



South Shore Academy

Midwest Center for Youth and Families
South Shore Academy
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What is Dialectical Behavioral Therapy?

Dialectical Behavioral Therapy (DBT) is a fast growing treatment method for Borderline Personality Disorder (BPD). DBT was formulated from Cognitive Behavioral Therapy (CBT) and involves individual and group therapy work. Originally created to work in an outpatient setting, DBT can be modified to work in inpatient and residential treatment programs. Origins for DBT are credited to Marsha Linehan in 1971. It was developed to work with chronically suicidal borderline personality disorder patients. It is now used to treat a variety of mental health disorders, including substance abuse, anxiety disorders, eating disorders, post-traumatic stress, bipolar and panic disorders.



The premise behind DBT is that once skills are learned, the traits of the patient's disorder diminish, creating for them—a *life worth living*. Skills training is at the heart of DBT success. Patients with borderline personality disorder often live in the past or the future—creating unhappiness in the present. The 4 core skill sets taught in DBT include:

- **Mindfulness:** Patients learn to pay attention without being judgmental and how to be fully in the present moment.
- **Emotion Regulation:** Patients develop a variety of skills to reduce vulnerabilities, change negative emotions, and become better problem solvers.
- **Distress Tolerance:** Patients learn dysfunctional behaviors are responses to emotional pain. They learn how to navigate through crisis and how to accept reality. They also learn this is not a cure—but rather a technique used to survive a crisis.
- **Interpersonal Effectiveness:** Patients learn to identify their feelings and how to ask for what they need, as well as how to say “no” and manage conflict—all while maintaining their self-respect.

Once these core skills are learned, DBT-trained therapists help patients apply what is learned in everyday life situations, by giving them feedback, reinforcement and practice.

Why Does DBT Work?

DBT seeks to validate feelings and problems. It balances acceptance, by challenging patients to make productive changes in their lives. Studies have shown that DBT reduces the rate of self-injury and suicide attempts. It works because patients can manage their issues—without resorting to self-defeating behaviors.

Joel Paris (2006) combined several recent advances in the treatment of BPD clients. He looked at DBT therapy, cognitive therapy, psychodynamic therapies, group therapy, family psycho-education, psychotherapy efficacy in relation to long-term outcomes, and different medications used to treat BPD clients. With relation to DBT therapy, Paris found that 90% of DBT patients stayed in therapy for a full year. This finding is significant due to the BPD population and its lack of compliance with treatment. While other forms of cognitive therapy have been found less effective, cognitive behavioral therapy was equivalent to treatment as usual—and there was no reduction in self-mutilation with BPD clients.

Why Does DBT Work in a Residential Setting?

In a highly structured program, patients know what to expect—and the DBT concepts and skills are constantly being reinforced. A residential setting removes outside distractions and allows patients concentrate solely on learning new skills, including how to:

- Regulate some of their up and down emotions
- Handle hard situations
- Get what they want effectively
- Interact with others, while learning as a group

It is a 24 x 7 opportunity to learn—while being in a safe environment. When done in a hospital-based, residential treatment program, medications are also monitored for longer periods of time. An intensive, residential treatment program is designed to promote stabilization—and produce long-term treatment gains.



How Do You Evaluate an Effective DBT Residential Program?

As with any evaluation of residential treatment, being able to schedule tours, visit the facility, talk with staff, and learn about the treatment program are all of key importance. To evaluate a DBT program, ask if DBT skills are taught throughout the entire day—or merely provided once a day or once a week. Mindfulness activities can start in the morning by brushing teeth! Ask how all staff members are trained in the use of DBT. Here is a short list of what to look for in a good DBT program:

- 24-hour onsite staff trained in DBT (including behavioral health care workers, nurses, teachers, and therapists)
- DBT skills groups run by trained DBT therapists
- Daily mindfulness activities and groups
- Resident's level groups to consequences are based on DBT concepts
- On-call therapists 24 hours a day, 7 days a week
- Individual therapy provided by trained DBT therapists
- Weekly staff meetings for all DBT staff
- Intense family involvement and education

For more information about our residential DBT programs, please contact Kim Lahman, Director of Business Development, by phone 219-766-2999, Ext. 110, or email Kim.Lahman@uhsinc.com.



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