Adapted Dialectical Behaviour Therapy for People With Intellectual Disabilities

Marnie McDermott, M.S.W. RSW
Marc Simpson, M.S.W. RSW
Jill Jones, DSW

June 22, 2010

Session Outline

- Description of the Marsha Linehan DBT Model
- Adapted DBT Model
- Group Sessions
- Adapted DBT Consultation Model
- How are we doing?
- Where do we go from here?

Marsha Linehan Dialectical Behaviour Therapy Model

Crucial Steps in DBT Treatment

- Setting the Stage
- Staying Dialectical
- Validation and Problem Solving
- Balancing Interpersonal Communication Styles
- Consultation-to-the-Patient Strategies
What is the Goal of DBT Treatment?

- DBT is a comprehensive treatment approach that is most effective when it incorporates all aspects of DBT.
- Skills derived from DBT can either confuse or help unless understood in context – the individual’s context and the context of BPD theory.
- Encouraging use of skills for change.

Marsha Linehan Dialectical Behaviour Therapy Model

**SPECIFIC GOALS**

**BEHAVIOURS TO DECREASE**

1. **Interpersonal Chaos:** intense, unstable relationships, dread over relationships, avoid abandonment.
2. **Labile emotions:** moods, emotions, extreme sensitivities.

3. **Impulsiveness:** problems with alcohol, drugs, eating, spending, sex, etc.
4. **Confusion about self:** problems experiencing or identifying a self, sense of emptiness.
Marsha Linehan Dialectical Behaviour Therapy Model

SPECIFIC GOALS

BEHAVIOURS TO INCREASE

1. Interpersonal Effectiveness Skills:
   to get what one wants and needs

1. Interpersonal Effectiveness Skills
   - Getting What you Want: DEAR MAN
   - Keeping the Relationship: GIVE
   - Keeping Your Respect for Yourself: FAST

2. Emotion Regulation Training:
   enhancing control of emotions
2. Emotion Regulation Training
- Understand emotions you experience
- Reduce emotional vulnerability
- Decrease emotional suffering
- Reduce vulnerability to negative emotions: PLEASE MASTER

Marsha Linehan Dialectical Behaviour Therapy Model

3. Distress Tolerance Training:
   learning to tolerate distress

3. Distress Tolerance Training
- Wise Mind ACCEPTS
- Self soothing – all senses
- IMPROVE the Moment
- Pros and Cons
- Radical acceptance
- Turning the Mind
- Maintaining an attitude of willingness as opposed to willfulness
Marsha Linehan Dialectical Behaviour Therapy Model

4. Core Mindfulness Training:
   learning to go within to find oneself and on learning to observe oneself

4. Core Mindfulness Skills

- Diary Cards
- States of Mind: Reasonable Mind, Emotional Mind and Wise Mind
- ‘What’ Skills: Observe, Describe and Participate
- ‘How’ Skills: Non-judgmentally, One-mindfully and Effectively

Adapted – DBT

- 2008: Adapted-DBT (A-DBT) training is initiated sponsored by the Central East Network of Specialized Care (CNSC)
- Spring 2009: Two A-DBT groups begin, one in York Region and one in Simcoe County
Why A-DBT?

- Focus of the CNSC is to enhance service to adults with a developmental disability who need specialized care for co-existing mental health and or/ behavioural issues.

- A-DBT was seen as a service which was lacking for people with specialized treatment needs.

Why A-DBT?

- Biosocial theory: emotional dysregulation is a product of biological vulnerabilities & invalidating environment (Lew, Matta, Tripp-Tebo & Watts).

- Intellectual disabilities = Biological vulnerability and commonly invalidating environments.

Why A-DBT?

- DBT is an evidenced based practice for people with Borderline Personality Disorders.

- DBT application for people with intellectual disabilities was developed by The Bridge of Central Massachusetts and subsequently studied for efficacy. Findings were encouraging.
Training
- A-DBT training began with clinicians studying the DBT model. Skills training manual (Linehan) and online training through Behaviour Tech were the primary training methods of skill development.

- Dr. Lew (developer of the Bridge Program) was hired to provide two-day training workshop and ongoing consultation.

Training (cont’d)
- Initially weekly and then ongoing monthly clinical consultation with Dr. Lew (in Florida) via videoconference, was initiated in 2008.

- Dr. Lew shared some curriculum that the Bridge Program had adapted from Linehan’s skills training manual; however, not an entire adapted curriculum.

Curriculum Development
- Simcoe County DBT group began curriculum development in the Spring of 2009.

- The group leaders determined that the curriculum model would best be developed in progress.

- Curriculum developed weekly based on group progress.
Adapted DBT Group Therapy Session Agenda

- Mindfulness Exercise
- Sharing of Week/ Homework Review
- Break
- Teaching of new material/skills and homework
- Closing Mindfulness Exercise

Logistics of Group Sessions

- Three leaders: Therapist, Co-Therapist, Observer
- 5-7 Group members
- 2.5-hour group sessions, once weekly
- 1 staff person per group members
  - Staff persons to sit on sidelines of group and are to be silent observers
- 9-10 week sessions, Break (2-3 weeks), then resume

What is Mindfulness?

Definition:

Mindfulness is knowing what you do while you are doing it on purpose. It is paying attention in a particular way on purpose.
Sharing of week/ homework review

- Take up homework from previous week
- Individual review of how the week was, were skills used, how were issues resolved, any positive moments to share
- Feedback from group

Break

- 10-15 minutes
- Water and snacks provided
- Group members can socialize

Teaching of new material/ skills and homework

- Skills taught include:
  - Core Mindfulness Skills
  - Interpersonal Effectiveness Skills
  - Emotion Regulation Skills
  - Distress Tolerance Skills
- Assign homework that corresponds to skill taught to be completed by next group session
Core Mindfulness Skill Teaching
By Marsha Linehan

- **TAKING HOLD OF YOUR MIND: “WHAT SKILLS”**
  - **OBSERVE:** JUST NOTICE THE EXPERIENCE. Notice without getting caught in the experience. Experience without reacting to your experience.
  - Have a 'TEFLON MIND,' letting experiences, feelings, and thoughts come into your mind and slip right out.
  - **CONTROL** your attention, but not what you see. Push away nothing. Cling to nothing.

Core Mindfulness Skill Teaching
By Marsha Linehan

- Be like a guard at the palace gate, ALERT to every thought, feeling, and action that comes through the gate of your mind.
- Step inside yourself and observe. WATCH your thoughts coming and going, like clouds in the sky. Notice each feeling, rising and falling, like waves in the ocean. Notice exactly what you are doing.
- Notice what comes through your SENSES-your eyes, ears, nose, skin, tongue. See others’ actions and expressions. “Smell the roses”

Core Mindfulness Skill Teaching
By Our Group

- **The “What” Skills**
  - The goal is to develop a lifestyle of participation with awareness.
  - **Observing** – Attending to events, emotions and other behavioural responses. The individual needs to experience events in the moment.
Core Mindfulness Skill Teaching
By Marsha Linehan

- **DESCRIBE**: PUT WORDS ON THE EXPERIENCE. When a feeling or thought arises, or you do something. Acknowledge it. For example, say in your mind, "Sadness has just enveloped me." ... or "Stomach muscles tightening" ... or A thought 'I can't do this' has come into my mind." ... or 'walking, step, step, step..."

Core Mindfulness Skill Teaching
By Our Group

- **Describing** – Applying verbal labels to behavioural and environmental events. The person learns not to take emotions and thoughts literally. The individual needs to identify thoughts as thoughts, and outside events as events. There has to be a separation of the thoughts from the events the person is experiencing.

Core Mindfulness Skill Teaching
By Marsha Linehan

- **PARTICIPATE**: Enter into your experiences. Let your self get involved in the moment, letting go of ruminating. BECOME ONE WITH YOUR EXPERIENCE, COMPLETELY FORGETTING YOURSELF.

- **ACT INTUITIVELY** from wise mind. Do just what is needed in each situation- a skillful dancer on the dance floor, one with the music and your partner, neither willful nor sitting on your hands.
By Marsha Linehan

- Actively PRACTICE your skills as you learn them until they become part of you, where you use them without self-consciousness. PRACTICE:
  - 1. Changing harmful situations.
  - 2. Changing your harmful reactions to situations.
  - 3. Accepting yourself and the situation as they are.

By Our Group

- Participating – The individual participates without self-consciousness. Actions are spontaneous. The interactions between the individual and the environment are smooth and based in part on habit. The individual participates with attention.

Core Mindfulness Skill Teaching

- TAKING HOLD OF YOUR MIND: “WHAT” SKILLS
  - OBSERVE
    - * JUST NOTICE THE EXPERIENCE
    - * "TEFLON MIND"
    - * CONTROL
    - * ALERT
    - * WATCH
    - * SENSES
Core Mindfulness Skill Teaching
By Our Group

- **DESCRIBE**
  - * PUT WORDS ON THE EXPERIENCE
  - * PUT EXPERIENCES INTO WORDS

- **PARTICIPATE**
  - * BECOME ONE WITH YOUR EXPERIENCE, COMPLETELY FORGETTING YOURSELF
  - * ACT INTUITIVELY
  - * PRACTICE, PRACTICE

Sample Mindfulness Exercises

- Observe your Breath
- Listening to Music
- Counting your Breath
- Poster Cards
- Laughing Exercise

DBT Consultation Model

- Monthly sessions with Dr. Lew via videoconferencing

- **Set Agenda:** Mindfulness exercise, updates from each group, Teaching and Case Consultation
DBT Consultation Model

- Supervision for the groups
- Sharing of resources
- Up-to-date material
- Share, what works and what doesn’t

How are we doing?

- Currently six people in the group
- One member dropped out of group early on
- One member was required to be removed from the group due to psychiatric decompensation.

Qualitative Data

- Four data points were collected: parasuicidal behaviours, physical aggression, verbal aggression and hospitalizations.
- 5 respondents
- 4 of the respondents had a reduction in behaviours by 50 percent
- One respondent had an increase in physical and verbal aggression due to diagnosis of a heart condition in the past 8 months
Participant Feedback

Q: Do you think that being a part of A-DBT group sessions has improved your quality of life? **YES = 5 / NO = 0**

Q: Has being a part of A-DBT group helped you to manage/control your emotions? **YES = 5 / NO = 0**

Participant Feedback

Q: Has being part of A-DBT group helped you to get along better with others? **YES = 4 / NO = 1**

Q: Since being part a part of A-DBT group, have your thoughts of self harm... **INCREASED =0 / DECREASED= 5**

Participant Feedback

- “I like getting together with the group”
- “I think this group is learning me a lot. I like being with others. And I like coming every Thursday. I thank all the staff and all the others that come. I hope everyone will think of Bob when he goes into the hospital for his surgery in a month. Thanks A lot.”
- “I like come but it hard to stay busy. I have a.d.h.d and there is no hands on things.”
- “I like learning emotions and how to control my emotions. I also like the cookies!”
Staff Feedback

Q: Do you feel that the individual you support has made improvements in their quality of life since starting the A-DBT group sessions? **YES = 5 / NO = 0**

- "Tom has been able to use the skills learned and by the staff being here they have used to help."

Staff Feedback

- "This individual has been able to come with situations much better using skills to control her behaviour. This enables Sarah to have good days so she does not lose the opportunity to go out."

Staff Feedback

Q: Do you think this person has been better able to manage/control their emotions? **YES = 5 / NO = 0**

- "Sarah appears to have some self-growth. On occasion she has paused and with assistance been able to communicate verbally her struggle."
Staff Feedback

“Before she would shutdown immediately. That may happen from time to time. She is willing to discuss her feelings/thoughts.”

Staff Feedback

Q: Has this person improved how they are able to get along with others?

- **YES = 4 / NO = 1**
  “Andrea is improving weekly being able to validate her feelings and discuss them with staff and housemates. She has also shown great improvement in being empathetic to others and situations.”

Staff Feedback

- “Sarah still has run-ins with staff and remains bossy of peers.”
- “Susan work environment can be very busy and this carries over to home. We try hard to encourage her to try to use DBT skills.”
- “Yes, no yelling and able to talk in a calm mood.”
Staff Feedback

Q: Has this person's thoughts of self-harm (if any) increased or decreased?

- "There has been no talk of self-harm – she uses past tense."

Staff Feedback

- "Self-harm threats have decreased. It appears that she has grown over the last couple of years. DBT is new and not sure how much impact this specifically plays."
- "I believe these thoughts remain the same and are unchanged either way."

Staff Feedback

- "The group has been beneficial and opened her mind. She is more willing to listen to an explanation and when needed offer an explanation. Before she coped/handled situations by crying and/or avoiding. Non-verbal and verbal has improved."
Staff Feedback

“Susan is showing weekly improvement in controlling her emotions. She has done well learning to validate her feelings, working and talking through them and then pulling herself together. Susan has also learned how to express herself and is better able to find the words on her own to describe how she is feeling. Susan is also developing very positive relationships with all the staff as she will now share her feelings rather than waiting for (the staff) to come in.”

How are we doing? From our perspective

- The group functions as a cohesive treatment group. Rules and norms were established as required by the DBT model.

What have we learned?

- Need to go SLOW (Even slower than we expected)
- Repetition
- Laughing works well
- Have fun
- Use LARGE fonts in all materials
- “Homework isn’t fun”
What have we learned?

- Role Playing is Key
- Mindfulness is a never-ending skill development
- Don’t get stuck on conceptualizations; being able to use the skill is more important than it is to understand the concept of the skill

Adapted-DBT: Where to go from here?

- Obtain an Individual Therapist (as per Marsha Linehan’s Model)
- Train the Trainer: more trainers means potential for more group sessions offered in different locations in Simcoe County, and more people have the option to join a group
- Continue current group sessions

Resources

**Dialectical Behavior Therapy**

Resources (cont’d)


Questions?

msimpson@mhcp.on.ca
mmcdermott@clhmidland.on.ca