Dialectical Behavior Therapy

Date: 2006 (For resources, this is the publication date. For programs, this is the date posted.)

Information

Type: Program/Practice, Treatment/Services Program, Program with Evidence of Effectiveness
Organization: Behavioral Tech LLC
Costs: See the archived NREPP listing [1].

Contact

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Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on dialectical processes. "Dialectical" refers to the issues involved in treating patients with multiple disorders and to the type of thought processes and behavioral styles used in the treatment strategies. DBT has five components: (1) capability enhancement (skills training); (2) motivational enhancement (individual behavioral treatment plans); (3) generalization (access to therapist outside clinical setting, homework, and inclusion of family in treatment); (4) structuring of the environment (programmatic emphasis on reinforcement of adaptive behaviors); and (5) capability and motivational enhancement of therapists (therapist team consultation group). DBT emphasizes balancing behavioral change, problem-solving, and emotional regulation with validation, mindfulness, and acceptance of patients.

Therapists follow a detailed procedural manual. Generally, mental health professionals will need additional training to implement DBT. Training and training materials are available from Behavioral Tech, LLC for a fee.

Designation as a "Program with Evidence of Effectiveness"

SPRC designated this intervention as a "program with evidence of effectiveness" based on its inclusion in SAMHSA’s National Registry of Evidence-Based Programs and Practices (NREPP).

Outcome(s) Reviewed (Overall Quality of Research Rating-scale of 0 to 4)

1: Suicide attempts (3.7)
2: Nonsuicidal self-injury (parasuicidal history) (3.3)
3: Psychosocial adjustment (3.4)
4: Treatment retention (3.4)
5: Drug use (3.3)
6: Symptoms of eating disorders (3.2)

Read more about the program's ratings [2].
NREPP changed its review criteria in 2015. This program is a “legacy program,” meaning that it was reviewed under the post-2015 criteria. The evidence for each outcome was reviewed and scored on a scale of 0-4, with 4 indicating the highest quality of evidence and 0 indicating very poor quality of evidence. The overall rating was based on ratings of six criteria: 1) reliability of measures, 2) validity of measures, 3) intervention fidelity, 4) missing data and attrition, 5) potential confounding variables, and 6) appropriateness of analysis. When considering programs, we recommend (a) assessing whether the specific outcomes achieved by the program are a fit for your needs; and (b) examining the strength of evidence for each outcome.

2012 NSSP Objectives Addressed:

Objective 8.3: Promote timely access to assessment, intervention, and effective care for individuals with a heightened risk for suicide.

Links within this resource

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