

BEYOND THE URGE: DBT TOOLS FOR ADOLESCENTS WHO SELF HARM

Presented by Amber Satwalekar

Goals& objectives

"Participants will learn how to apply core DBT skills-including distress tolerance, emotion regulation, interpersonal effectiveness, and mindfulness-to support teens in reducing self-injury and developing long-term emotional resilience.

this training will equip clinicians with the tools needed to foster meaningful change in adolescents struggling with self-harm."

Agenda



Introduction to DBT principles



Managing Crisis Situations



Understanding Adolescent Development & Self-Harm



Family Involvement



Building a Therapeutic Relationship



Addressing Treatment Barriers



teaching DBT Skills for Self-Harm Prevention



Ethical Consideratiions



Evaluating Progress

Introduction to DBt theory



Introduction to Dialectical Behavioral therapy- AKA DBT

- Developed by Marsha Linehan in the 1980s for chronic suicidality
- Broken VS. Stuck
- "Suffering is not a pathology; it is a part of life. The problem is not the suffering itself, but how we relate to it."
- "The goal of DBT is to help individuals create a life worth living."
- Integrates CBT, mindfulness, and acceptance
- Core Modules: Mindfulness, Distress Tolerance, Emotional Regulation, Interpersonal effectiveness



Core Principles of DB₁ Dialectical thinking Validation Radical Acceptance Behavioral Change

Principles of DBT

Holding two contradicting truths — acceptance and change.

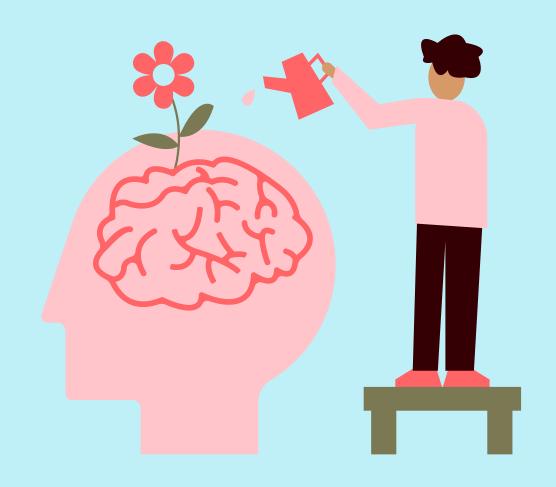
Wise Mind- Logic and Emotion

Acknowledging the adolescent's inner experience

Accepting reality fully and completely, without judgment, resistance, or trying to change it—even when reality is painful.

Teaching concrete, skill-based solutions

Utilizing DBT with Adolescents that self harm



Adapting DBT to Adolescents

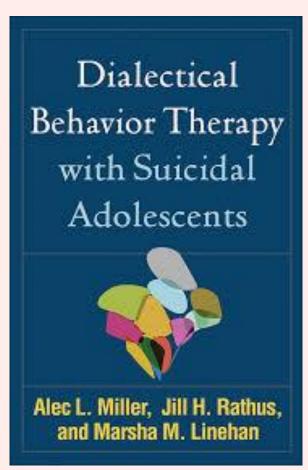
· this adolescent-focused DBT model retains the core DBT principles but includes key adaptations to better fit teens:

Developmentally appropriate language and examples
 Emphasis on emotional regulation in the context of adolescent identity formation. Restructuring Vs. Structuring.
 Greater family involvement (including parent coaching and family skills)

sessions)

- o Adjusted diary cards and shorter skill modules for attention and engagement
- · Personality Disorder Vs. Normal adolescent Development





Adolescent Development and self harm



- · Hormonal Shifts
- Prefrontal cortex still developing
- · Impulsivity



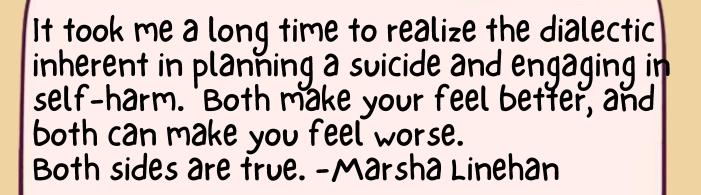
Why Do adolescents Self Harm?

Coping with trauma, anxiety, or depression

Self-punishment, emotional release, or control

Emotional dysregulation & identity formation

Peer pressure & online influences



Building a Strong Therapeutic Relationship

- trust-building: use empathy, Consistency, warmth, non-judgmental stance.
- · Validation: Show empathy and attunement. Validate emotions, not behavior.
- Collaboration: Prioritize collaboration and trust. Include adolescents in treatment planning.
- · Co-create therapy goals (e.g., reduce harm, increase skill use)
- Boundaries: Establish clear expectations and mutual respect
- Engagement: use of humor and creativity to engage



DBT Skills for Self-Harm Prevention

- · Mindfulness: Stay present and observe without judgment
- Distress tolerance: Crisis survival without making things worse
- Emotion Regulation: Label feelings, reduce vulnerability, increase positive emotions
- · Interpersonal Effectiveness: Build and maintain healthy relationships

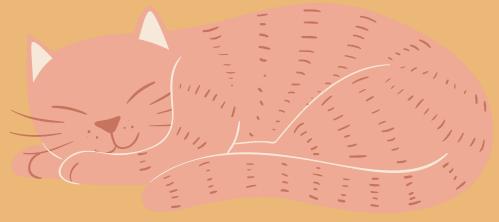


DBT Skills for Self-Harm Prevention: Mindfulness Skills

- · Mindful Breathing and Body Scan
- 5-4-3-2-1 Grounding technique
- "What" and "How" skills (Observe, Describe, Participate; Non-judgmentally, One-Mindfully, Effectively)
- Creative practices: Journaling, music, art-based mindfulness, mindfulness walks







DBT Skills for Self-Harm Prevention: Distress tolerance

- TIPP
 - temperatureIntense Exercise

 - o Paced Breathing
 - o Paired Muscle Relaxation
- Self-soothing and distraction
 Using 5 senses creating a self sooth box
 Using ACCEPTS- create distraction plan
 Activities, contributing, comparing, emotions (opposite), pushing away, thoughts, sensation
- Radical Acceptance

 - Resistance: "This isn't fair. They don't understand me. I hate them."
 Radical Acceptance: "It really sucks, and I feel disappointed. But this is the reality right now. I don't have to like it to accept it."



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What it means

How to use it

Why it Works

t - temperature

use cold to shift your body's state

Submerge face in Bowl of ice cold water, Splash cold water on your face, hold ice cubes, or use a cold compress

Activates the dive reflex, slowing heart rate and calming

the nervous system

- Intense Exercise

Engage in short, highenergy movement

Run, jump rope, do jumping jacks, or dance for 5-15 minutes

Burns off adrenaline and reduces overwhelming physical sensations tied to intense emotions

P - Paced Breathing

Slow and steady your Inhale for 4 counts, exhale for 6 (or 5/7, etc.)

Activates the calming parasympathetic nervous system and reduces panic-like symptoms

P - Paired Muscle Relaxation

tense and relax muscles one group at a time

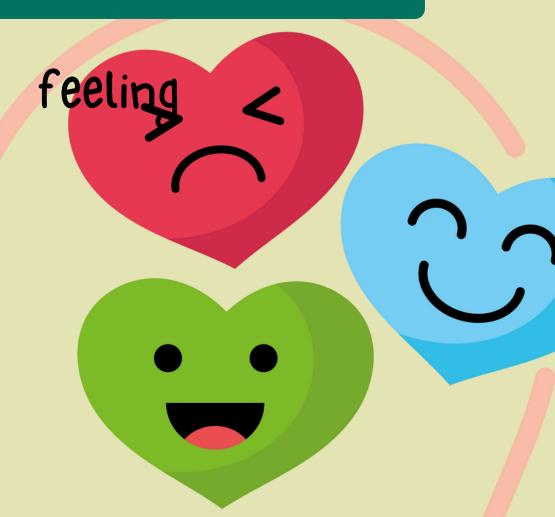
breath

Clench fists for 5 seconds, then release; repeat with other muscle groups

Grounds you in the body and releases tension

DBT Skills for Self-Harm Prevention: Emotional Regulation

- Identifying and labeling emotions- Name what you're feeling accurately (e.g., sadness vs. shame) to reduce confusion and reactivity.
- Increasing positive experiences- Build joy through small, meaningful activities every day.
- Opposite Action-Do the opposite of what the emotion urges (e.g., connect with others when feeling shame).
- Check the Facts- Evaluate whether your emotional response fits the situation-or is based on assumptions.



Skills for Self-Harm Prevention: Interpersonal Effectiveness Skills

teach assertiveness: DEAR MAN (Describe, Express, Assert, Reinforce, Mindful, Appear Confident, Negotiate)

Relationship skills: GIVE (Gentle, Interested, Validate, Easy manner)

Self-respect: FAST (Fair, Apologies, Stick to values, Truthful) Practice role-plays to reinforce

Using FAST:



F - Fair:

Be fair to yourself and the other person. Avoid blame or manipulation.

o "I get that you want to hang out and take a break, and I've felt that way too."

A - Apology (No unnecessary ones):
Don't apologize for existing, having feelings, or making a reasonable request.

o You don't say "sorry" for having boundaries.

5 - Stick to Your Values:

"But I've been trying really hard to stay on track, and skipping doesn't feel right for me."

t - truthful:

"Honestly, if I skip again, I'll feel anxious and fall behind. I don't want to do that to myself."

DBT Skills for Self-Harm Prevention: Managing Self-Harm Crises

Key Components of a Crisis Survival Plan:

- 1. Coping Skills toolbox A written or visual list of effective DBT skills (TIPP, ACCEPTS, Self-Soothing, Radical Acceptance) Include concrete, real-life examples
- 2. Personal Reasons for Living List of motivations, goals, people they care about- Photos, quotes, drawings, or meaningful affirmations
- 3. Safe Environment Plan Identify and remove harmful objects when overwhelmed. Designate safe spaces (room, trusted adult's home)
- 4. Emergency Contact List Friends, family, therapist, crisis line Include names, phone numbers, and preferred ways to reach out
- 5. Grounding and Safety Strategies
 Favorite grounding exercises (e.g., 5-4-3-2-1 senses, body scan) Sensory objects (stress ball, scented lotion, fidget)
- 6. Commitment Statement A short personal commitment to use the plan before acting on urges- "I will try 3 skills for 10 minutes before making any decisions."

0	· · · · · · · · · · · · · · · · · · ·		nach, heart racing, flushed), specific emotion	
(sadness, shame	e, anger), situations (arg	gument with a loved one) etc. should I look	out for (e.g., common links on the chain)?	
My Life Worth Living Goals: What goals (short AND long term) can I stay mindful of to help me through this isis effectively (even when it's painful)?		Crisis Survival Skills! forwhen ineffective urges show up		
		My Go-To DistractStrategies	Favorite Ways to Self-Soothe	
		Activities	Hearing	
		Contribution	Smell	
		Comparison	Taste	
		Emotions	Vision	
	~	Pushing Away	Touch/Movement	
	Skills: r skills I can practice?	Thoughts	Other CrisisSkills to Consider	
		Sensations	Pros/Cons IMPROVE (DT Handout #5) (DTHandout #9)	
		Using TIP Skills to Change Body Chemistry See Distress Tolerance HO #6 for add'linstructions. Do not use T and I if you have heart issues.		
		Temperature: Place bowl of ice water between your knees, take a deep breath and plunge your face in. Hold for at least 15 sec. Repeat as needed.		
		Intense Exercise: Do jumping jacks, squats, sprint etc. until you can't anymore. Paced Breathing: Breathe into your belly. Slow your breathing. Extend the length		
	of your exhale (ex. Inhale for count of 5, exhale for count of 7) Paired Muscle Relaxation: see DT Handout #6 for instructions			
	Things	s I Can Do to ReduceRisk in My Envir	onment	
me: Name:	People I Can Contact for Distraction or for Help Phone:			
me Clinician		Phone:		
me:		Ph	one:	
gent Care		Phone:		
	Address:	Ph	one:	
		Suicide and Crisis Lifeline: text or call 9	988	
heck outthe	DBT-RU playlist	of skills videos if you need help	practicing! youtube.com/dbtru	

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Engaging Families in DBT Treatment

Core Strategies for Family Involvement in DBT:

Psychoeducation: teach caregivers the basics of DBT (skills, principles, validation). Normalize adolescent struggles while encouraging growth (e.g., emotion dysregulation is developmentally common).

Skills training for Parents:

Offer or recommend parent groups parallel to adolescent groups.

Focus on validation, mindfulness, emotion regulation, and interpersonal skills. Parents model skills and reinforce use at home.

Family Sessions:

Scheduled as needed to address conflicts or practice skills together.

Use sessions for role-playing DEAR MAN, validation, distress tolerance. Address invalidation cycles.

Collaborative Planning: Involve family in crisis planning and behavior support strategies. Helps teens feel supported, not controlled.

Addressing treatment Common Barriers in Add Barriers

Lack of Motivation:

teens may not see therapy as helpful or may feel forced to attend.

Use validation + commitment strategies (e.g., connect therapy to their goals).

Invalidating Environments:

Family, school, or peer settings may unintentionally reinforce dysregulation. teach validation skills to caregivers and reinforce a nonjudgmental stance.

therapy Interfering Behaviors (TIBs):

Includes missed sessions, refusal to practice skills, or interpersonal conflict. Address directly in individual therapy.

Emotional Avoidance:

Adolescents may shut down or avoid emotional work. Mindfulness and distress tolerance help increase emotional exposure gradually.

Family Resistance or Burnout:

Parents may feel blamed or overwhelmed. use psychoeducation, validate their effort, and offer support resources.

Skills Generalization Issues:

teens use skills in session but not in real life. Incorporate real-life role-plays, coaching calls, and homework with family



Evaluating Progress

What to Look For:

- · Increased use of DBT skills in daily life
- Fewer target behaviors (e.g., self-harm, crises)
 Better emotional awareness and regulation
 Improved relationships and communication
 Steady attendance and participation
 Consistent use of diary cards and homework

How We track It:

- DBT diary cards

- Revisit goals regularly
 Assess skill acquisition and generalization
 Self-reports and therapist observation
 Family feedback (when applicable)
 Involve adolescents in defining success



Ethical Considerations

- · Confidentiality vs. Safety: Balancing privacy with duty to report
- · Informed Consent & Assent: Engaging both adolescent and caregiver
- Developmental Sensitivity: tailoring treatment to cognitive/emotional maturity
- · Boundaries & Dual Roles: Maintaining professional therapeutic boundaries
- · Cultural Competence: Respecting diverse backgrounds and values
- · Documentation & Supervision: Accurate records, consult regularly

Summary & Key takeaways: Bringing it all together

- DBT combines validation and change to reduce self-harm
 - Core elements: Validation, skills training, structure
 - Relationship building and trust are foundational
 - teach practical skills: mindfulness, distress tolerance, emotion regulation, interpersonal effectiveness
 - Adolescents benefit from creative, flexible adaptations
 - Involve families and address resistance compassionately
 - Ethical care and progress monitoring are essential







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