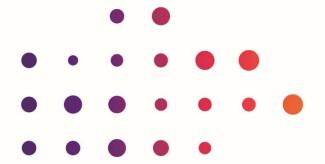




Dialectical Behaviour Therapy (DBT) Informed Interventions for Borderline Personality Disorder (BPD)

Mrs Marianne Weddell Clinical Specialist / Clinical Manager Spectrum











DBT Informed Practice Roadmap

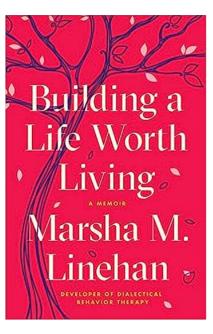
- When doing DBT be guided by:
 - DBT Theory
 - DBT Principles and functions
 - The DBT therapeutic stance
 - DBT Treatment structure
 - The use of DBT modes
 - A shared commitment to working on agreed upon treatment targets with your client







Overarching goal of DBT: "Building a life worth living"



- "It is hard to be happy without a life worth living. This is a fundamental tenet of DBT. Of course, all lives are worth living in reality. No life is not worth living. But what is important is that you experience your life as worth living – one that is satisfying, and one that brings happiness."
- Marsha M. Linehan





Origins of DBT

- Linehan created DBT in the 1990's as the first evidence based treatment for chronically suicidal women who did not respond to traditional therapies
- DBT has evolved into a treatment for multiproblem, high risk, hard to engage clients with core emotional dysregulation e.g. eating disorders, Alcohol and Other Drugs





An Effective treatment for BPD

- DBT and is shown to:
 - Reduce crisis presentations
 - Reduce inpatient days
 - Less & less severe para-suicidal and suicidal behaviours
 - Greater treatment retention
 - Better social adjustment and pro social behaviour
 - Less anger, less extreme emotions, better emotion regulation







What the Heck is DBT



https://www.youtube.com/watch?v=Stz--d17ID4





How does DBT work in a nutshell

- DBT conceptualises chronic emotion dysregulation as the core pathology in BPD that creates skills deficits in the client
- DBT targets modifying cognitions, emotions and behaviours following a hierarchy that prioritises
 - Life interfering behaviour
 - Therapy Interfering Behaviour
 - Quality of life Interfering Behaviour
- All of the DBT strategies are designed in one way or another to enhance the collaborative working relationship and help the client improve their functioning







Bio Social Theory

Biological dysfunction in the emotional regulatory

pathways

+

Invalidating social environment

=

Pervasive emotion dysregulation



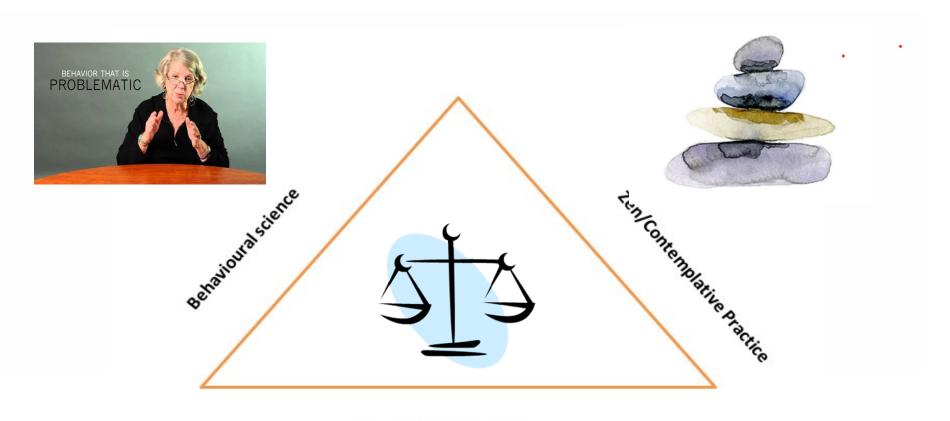
Professor Alan: Fruzzetti

https://www.youtube.com/watch?v=EjdNiOsFLik





The underlying principles of DBT



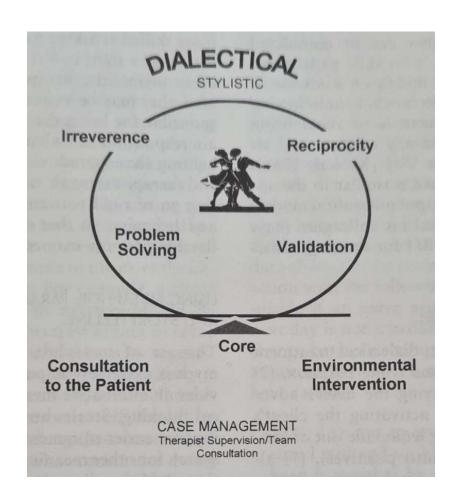
Dialectical Philosophy





DBT Therapeutic Stance:

- A deliberately dialectical therapeutic stance
- Reciprocal & irreverent communication
- Balancing acceptance and change







DBT Treatment Functions

- 1. Enhanced capabilities (Skills Group Training)
- 2. Improved motivation (Individual Therapy: establishing commitment, identifying primary targets and goals with Chain & Solution Analysis)
- **3. Generalising of skills (Phone coaching, systems, natural environment)**
- 4. Improve and Enhance therapist skills (Consultation Team, supervision, education)
- **5. Structure the environment (Ancillary Treatment:** setting, system structures and families/significant others)



DBT: Treatment Modes

- Weekly
 - Individual therapy session
 - Skills training groups
 - Consultation team & supervision
- Telephone coaching
- Ancillary Supports



Mindfulness
non-judgmental
awareness of
the present
moment.

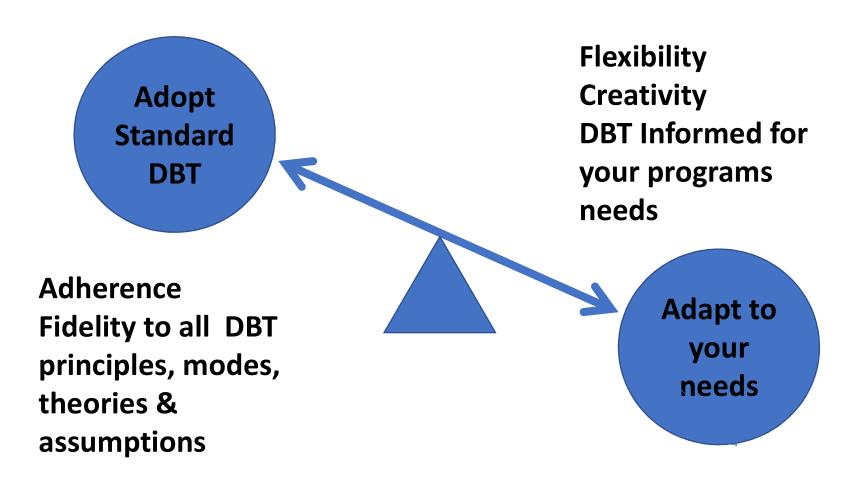
Distress
Tolerance
handling crisis with
greater calm and
acceptance to
improve the
outcome.

Emotion
Regulation
changing undesired
emotions and
reducing
vulnerability to
them.

Interpersonal Effectiveness getting more needs met while preserving both relationships and self-respect.



To Adopt or Adapt DBT



Linda Dimeff, Shireen Rizvi & Kelly Koerner (2021)



DBT Informed Practice: individual

- Identify personal treatment goals
 - E.g. To gain more skills to manage emotions and distress in family relationships
- Use the principles and functions of DBT in the modes that you can deliver
 - E.g. 1:1 individual sessions in which you teach skills that match the skills deficits of that have impacted on the clients life
 - Highly conflictual relationship---Interpersonal Effectiveness (DEARMAN GIVE FAST)
 - Frequent Self harm--- Distress Tolerance (Distract, Self Soothe)

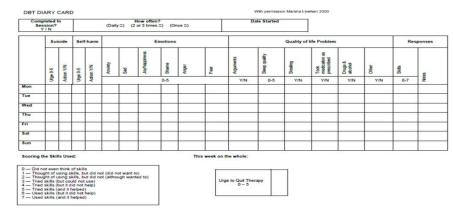






DBT Individual Therapeutic Tools

Diary Cards



Skills

5 SENSES



SIGHT



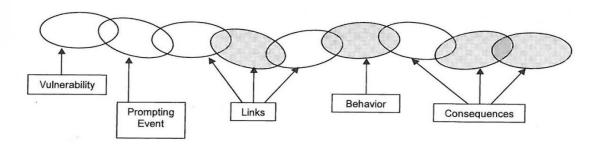


SMELL





Chain Analysis







Chain Analysis Video



https://youtu.be/-oAi0k5BTRI





DBT Informed: Program/service intervention

Given what we what you know about DBT how can you meet these functions in your program/service?

- Enhance Capabilities (.....) Skills Group
- Improve motivation (.....) *Individual Therapy*
- Generalisation of Skills (.....)*Phone coaching, Homework*
- Improving and enhancing therapists skills (.......)
 Consultation Group
- Structure the environment (.....) Systems, families





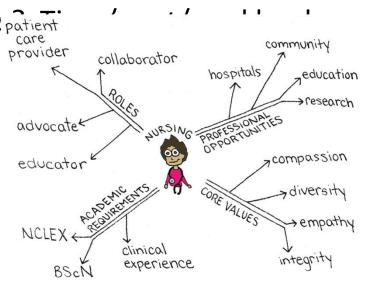
Your Service Model

Function	Structure
Enhanced Capabilities	e.g. Brief DBT Skills group (community setting)
Improved motivation	DBT Informed Individual session (AMHT)
Generalisation of Skills	After hours services using a DBT informed crisis plan
Improving & enhancing therapist capabilities	Supervision group Education sessions
Structuring the environment	Comprehensive program in Youth Team



Creating & delivering a DBT service

- Identify local needs and how DBT would fit into your service culture
- Planning with reality acceptance
 - What is possible?
 - How to troubleshoot barrier patient
- Get commitment
 - leadership engagement
 - Secure resourcing
- Put the plan into action
 - Set Dates
 - Plan for sustainability







Resources

