



DIALECTICAL BEHAVIOR THERAPY

Lucy Navarro, FNP-BC

MH708 – Fall 2023

Frontier Nursing
University



OBJECTIVES

- 1. What is Dialectical Behavior Therapy (DBT)?
- 2. Theories behind DBT and techniques used
- 3. Benefits of DBT and use in Borderline Personality Disorder

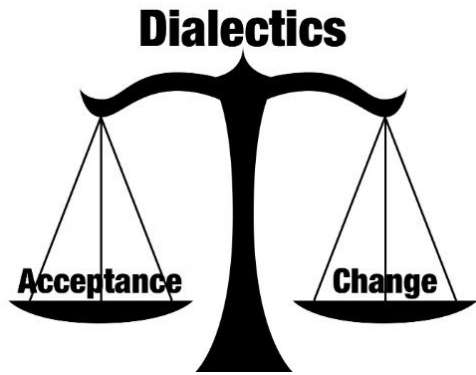




WHAT IS DIALECTICAL BEHAVIOR THERAPY (DBT)?

- Originally developed to treat borderline personality disorder and behaviors associated with suicidality and self-harm
- Marsha Linehan developed DBT as a form of cognitive behavior therapy (CBT) within a Zen Buddhist worldview
- The fundamental dialectic in DBT is that of change and acceptance
- Therapy aims to help individuals find a more balanced and effective way to navigate their thoughts, emotions, and behaviors





DBT IS BASED ON TWO MAIN THEORIES

▪ **Dialectics**

- Influenced by dialectical philosophy
- Emphasizes the synthesis of opposing ideas or perspectives
- Involves finding a balance between acceptance and change
- Clients are encouraged to accept themselves and their emotions while also working towards positive change

▪ **Behaviorism**

- Focuses on changing maladaptive behaviors and reinforcing adaptive ones
- Behavioral techniques, like skills training and behavior modification, are used to help individuals develop healthier coping strategies

(Linehan, M. & Wilks, C., 2018)

These two theories work together in DBT to provide a comprehensive framework for addressing emotional dysregulation, self-destructive behaviors, and relationship issues. DBT utilizes principles of Zen – accepting reality as it is. “Patients practice mindfulness, where they quiet themselves and become more acutely aware of the world around them.” (Salsman, N. & Linehan, M., 2006).



BASIC TO DBT ARE FUNCTIONS AND MODES OF COMPREHENSIVE TREATMENT

Five functions of DBT

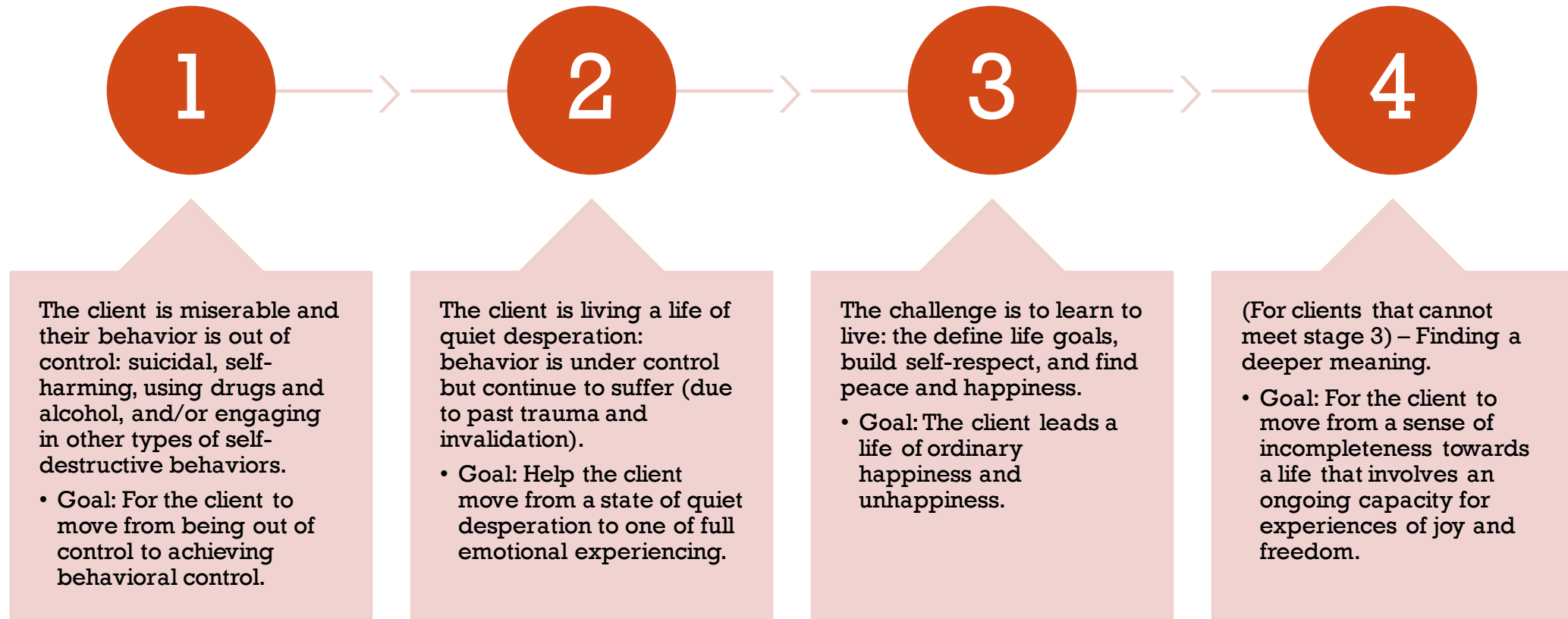
- 1. Enhance capabilities
 - 2. Enhance motivation
 - 3. Assure generalization to the natural environment
 - 4. Structure the environment
 - 5. Enhance therapist capabilities and motivation to treat effectively
- (Salsman, N. & Linehan, M., 2006)

Four essential elements:

- Weekly individual therapy sessions for the patient of about 1 hour each
 - Weekly group skills training sessions for the patient of 2.5 hours each
 - Skills coaching via telephone or other electronic means as needed by the patient to manage in vivo situations
 - Team consultation to the therapist to maintain treatment fidelity and adherence
- (Wheeler, K., 2020)

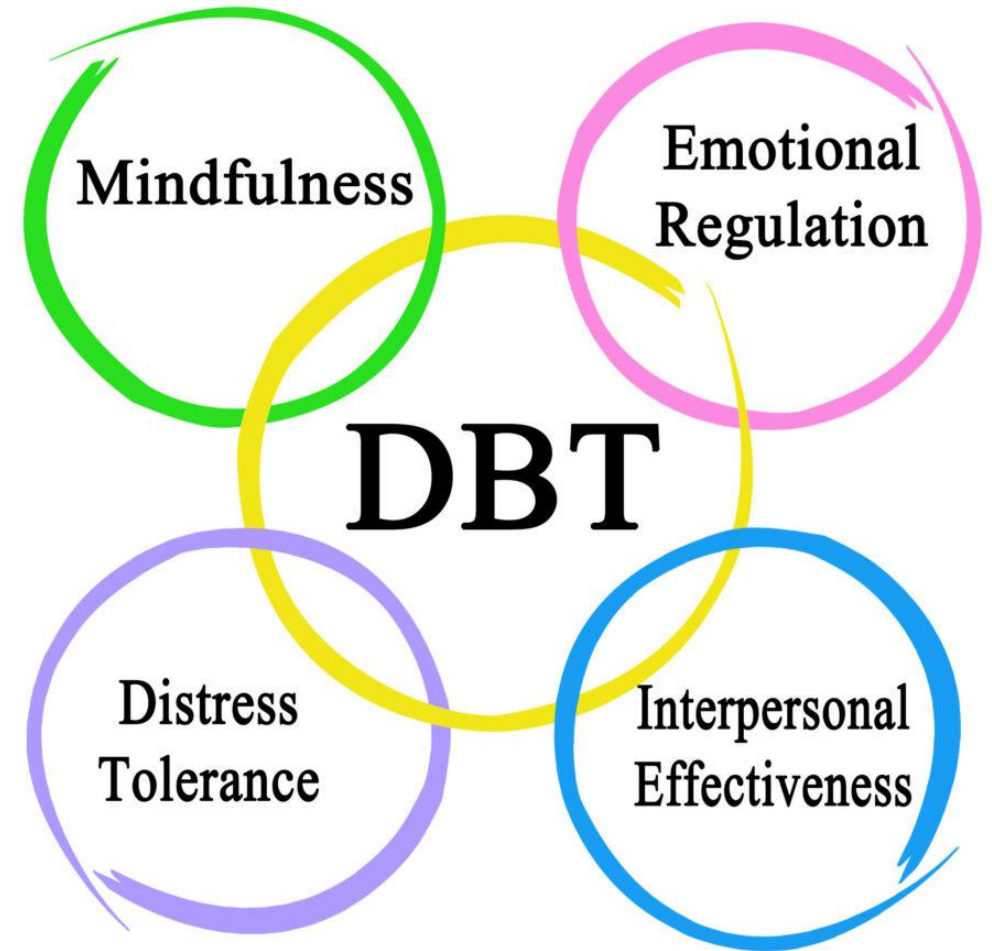


STAGES OF TREATMENT

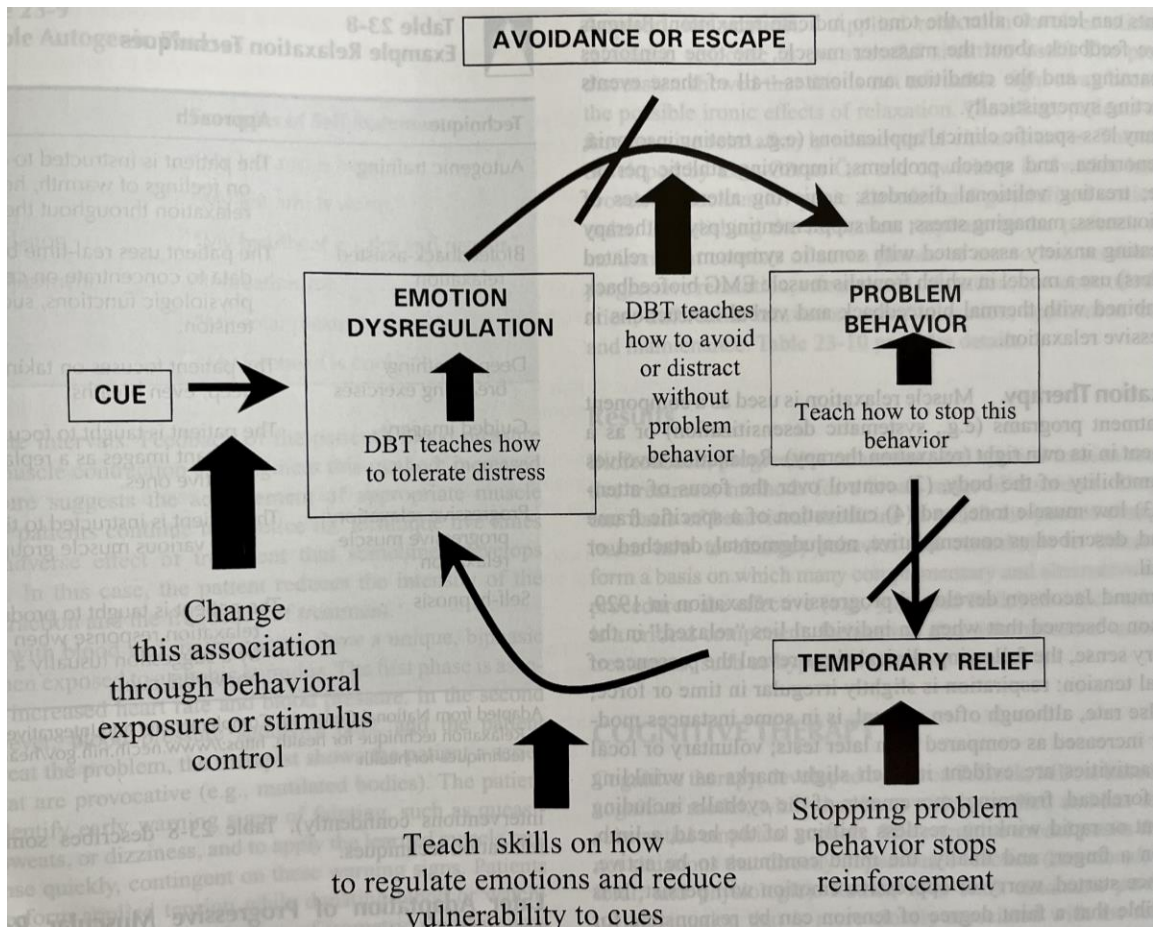


DBT SKILLS

- **Mindfulness**: the **CORE** skill, considered a foundation for the other skills; the practice of being fully aware and present in this one moment
- **Distress Tolerance**: how to tolerate pain in difficult situations, not change it
- **Emotion Regulation**: how to decrease vulnerability to painful emotions and change emotions that you want to change
- **Interpersonal Effectiveness**: how to ask for what you want and say no while maintaining self-respect and relationships with others

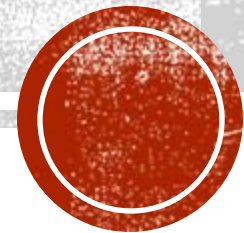


HOW DIALECTICAL BEHAVIOR WORKS



(Boland, R., Verduin, M., & Ruiz, P., 2022)

DBT is designed as a complex, multi-faceted, and dynamic treatment with a wide diversity of concepts, strategies, and procedures that are tailored to the individual client (Marks, M., 2022).



EVIDENCE BASED LITERATURE TO SUPPORT THE UTILIZATION OF DBT IN SPECIFIC POPULATIONS

- The scope of DBT is broad and extends to various mental health conditions and settings:
 - **Borderline Personality Disorder (BPD):** Neacsiu, A. D., Lungu, A., Harned, M. S., Rizvi, S. L., & Linehan, M. M., (2014). Impact of dialectical behavior therapy versus community treatment by experts on emotional experience, expression, and acceptance in borderline personality disorder, *Behavior Research and Therapy*, 53, 47-64.
 - **Other Mood and Personality Disorders:** Priebe, S., Bhatti, N., Barnicot, K., Bremner, S., Gaglia, A., Katsakou, C., & ... Zinkler, M. (2012). Effectiveness and cost-effectiveness of dialectical behaviour therapy for self-harming patients with personality disorder: A pragmatic randomised controlled trial. *Psychotherapy And Psychosomatics*, 81(6), 356-365. doi:10.1159/000338897
 - **Anxiety and Stress Management:** K, A., Peyman, A., Rezaei, SV., & Salehi, A. (2020) Emotion regulation training based on dialectical behavior therapy effectiveness on reducing students/anxiety and anger. *Armaghane Danesh Bimonthly Journal*, 25(4), 451-465. <https://doaj.org/article/62b626bcbde44fcd81532e677e110fcd>
 - **Substance Use Disorders:** Wilks, C, Yin, Q., Ang, S.Y., Matsumiya, B., Lungu, A., Linehan, M.M., (2017) Internet-Delivered Dialectical Behavioral Therapy Skills Training for Suicidal and Heavy Episodic Drinkers: Protocol and Preliminary Results of a Randomized Controlled Trial. *JMIR Research Protocol*, 6(10), 207.
 - **Eating Disorders:** Blood, L., Adams, G., Turner, H., & Waller, G. (2020). Group dialectical behavioral therapy for binge-eating disorder: Outcomes from a community case series. *International Journal of Eating Disorders*, 53, 1863-1867. doi: 10.1002/eat.23377
 - **Crisis Intervention:** Wilks, C. R., Valenstien-Mah H., Tran, H., King, A., Lungu, A., & Linehan, M. M., (in press). Dialectical behavior therapy skills for family members: Initial feasibility and outcomes. *Cognitive and Behavioral Practice*.
 - **General Well-Being and Self-Improvement:** D, S. (2021). *Don't Let Your Emotions Run Your Life for Teens : Dialectical Behavior Therapy Skills for Helping You Manage Mood Swings, Control Angry Outbursts, and Get Along with Others (2nd ed.)*. Oakland: New Harbinger Publications.



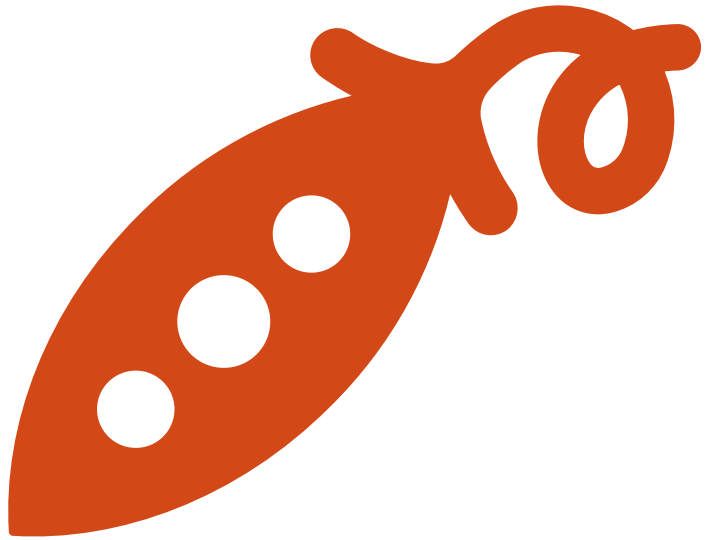


DBT FROM THE LIFESPAN PERSPECTIVE

- Initially developed for adults with severe pathologies including borderline personality disorder, self-harm, and suicidality
- Broadened its applicability to individuals with emotion regulation difficulties using transdiagnostic approaches as an effective treatment strategy
- Has become a more comprehensive treatment model across wider populations:
 - Children and adolescents
 - Interventional
 - Preventional
- The main approach in DBT for adolescents is accepting them exactly as they are while helping them to change. In addition, DBT is highly effective in reducing suicide attempts and self-harm among 12 to 18-year-old adolescents



CULTURAL ADAPTATIONS OF DBT



DBT is an evidence-based treatment that is principle-driven making it applicable for adaptations across cultural backgrounds

Adaptations involved modifications to language, metaphors, methods, and context



DBT for BORDERLINE

Personality Disorder



cbt
professionals
"feel good, live well"

THE CASE OF “JANE”

- Met DSM-5 criteria for: borderline personality disorder (met 7 out of 9 symptoms), body dysmorphic disorder, anorexia nervosa (in partial remission), binge eating disorder (in full remission), major depressive disorder (recurrent)
- Goals in DBT:
 - An improved mother-son relationship
 - Increased romantic-relationship stability
 - A more balanced view of self and others
 - Decreased emotional lability
 - Increased instances of “walking the middle path” or cognitive processing and behavior
- Completed the 26-week course of treatment – received comprehensive DBT including individual therapy, phone coaching, and groups skills training



Primary Treatment Targets for Stage 1 DBT

- Life-threatening behavior of suicidal ideation
- Therapy-interfering behaviors: homework non-compliance, lateness, absence from individual and group sessions, and underutilization of phone coaching
- Quality-of-life interfering behaviors: unhealthy relationship coping behaviors

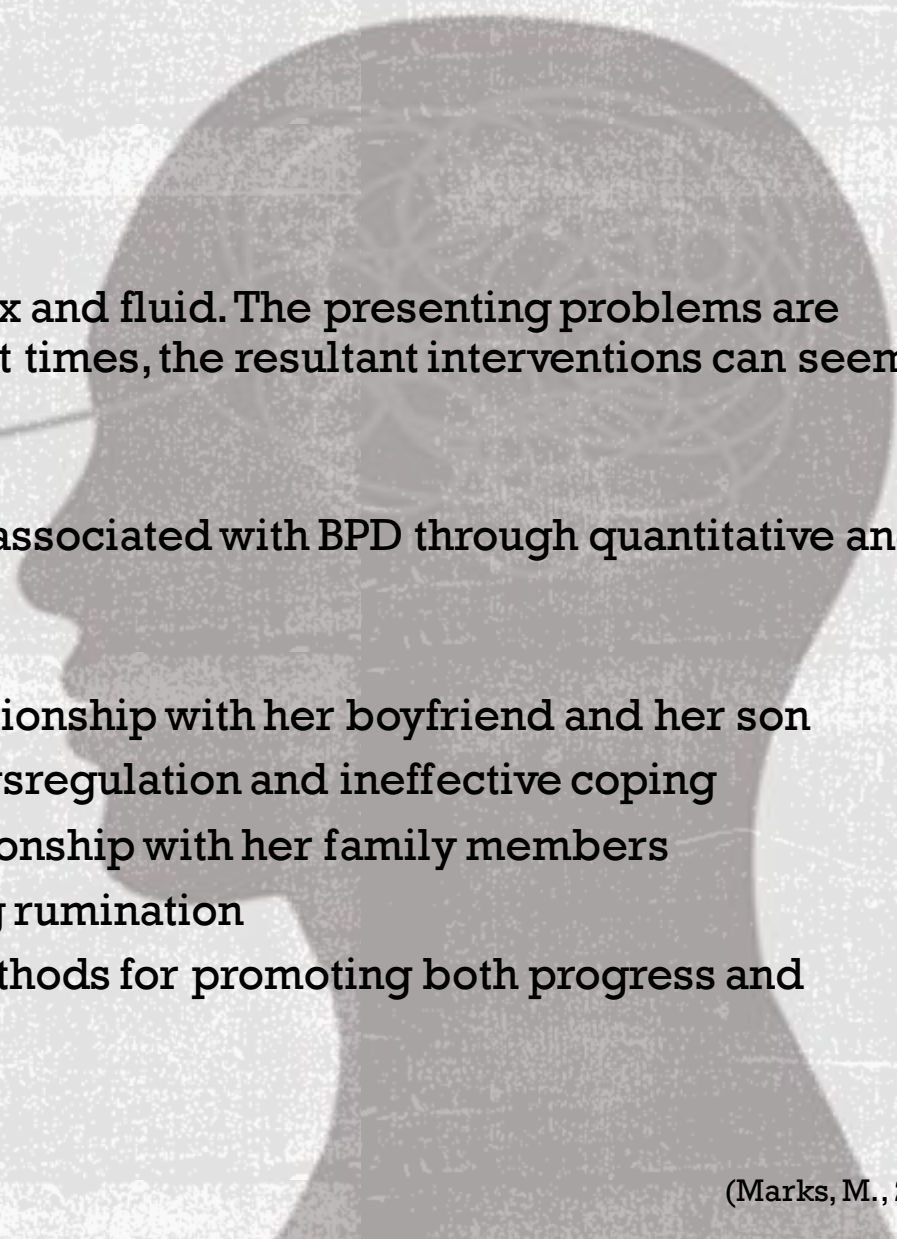
Increase in Skillful Behavior – DBT seeks to replace ineffective behaviors involved with more effective, skillful ones

- Working towards increased skillful implementation of effective behaviors in each of the four skills categories: mindfulness, interpersonal effectiveness, distress tolerance, and emotion regulation

Secondary Targets/Dialectical Dilemmas

- “Emotional Vulnerability” vs “Self-Invalidation”
- “Active Passivity” vs “Apparent Competence”
- “Unrelenting Crisis” vs “Inhibited Grieving”

Treatment Plan – developed based on assessment of the highest order treatment targets

- 
- **Course of Treatment with a client with BPD is complex and fluid. The presenting problems are often dynamic, unpredictable, and mood dependent. At times, the resultant interventions can seem scattered and disorganized.**
 - **Conclusion**
 - **Jane made significant progress with the problems associated with BPD through quantitative and qualitative results**
 - **Jane's goals:**
 - **Reported significant improvements in her relationship with her boyfriend and her son**
 - **Described significant reductions in emotion dysregulation and ineffective coping**
 - **Did not report substantial changes in the relationship with her family members**
 - **Reported reduced shame and self-deprecating rumination**
 - **Jane's "tightrope walk" was facilitated by DBT's methods for promoting both progress and maintenance, change and acceptance**
 - **Reduced thoughts of suicide and self-harm**



- Marsha Linehan - The Personal Story of DBT



BORDERLINE PERSONALITY DISORDER

- Personality disorders are categorized into clusters: A, B, and C. Borderline Personality Disorder (BPD) is in Cluster B which includes dramatic, impulsive, exploitative, and erratic features. **BPD is a pattern of instability in interpersonal relationships, self-image, and affects, and marked impulsivity.**
 - Median prevalence of 2.7%
 - More common in women than in men
 - More common in younger than in older
 - Most personality disorders begin in the teen years when personality develops and matures. Almost all people diagnosed with BPD are above the age of 18
 - Physical and sexual abuse, neglect, hostile conduct, and early parental loss or separation are common in the childhood history
 - The Mclean Screening Instrument (MSI-BPD) is used to screen for BPD
 - Patients with BPD waver between neurosis and psychosis, and they have extraordinarily unstable affect, mood, behavior, object relations, and self-image
 - The pattern of behavior is seen in many settings around the world. Although mind and self vary cross-culturally, BPD must be evaluated considering cultural norms

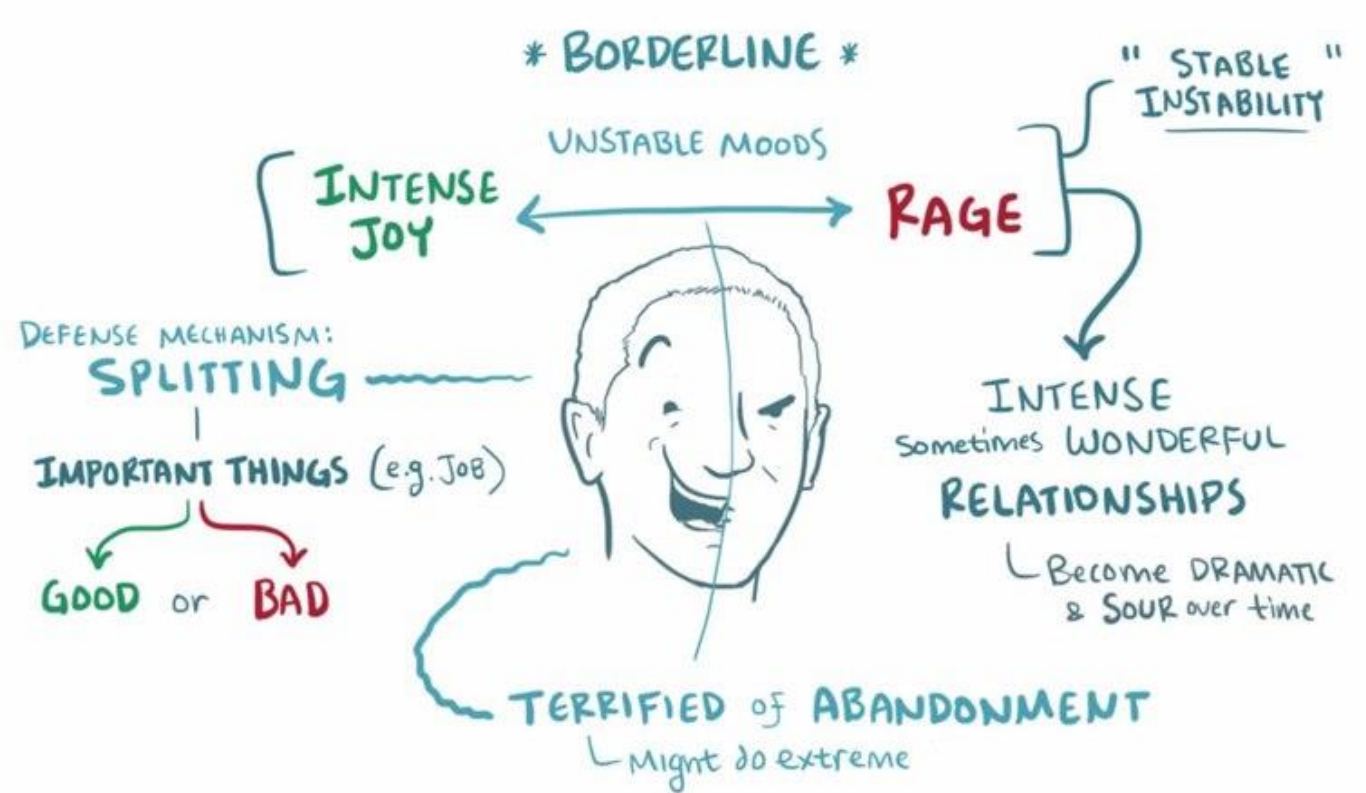


Borderline Personality Disorder

Symptoms can range from manageable to very severe and can include any combination of the following:

<p>Fear of abandonment.</p>	<p>Unstable, intense relationships.</p>	<p>Unstable self-image or sense of self.</p>
<p>Rapid mood changes.</p>	<p>Impulsive and dangerous behavior.</p>	<p>Repeated self-harm or suicidal behavior.</p>
<p>Persistent feelings of emptiness.</p>	<p>Anger management issues.</p>	<p>Temporary paranoid thoughts.</p>

<https://my.clevelandclinic.org/health/diseases/9762-borderline-personality-disorder-bpd>



https://en.wikipedia.org/wiki/File:Cluster_B_personality_disorders.webm



Instructions:

Please answer the following questions to the best of your ability.

	Yes	No
1	1	0
2	1	0
3	1	0
4	1	0
5	1	0
6	1	0
7	1	0
8	1	0
9	1	0
10	1	0

Developer Reference:

Zanarini, M. C., Vujanovic, A. A., Parachini, E. A., Boulanger, J. L., Frankenburg, F. R., & Hennen, J. (2003). A screening measure for BPD: the McLean Screening Instrument for Borderline Personality Disorder (MSI-BPD). *Journal of Personality Disorders*, 17(6), 568–573. <https://doi.org/10.1521/pedi.17.6.568.25355>

MCLEAN SCREENING INSTRUMENT FOR BPD (MSI-BPD)

- The MSI-BPD is a 10-item self-report instrument used to screen for BPD in youth (15+) or adults
- A score of ≥ 7 indicates possible BPD



BORDERLINE PERSONALITY DISORDER DSM-5-TR DIAGNOSTIC CRITERIA

- A PERVERSIVE PATTERN OF INSTABILITY OF INTERPERSONAL RELATIONSHIPS, SELF-IMAGE, AND AFFECTS, AND MARKED IMPULSIVITY, BEGINNING BY EARLY ADULTHOOD AND PRESENT IN A VARIETY OF CONTEXTS AS INDICATED BY FIVE (OR MORE) OF THE FOLLOWING:
 1. FRANTIC EFFORTS TO AVOID REAL OR IMAGINED ABANDONMENT.
 2. A PATTERN OF UNSTABLE AND INTENSE INTERPERSONAL RELATIONSHIPS CHARACTERIZED BY ALTERNATING BETWEEN EXTREMES OF IDEALIZATION AND DEVALUATION.
 3. IDENTITY DISTURBANCE: MARKEDLY AND PERSISTENTLY UNSTABLE SELF-IMAGE OR SENSE OF SELF.
 4. IMPULSIVITY IN AT LEAST TWO AREAS THAT ARE POTENTIALLY SELF-DAMAGING (E.G., SPENDING, SEX, SUBSTANCE ABUSE, RECKLESS DRIVING, BINGE EATING).
 5. RECURRENT SUICIDAL BEHAVIOR, GESTURES, OR THREATS, OR SELF-MUTILATING BEHAVIOR.
 6. AFFECTIVE INSTABILITY DUE TO A MARKED REACTIVITY OF MOOD (E.G., INTENSE EPISODIC DYSPHORIA, IRRITABILITY OR ANXIETY USUALLY LASTING A FEW HOURS AND ONLY RARELY MORE THAN A FEW DAYS).
 7. CHRONIC FEELINGS OF EMPTINESS.
 8. INAPPROPRIATE, INTENSE ANGER OR DIFFICULTY CONTROLLING ANGER (E.G., FREQUENT DISPLAYS OF TEMPER, CONSTANT ANGER, RECURRENT PHYSICAL FIGHTS).
 9. TRANSIENT, STRESS-RELATED PARANOID IDEATION OR SEVERE DISSOCIATIVE SYMPTOMS.

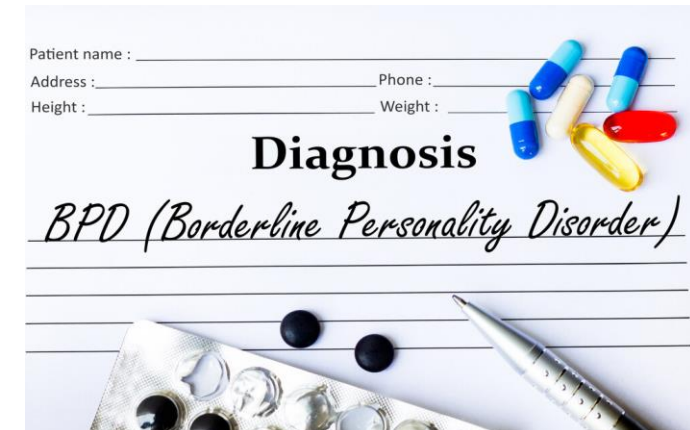


Development and Course

- Typically thought as an adult-onset disorder
- Symptoms seen in adolescents as young as 12 or 13 years old
- Stable remissions of 1-8 years are very common
 - Impulsive symptoms remit the most rapidly
 - Affective symptoms remit at a slower rate
- Lack of recovery associated with supporting oneself on disability benefits and suffering from poor physical health

Differential Diagnosis

- Depressive and bipolar disorders
- Separation anxiety disorder in adults
- Other personality disorders
- Personality change due to another medical condition
- Substance use disorders
- Identity problems



QUESTIONS TO CONSIDER



- 1. What are your thoughts on the use of mindfulness as a treatment for mental health problems?
- 2. Besides borderline personality disorder, what other area would you consider DBT to be effective?
- 3. Would you utilize DBT in your future practice? If so, why? If not, why not?



REFERENCES

- American Psychiatric Association. (2022). Borderline personality disorders. In *Diagnostic and statistical manual of mental disorders* (5th ed., text rev.).
- Behavioral Research & Therapy Clinics (n.d.) Dialectical behavior therapy. University of Washington Center for Behavioral Technology. Retrieved October 28, 2023, from <https://depts.washington.edu/uwbrtc/about-us/dialectical-behavior-therapy/#:~:text=Introduction,psychological%20treatment%20for%20this%20population>.
- Boland, R., Verduin, M., & Ruiz, P. (2022). *Kaplan & Sadock's Synopsis of Psychiatry* (12th ed.). Philadelphia, PA: Wolters Kluwer.
- Budak, M., Kocabas, E., & Goksu, H. (2020). Dialectical behavioral therapy from the lifespan perspective. *Current Approaches in Psychiatry*, 12(2), 287-298. doi: 10.18863/pgy.598548
- Eeles, J. & Walker, D. (2022). Mindfulness as taught in dialectical behaviour therapy: A scoping review. *Clinical Psychology & Psychotherapy*, 29(6), 1843-1853. <https://doi.org/10.1002/cpp.2764>
- Haft, S., O'Grady, S., Shaller, E., & Liu, N. (2022). Cultural adaptations of dialectical behavior therapy: A systematic review. *Journal of Consulting and Clinical Psychology*, 90(10), 787-801. <https://doi.org/10.1037/ccp0000730>



REFERENCES CONT.

- Lee, R., Harms, C. & Jeffery, S. (2022). The contribution of skills to the effectiveness of dialectical behavioral therapy. *Journal of Clinical Psychology*, 78, 2396-2409. <https://doi.org/10.1002/jclp.23349>
- Linehan, M. & Wilks, C. (2018). The course and evaluation of dialectical behavior therapy. *The American Journal of Psychotherapy*, 69(2), 97-110. <https://doi.org/10.1176/appi.psychotherapy.2015.69.2.97>
- Marks, M. (2022). A short-term training clinic model for dialectical behavior therapy (DBT) in treating borderline personality disorder (BPD): The case of “Jane”. *Pragmatic Case Studies in Psychotherapy* 18(1), 1-93.
- Salsman, N. & Linehan, M. (2006). Dialectical-behavioral therapy for borderline personality disorder. *Primary Psychiatry* 13(5), 51-58.
- Washburn, M., Rubin, A., & Zhou, S. (2018). Benchmarks for outpatient dialectical behavioral therapy in adults with borderline personality disorder. *Research of Social Work Practice* 28(8), 895-906. <https://doi-org.frontier.idm.oclc.org/10.1177/1049731516659363>
- Wheeler, K. (2020). *Psychotherapy for the advanced practice psychiatric nurse* (3rd ed.), New York, NY: Spring Publishing Company.

