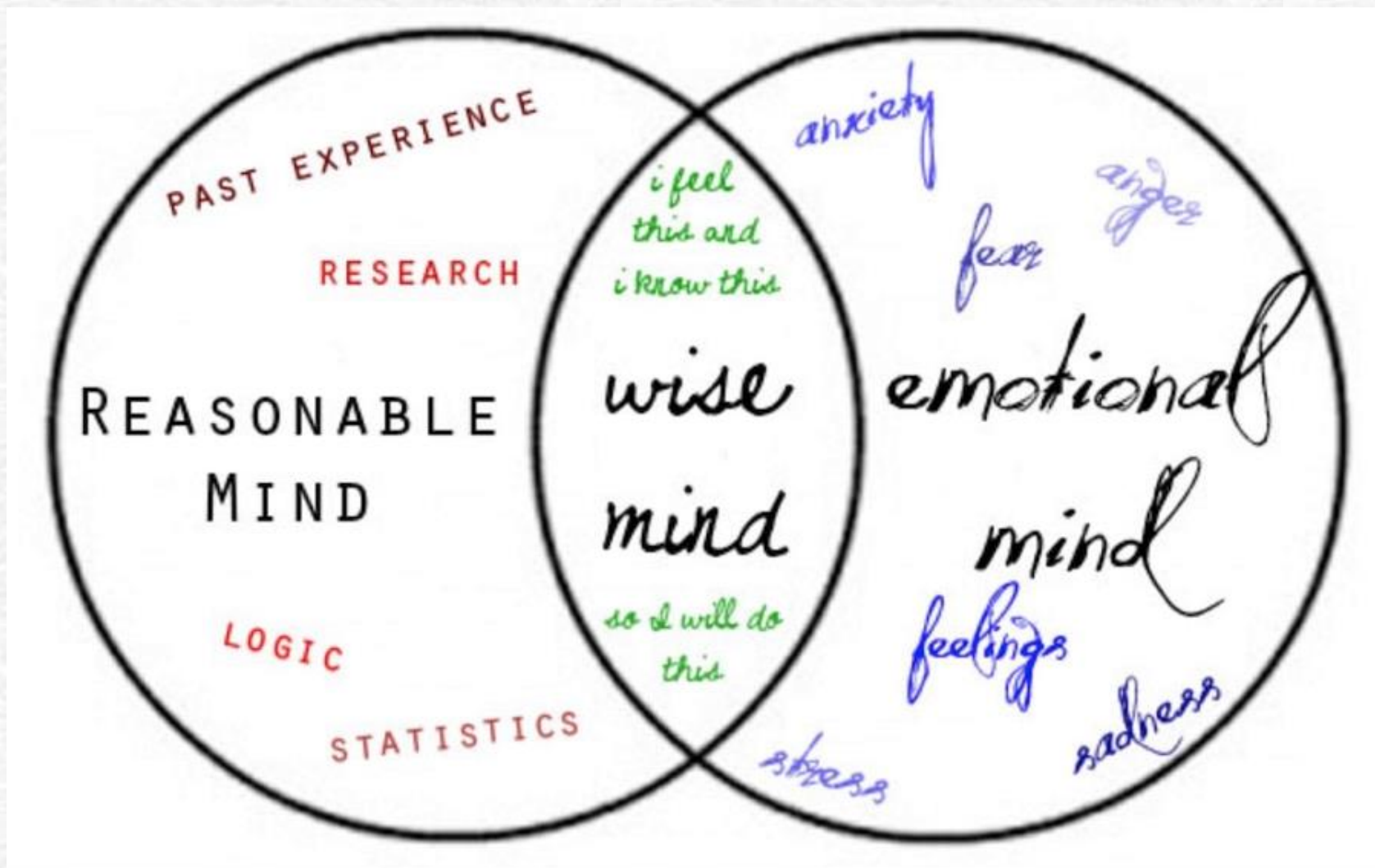
Homework, coaching, role play, with intention

3. Generalize

Nearly automatic, natural skill use, apply in a more challenging environment (emotional dysregulation up)

Examples: Learning an instrument, a favorite song, shooting free throws, riding a bike

4. Teach it



Source - 7cups.com

WISE MIND

✓ EMOTION MIND:

- Emotion driven behavior, important communication (sometimes loudest)

✓ REASONABLE MIND:

- Planful, logical, (what adults say)

✓ WISE MIND:

- quiet, internal, best self, intuitive,
- Synthesizes emotion and reason,
- Considers short term and long term

The Road to Wise Mind:

WHAT SKILLS

- **Observe:** Sensing without Describing
(Example: body in chair)
- **Describe:** Name, label without judging
(Example: Emotion charades)
- **Participate:** Throw yourself in, dance
(Example: Free throw)

The Road to Wise Mind:

HOW SKILLS

- ✓ **Non-judgmentally:** Just the facts. Like watching a videotape. Clap when you hear a judgment
- ✓ **One mindfully:** One dish at a time
- ✓ **Doing what works:** Let go of useless anger (and how to tell the difference)

Mindfulness Instructions

1. Identify an object of focus.

Examples: Your breath; as you inhale and exhale

An object: a stone, a picture, a burning candle,

An activity: making a paper airplane, brushing your hair, cleaning your room, reading, stretching


2. Bring your attention to the object of focus.

3. When your attention wanders away from the object of focus, and we know that it will...

a. *Notice* that this has happened.

b. *Gently* bring your attention back to the object of focus.

c. Over and over again.




Skills Training Goals

INCREASE:

Distress
Tolerance

DECREASE:

Impulsive Behaviors
Suicidal Threats
Parasuicide



Distress Tolerance ~Impulsivity~


- Crisis Survival Skills
- Distress Tolerance Plans
- Acceptance Skills:
 - Willingness
 - Turning the Mind
 - Radical Acceptance

Distress Tolerance

- ✓ TIPP-Temperature, Intense Exercise, Paired muscle relaxation, Paced Breathing



Distress Tolerance

- ✓ S-Stop
 - ✓ T-Take a step back
 - ✓ O-Observe and Describe
 - ✓ P-Proceed Mindfully
- 

Emotion Regulation

- ✓ Observe and Describe an Emotion
- ✓ Understand the Functions of Emotions
- ✓ Reducing Vulnerability to Emotional Mind
- ✓ Build Mastery
- ✓ Build Positive Experiences
- ✓ Act Opposite to Emotions

Emotion Regulation: Understanding Emotions

Prompting Event	Emotion	Urge
Threat	Anger	To Strike Out
Loss	Sadness	Withdraw
Causing Harm	Guilt or Shame	Hide
Danger	Fear	Avoidance
Shared Experience	Love	Attraction
Success	Joy	Bouncy, Effusive

Emotion Regulation:

Primary vs. Secondary emotions

- Primary emotions are the biologically based emotions that are found in all humans and animals.
- When an emotion is avoided or a thought or interpretation intervenes this can prompt a secondary emotion.

This can happen in a very brief time period and can lead to behavior that is problematic.

Example: Car fear turns to rage

SKILLS TRAINING GOALS

INCREASE

Interpersonal
Skills

DECREASE

Interpersonal
Chaos
Fears of
Abandonment

Interpersonal Effectiveness: Priorities

- ✓ Objective Effectiveness: What do you want from the interaction?
- ✓ Relationship Effectiveness: How do you want the other person to feel about you?
- ✓ Self-respect effectiveness: How do you want to feel about yourself after the interaction?

Interpersonal Effectiveness

Objective: DEAR MAN

Describe

Express

Assert

Reinforce

Mindfully

Act confident

Negotiate

Interpersonal Effectiveness: Obstacles

- ✓ Fears about relationships
- ✓ Lack of assertiveness
- ✓ Too aggressive
- ✓ Dysregulated emotions-Avoid vs. Confront
- ✓ Indecision
- ✓ Environment



Group priorities

- ✔ Treatment Destroying vs. Treatment Interfering behaviour
 - ✔ Leader Roles
 - ✔ Task Oriented vs. Support of Clients
- 