HANDOUTS

Dialectical Behavioral Therapy (DBT) in Substance Use Disorder (SUD) Treatment

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INTERPERSONAL EFFECTIVENESS HANDOUT 5 (I. E. Worksheets 4, 5) (p. 1 of 2)

Guidelines for Objectives Effectiveness: Getting What You Want (DEAR MAN)

A way to remember these skills is to remember the term **DEAR MAN**:

	Describe Express Assert
-	Beinforce (Stay) Mindful Appear Confident Negotiate
escribe	Describe the current SITUATION (if necessary). Stick to the facts. Tell the person exactly what you are reacting to.
c	"You told me you would be home by dinner but you didn't get here until 11."
Express	Express your FEELINGS and OPINIONS about the situation. Don't assume that the other person knows how you feel.
	"When you come home so late, I start worrying about you."
٨	Use phrases such as "I want" instead of "You should," "I don't want" instead of "You shouldn't."
Rssert	Assert yourself by ASKING for what you want or SAYING NO clearly. Do not assume that others will figure out what you want. Remember that others cannot read your mind.
D	"I would really like it if you would call me when you are going to be late."
N einforce	<u>R</u> einforce (reward) the person ahead of time (so to speak) by explaining positive effects of getting what you want or need. If necessary, also clarify the negative consequences of not getting what you want or need.
	"I would be so relieved, and a lot easier to live with, if you do that."
	Remember also to reward desired behavior after the fact.

(continued on next page)

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Page 2

INTERPERSONAL EFFECTIVENESS HANDOUT 5 (p. 2 of 2)

(Stay)	
Mindful	Keep your focus ON YOUR GOALS. Maintain your position. Don't be distracted. Don't get off the topic.
"Broken record":	Keep asking, saying no, or expressing your opinion over and over and over. Just keep replaying the same thing again and again.
Ignore attacks:	If another person attacks, threatens, or tries to change the subject, ignore the threats, comments, or attempts to divert you. Do not respond to attacks. Ignore distractions. Just keep making your point.
-	"I would still like a call."
Appear confident	Appear EFFECTIVE and competent. Use a confident voice tone and physical manner;
	make good eye contact.
	No stammering, whispering, staring at the floor, retreating.
N	No saying, "I'm not sure," etc.
egotiate	Be willing to GIVE TO GET. Offer and ask for other solutions to the problem. Reduce your request. Say no, but offer to do something else or to solve the problem another way. Focus on what will work.
	"How about if you text me when you think you might be late?"
Turn the tables:	Turn the problem over to the other person. Ask for other solutions.
	"What do you think we should do? I can't just stop worrying about you [or I'm not willing to]."
Other ideas:	

HANDOUT #1

INTERPERSONAL EFFECTIVENESS HANDOUT 5A

Applying DEAR MAN Skills to a Difficult Current Interaction

To turn around really difficult situations, focus the skills on the other person's behavior right now.

When other people have really good skills themselves, and keep refusing your legitimate requests or pestering you to do something you don't want to do.

Apply DEAR MAN Skills

1. <u>Describe the current interaction</u>. If the "broken record" and ignoring don't work, make a statement about what is happening between you and the person now, *but without imputing motives*.

Example: "You keep asking me over and over, even though I have already said no several times," or "It is hard to keep asking you to empty the dishwasher when it is your month to do it."

Not: "You obviously don't want to hear what I am saying," "You obviously don't care about me," "Well, it's obvious that what I have to say doesn't matter to you," "Obviously you think I'm stupid."

2. <u>Express feelings or opinions about the interaction</u>. For instance, in the middle of an interaction that is not going well, you can express your feelings of discomfort in the situation.

Example: "I am sorry I cannot do what you want, but I'm finding it hard to keep discussing it," or "It's becoming very uncomfortable for me to keep talking about this, since I can't help it. I am starting to feel angry about it," or "I'm not sure you think this is important for you to do."

Not: "I hate you!", "Every time we talk about this, you get defensive," "Stop patronizing me!"

3. <u>Assert wishes in the situation</u>. When another person is pestering you, you can ask him or her to stop it. When a person is refusing a request, you can suggest that you put the conversation off until another time. Give the other person a chance to think about it.

Example: "Please don't ask me again. My answer won't change," or "OK, let's stop discussing this now and pick it up again sometime tomorrow," or "Let's cool down for a while and then get together to figure out a solution."

Not: "Would you shut up?" "You should do this!", "You should really calm down and do what's right here."

4. <u>Reinforce</u>. When you are saying no to someone who keeps asking, or when someone won't take your opinion seriously, suggest ending the conversation, since you aren't going to change your mind anyway. When trying to get someone to do something for you, you can suggest that you will come up with a better offer later.

Example: "Let's stop talking about this now. I'm not going to change my mind, and I think this is just going to get frustrating for both of us," or "OK, I can see you don't want to do this, so let's see if we can come up with something that will make you more willing to do it."

Not: "If you don't do this for me, I'll never do anything for you ever again," "If you keep asking me, I'll get a restraining order against you," "Gosh, you must be a terrible person for not doing this/for asking me to do this."





"Meet Alex" Activity - Change Emotional Responses

Meet Alex, a 28-year-old who experiences social anxiety and often copes with his social anxiety by drinking alcohol. He has been invited to a networking event for professionals in his industry, but he's feeling extremely anxious about attending and knows that alcohol will be provided at the event. Alex knows that socializing and networking can be beneficial for his career, but his anxiety is making him want to decline the invitation and he is concerned that he won't be able to overcome his urge to drink alcohol to cope with this social anxiety.

Emotional Response: Alex's initial emotional response is overwhelming anxiety. He's worried about being judged, saying something embarrassing, or not fitting in at the event. He's also concerned that this anxiety would lead him to drink. He's inclined to decline the invitation and avoid the situation altogether.

Checking the Facts: Alex remembers the emotion regulation skills he learned. He decides to "check the facts" by examining the evidence for and against his anxiety-driven thoughts.

Thought 1: "People will judge me."

• Fact: Alex has attended similar events before and hasn't faced harsh judgment or negative experiences.

Thought 2: "I'll say something embarrassing."

• Fact: While everyone makes occasional social blunders, most people are forgiving and understanding.

Thought 3: "I won't fit in."

• Fact: Alex has interests and experiences related to his industry, which can provide common ground for conversation.

Opposite Action: After checking the facts, Alex recognizes that his anxiety-driven thoughts are largely based on cognitive distortions. To change his emotional response, he decides to apply the DBT skill of "opposite action." Instead of avoiding the networking event, he chooses to accept the invitation and actively engage in the experience.

Alex decides to plan ahead and identify some strategies to help him navigate his social anxiety and resist drinking while still enjoying social interactions:

- Alex makes a list of conversation starters related to his industry to help him initiate discussions.
- He practices deep, calming breaths and positive self-talk to boost his confidence before attending.
- He decides to bring his own non-alcoholic beverages that he enjoys.
- He plans to acknowledge his achievement and reward himself with something enjoyable that doesn't involve alcohol after the event.



At the event, when Alex feels the urge to withdraw, he makes an effort to approach others, introduce himself, and actively listen to their conversations. When he feels the urge to drink, he practices "opposite action" and other emotion regulation strategies that he's learned to manage and cope with the emotions and triggers that often lead to these urges.

Changed Emotion Response: As Alex actively participates in the networking event and engages with others, he starts to feel more relaxed and less anxious. His initial anxiety gradually diminishes as he realizes that most people are friendly and open to conversation. By the end of the event, he even feels a sense of accomplishment and connection with some of the professionals he met.

In this scenario, Alex effectively changes his emotional response from overwhelming anxiety to increased comfort and confidence by first checking the facts to challenge his distorted thoughts and then practicing opposite action by actively engaging in the situation he initially wanted to avoid. This demonstrates how DBT skills can help individuals manage and regulate their emotions in challenging social situations.



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FIGURE 4.1. Front (top) and back (bottom) of a DBT diary card. The entire back half of the card is used in skills training sessions; the front half is used in individual therapy except for the "Used Skills" column, which is also employed in skills training. Should be printed on 4" × 6" card stock (front and back).



TABLE 4.2. Instructions for Helping a Client Complete the DBT Diary Card

- 1. *Name*: Put here the client's name, initials, or clinical ID.
- 2. *Filled Out In Session?* If the card was filled out during the session, have the client circle "Y" for "yes"; otherwise circle "N" for "no."
- **3.** *How Often Did You Fill Out [This Side]?* In the past week, did the client fill out the card daily, 2–3 times, or once?
- 4. *Date Started*: Ask the client to note the first date the card was started, including year.
- 5. *Day of Week*: Instruct the client to record information for each day of the week.
- 6. Using the 0-5 Rating Scale: You'll notice that many of the columns require the client to record a numerical value from 0 to 5. This is a subjective, continuous scale intended to communicate the client's experience along a variety of behaviors or experiences. The anchor point 0 represents the absence of a particular experience (e.g., no urge); the anchor point 5 refers to the strongest degree of the experience (e.g., strongest urges imaginable).
- 7. Urges to . . . : The "Commit Suicide" column refers to any urges to commit suicide. The "Self-Harm" column refers to urges to engage self-harm or in any self-injurious behaviors. The "Use Drugs" column refers to use of any drug of *abuse* (e.g., over-thecounter meds., prescription meds., street/illicit drugs)—or, for clients not using drugs to any urge to escape.
- 8. *Highest Ratings* refers to ratings of intensity of emotional misery, intensity of physical misery or pain, and degree of joy (or happiness) experienced during the day. Have the client rate each emotion daily, using the 0–5 rating scale.
- **9.** *Drugs/Medications:* For alcohol, have the client put down how many drinks and what type of alcohol (e.g., "3" for 3 beers). For illegal drugs, have the client specify the type of drug used (e.g., heroin) and how much was used. For p.r.n./over-the-counter medications, have the client put down how many doses and what type of medication was taken. For meds. as prescribed, if taken as prescribed, have the client put a "Y" for yes; if not taken as prescribed (either too much or too little, or some medications but not others), have the client put down an "N" for no.
 - Write "ditto" marks in subsequent specify boxes, to indicate use is the same as the previous day.
 - An Easier Way: The client can use horizontal lines through rows and vertical lines through columns to indicate no use. For instance, if the

client didn't use any prescription meds. this week, a vertical line down the "Y/N" column under "Meds. as Prescribed" is OK. Or if the client didn't use alcohol, over-the-counter meds., or prescription meds. on Wednesday, then a horizontal line may be drawn through the corresponding boxes for Wednesday.

10. Actions . . . : The column "Self-Harm" refers to any intentional self-harm or suicide attempt. The "Lied" column refers to all overt and covert behaviors that mask telling the truth. It's important for the client to assume a nonjudgmental stance in completing this. Instruct the client to put the number of lies told per day in the column, and place an * in this column to signify lying on the diary card. The Used Skills (0–7) column is used to report the highest skill usage for the day. When making this rating, the client should refer to the 0–7 "Used Skills" table just under the columns.

The last two columns are optional. Two columns are for tracking specific emotions, and two are for any other behaviors you and the client want to track. Note that there is not a rating scale for these, so when you and the client are deciding what to track, also decide how to track it—for example, with a "Y," "N," a 0–5 or 0–7 scale, or by describing what and how much (i.e., "What?" and #).

- 11. *Med. Change This Week*: Instruct the client to write down any changes in prescribed medications. These changes may consist of modifications in the dosage (increase or decrease) of the medications (e.g., increase from 5 mg to 10 mg; a decrease from 20 mg to 10 mg), the dropping of a medication, or the addition of a new medication. If there is insufficient room, the client should describe these on a separate piece of paper.
- **12.** *Homework Assigned and Results This Week*: Have the client record any behaviors assigned for the week, describe what was done, and indicate what the results were.
- 13. Urges to Use (0-5) and Urges to Quit Therapy (0-5): Have the client rate the intensity of *current* urges to engage in these behaviors, at the beginning of the session.
- 14. Skills Focus This Week: Instruct the client to write down any skills that are specifically focused on, used, or practiced during the week. This space can also be used to write down what skills need more focus during the week.
- **15.** Belief I Can Change or Regulate . . . : Using the same 0–5 rating scale, rate your belief regarding your ability to change or regulate your *emotions*, *actions*, and *thoughts* as you start your therapy session.

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DBT DIARY CARD

SAMPLE ONLY

DATE: _____

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Observe	М	Т	W	Th	F	Sa	Su	Pros and Cons of Changing Emotions	М	Т	W	Th	F	Sa	Su
Describe	М	Т	W	Th	F	Sa	Su	Check the Facts	М	Т	W	Th	F	Sa	Su
Participate	М	Т	W	Th	F	Sa	Su	Opposite to Emotion Action	М	Т	W	Th	F	Sa	Su
Nonjudgmentally stance	М	Т	W	Th	F	Sa	Su	Problem Solving	М	Т	W	Th	F	Sa	Su
One-Mindfully	М	Т	W	Th	F	Sa	Su	Accumulating Positive Emotions in short term	М	Т	W	Th	F	Sa	Su
Effectively	М	Т	W	Th	F	Sa	Su	Accumulating Positive Emotions in long term	М	Т	W	Th	F	Sa	Su
Loving Kindness	М	Т	W	Th	F	Sa	Su	Build Mastery	М	Т	W	Th	F	Sa	Su
Balancing Doing Mind and Being Mind	М	Т	W	Th	F	Sa	Su	Cope Ahead	М	Т	W	Th	F	Sa	Su
Walking the Middle Path to Wise Mind		Т	W	Th	F	Sa	Su	PLEASE Skills	М	Т	W	Th	F	Sa	Su
Pros and Cons of Practicing Mindfulness	М	Т	W	Th	F	Sa	Su	Nightmare Protocol	М	Т	W	Th	F	Sa	Su
Mindfulness of Pleasant Events	М	Т	W	Th	F	Sa	Su	Sleep Hygiene	М	Т	W	Th	F	Sa	Su
INTERSONA	AL EFF	ECTIVI	ENESS	(IE) SK	ILLS			Mindfulness of Current Emotions	М	Т	W	Th	F	Sa	Su
Objective Effectiveness: <i>DEAR</i> <i>MAN</i>	М	Т	W	Th	F	Sa	Su	Managing Extreme Emotions	М	Т	W	Th	F	Sa	Su
Relationship Effectiveness: GIVE	М	Т	W	Th	F	Sa	Su	Troubleshooting ER skills	М	Т	W	Th	F	Sa	Su
Self-respect Effectiveness: FAST	М	Т	W	Th	F	Sa	Su	DISTRESS TO	OLER	ENCE	(DT) Sl	KILLS		-	
Options for intensity	М	Т	W	Th	F	Sa	Su	STOP skill	М	Т	W	Th	F	Sa	Su
Pros and Cons of Using IE skills	М	Т	W	Th	F	Sa	Su	Pros and Cons of Using DT Skills	М	Т	W	Th	F	Sa	Su
Prioritizing Goals	М	Т	W	Th	F	Sa	Su	TIP Skills	М	Т	W	Th	F	Sa	Su
Troubleshooting IE Skills	М	Т	W	Th	F	Sa	Su	Distract with Wise Mind ACCEPTS	М	Т	W	Th	F	Sa	Su
Finding and Getting People to Like you	М	Т	W	Th	F	Sa	Su	Self-Soothing	М	Т	W	Th	F	Sa	Su
Mindfulness of Others	М	Т	W	Th	F	Sa	Su	IMPROVE the Moment	М	Т	W	Th	F	Sa	Su
Ending Relationships	М	Т	W	Th	F				М	Т	W	Th	F	Sa	Su
Think and Act Dialectically	М	Т	W	Th	F	Sa	Su	Sensory Awareness	М	Т	W	Th	F	Sa	Su
Self-Validation	М	Т	W	Th	F	Sa	Su	Radical Acceptance	М	Т	W	Th	F	Sa	Su
Validating others	М	Т	W	Th	F	Sa	Su	Turning the Mind	М	Т	W	Th	F	Sa	Su
Changing Behavior with Reinforcement	М	Т	W	Th	F	Sa	Su	Willingness	М	Т	W	Th	F	Sa	Su
DISTRESS TOLE	RANCE	WHEN	CRISI	S IS AD	DICTI	ON		Half-Smiling and Willing Hands	М	Т	W	Th	F	Sa	Su
Dialectical Abstinence	М	Т	W	Th	F	Sa	Su	Mindfulness of current thoughts	М	Т	W	Th	F	Sa	Su
Reinforcing Non-addictive Behaviors	М	Т	W	Th	F	Sa	Su	ОТН	ER SK	ILLS U	JSED				
Burning Bridges and Building New Ones	М	Т	W	Th	F	Sa	Su		М	Т	W	Th	F	Sa	Su
Alternate Rebellion	М	Т	W	Th	F	Sa	Su		М	Т	W	Th	F	Sa	Su
Adaptive Denial	М	Т	W	Th	F	Sa	Su		М	Т	W	Th	F	Sa	Su
Filled out this side?Da	ily	2-3x	۲ <u> </u>	4-6x		_Once _		In session							

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GENERAL HANDOUT 1 (Ge

(General Worksheet 1)



Goals of Skills Training

GENERAL GOAL

To learn how to change your own behaviors, emotions, and thoughts that are linked to problems in living and are causing misery and distress.

SPECIFIC GOALS

Behaviors to Decrease:

- □ Mindlessness; emptiness; being out of touch with self and others; judgmentalness.
- Interpersonal conflict and stress; loneliness.
- Absence of flexibility; difficulties with change.
- Up-and-down and extreme emotions; mood-dependent behavior; difficulties in regulating emotions.
- Impulsive behaviors; acting without thinking; difficulties accepting reality as it is; willfulness; addiction.

Skills to Increase:

- Mindfulness skills.
- Interpersonal effectiveness skills.
- □ Emotion regulation skills.
- Distress tolerance skills.

PERSONAL GOALS

Behaviors to Decrease:



ade 11

GENERAL HANDOUT 3

Guidelines for Skills Training

1. Participants who drop out of skills training are *not* out of skills training.

a. The only way out is to miss four scheduled sessions of skills training in a row.

2. Participants who join the skills training group support each other and:

- a. Keep names of other participants and information obtained during sessions confidential.
- b. Come to each group session on time and stay until the end.
- c. Make every effort to practice skills between sessions.
- d. Validate each other, avoid judging each other, and assume the best about each other.
- e. Give helpful, noncritical feedback when asked.
- f. Are willing to accept help from a person they ask or call for help.

3. Participants who join the skills training group:

a. Call ahead of time if they are going to be late or miss a session.

4. Participants do not tempt others to engage in problem behaviors and:

- a. Do not come to sessions under the influence of drugs or alcohol.
- b. If drugs or alcohol have already been used, come to sessions acting and appearing clean and sober.
- c. Do not discuss, inside or outside sessions, current or past problem behaviors that could be contagious to others.
- 5. Participants do not form confidential relationships with each other outside of skills training sessions and:
 - a. Do not start a sexual or a private relationship that cannot be discussed in group.
 - b. Are not partners in risky behaviors, crime, or drug use.

Other guidelines for this group/notes:







GENERAL HANDOUT 4

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Skills Training Assumptions

An assumption is a belief that cannot be proved, but we agree to abide by it anyway.

1. People are doing the best they can.

All people at any given point in time are doing the best they can.

2. People want to improve.

The common characteristic of all people is that they want to improve their lives and be happy.

3. People need to do better, try harder, and be more motivated to change.*

The fact that people are doing the best they can, and want to do even better, does not mean that these things are enough to solve the problem.

4. People may not have caused all of our own problems, but they have to solve them anyway.**

People have to change their own behavioral responses and alter their environment for their life to change.

5. New behavior has to be learned in all relevant contexts.

New behavioral skills have to be practiced in the situations where the skills are needed, not just in the situation where the skills are first learned.

6. All behaviors (actions, thoughts, emotions) are caused.

There is always a cause or set of causes for our actions, thoughts, and emotions, even if we do not know what the causes are.

7. Figuring out and changing the causes of behavior work better than judging and blaming.

Judging and blaming are easier, but if we want to create change in the world, we have to change the chains of events that cause unwanted behaviors and events.

*But trying harder and being more motivated may not be needed if progress is steady and at a realistic rate of improvement.

**Parents and caregivers must assist children in this task.

