



ADOLESCENT DIALECTICAL BEHAVIOR THERAPY (DBT) GROUP

UW HEALTH-PSYCHIATRY
6001 RESEARCH PARK BLVD
MADISON WI 53719

Adolescent DBT Group Leaders:

Michael Thalasinis, MS, LMFT and a semi-annually alternating trainee

Group Day/Time:

Thursdays, 4:00-6:00pm

Adolescent DBT Group Description:

The Adolescent DBT group is designed for teens 13-18 years old (18 if teen is in high school) who are struggling with the challenging bridge from adolescence to adulthood. Often full of difficult behaviors and family conflict, adolescence can be traumatic at worst and difficult at best. DBT helps to decrease problematic actions sometimes used to deal with extreme emotions by teaching skills in five areas: Mindfulness, Emotion Regulation, Distress Tolerance, Interpersonal Effectiveness, and Family Relationships.

DBT was developed initially to treat suicidality in adults with borderline personality disorder; however, it now is being used effectively in adolescents with similar self-harm behaviors as well as other co-occurring psychiatric illnesses such as depression and anxiety. Treatment is designed specifically for teens with self-harm behaviors, such as self-cutting, suicide thoughts, urges to commit suicide and suicide attempts.

The Adolescent DBT group is a weekly, two-hour skills training group. During the first hour of group, we review learned skills and how they were tried during the past week. There is a break followed by a second hour of new skills training. The group meets for a six-week module, and the parents are required to attend all sessions of each module. Parents and teenagers participate in the group, both separate from each other as well as together, to

offer everyone time to talk away from their family member, as well as integrate skills into their family life. After each six week module is complete, each adolescent and their parents will meet together with a group leader for a half-hour to review their treatment goals and discuss participation in future modules. Adolescents are required to participate in individual therapy two times per month as well as attend groups. Individual therapists are responsible for crisis support/management during treatment in the DBT group.

Inclusion Criteria:

- Ages 13-18 years (18 if teen is in high school)
- Three or more features of BPD (borderline personality disorder)
- History of one suicidal act or non-suicidal self-injurious behavior in the past 16 weeks OR current suicidal ideation
- Participation in individual therapy two times per month

Exclusion Criteria:

- For Adolescents: Substance Dependence, active psychosis or mania.
- Untreated or Refractory AD/HD.
- For family members: active psychosis or mania, attending group sessions under the influence of drugs or alcohol.

Mental health providers wishing to refer a patient to Adolescent DBT group need to fill out a referral form (found on the intranet or with Megan).

Prospective teenagers are pre-screened over the telephone. If the DBT group seems appropriate, an interview is scheduled with the teen and his or her parents or guardians. The interview will assess the teen and the family's appropriateness and motivation for change, ending with goals for treatment and success.

And now some more information on Dialectical Behavior Therapy (DBT):

What is Dialectical Behavior Therapy (DBT)?

The Adolescent-DBT group is designed for who are struggling with the challenging bridge from adolescence to adulthood. Often full of difficult behaviors and family conflict, adolescence can be traumatic at worst and difficult at best. DBT helps to decrease problematic actions sometimes used to deal with extreme emotions by teaching skills in five areas: Mindfulness, Emotion Regulation, Distress Tolerance, Interpersonal Effectiveness, and Walking the Middle Path.

DBT was developed initially to treat suicidality in adults with borderline personality disorder; however, it now is being used effectively in adolescents with similar self-harm behaviors as well as other co-occurring psychiatric illnesses such as depression and anxiety. Treatment is designed specifically for teens with self-harm behaviors, such as self-cutting, suicide thoughts, urges to commit suicide and suicide attempts.

Parental involvement is critical to the initial and ongoing success of treatment. Parents participate in weekly multifamily groups. Because teenagers consistently make more effective use of treatment if their parents learn the same skills as them, parents are strongly encouraged to attend multifamily weekly skills training groups. Family meetings are also available if teens are struggling implementing new skills at home.

What kind of therapy do clients receive in DBT at WisPIC?

We find that the people who get the most out of group are those who enter group having a clear idea about what group is and how group fits with their own goals. To this end we would like to provide you with more information about DBT group.

Most people who decide to enroll in group do so because they are dissatisfied by a number of things in their lives. The problem areas that DBT addresses are as follows:

1. Interpersonal conflict and relationship problems.
2. Intense painful moods and emotions.
3. Frequent crises or personal situations that feel overwhelming and unmanageable.
Impulsive harmful behaviors.
4. Confusion about oneself. Trouble maintaining focus and attention.

What are the top targets and goals of treatment in DBT?

The most important of the overall goals in DBT is helping patients create “lives worth living.” What makes a life worth living varies from person to person. For some patients, it involved less conflict at home or with friends while others focus on graduating from high school, going to college, or getting job. While all these goals will differ, all patients have in common the task of bringing problem behaviors, especially behaviors that could result in death, under control.

DBT Group is designed to help participants gain and strengthen skills in the following areas:

1. Interpersonal Effectiveness - How to better communicate your needs/wants.
2. Emotion Regulation - How to gain control of intense emotions.

3. Distress Tolerance - How to get through crises without resorting to harmful behaviors.
4. Mindfulness - How to concentrate, focus, and be aware in the moment. How to see oneself and others in a more balanced way.
5. Walking the Middle Path – How to balance acceptance and change.

The DBT curriculum is covered within about 18 weeks. Sessions are weekly for 2 hours. The groups are comprised of 8-10 participants and their parent(s)/ guardian(s) and 2 co-leaders.

Fees/Insurance

Most insurance plans cover some or all of group fees, depending on the extent of your coverage. You should check with your insurance provider. If it appears that your insurance coverage will be used up by your individual treatment, sometimes a fee can be arranged for group. This fee may be as low as \$40 per week.

Instructor



Michael Thalasinios, MS, LMFT

Michael Thalasinios earned his degree in Marriage and Family Therapy from Edgewood College and he has been with the University of Wisconsin Psychiatry Department since 2011. Michael provides psychotherapy for children, adolescents and families using scientifically-supported approaches that repair relationships and support the treatment of emotional and behavioral problems. Michael has experience providing structural family therapy, emotionally-focused therapy, cognitive behavioral therapy (CBT) and dialectical behavior therapy (DBT).

If you have other questions about the Adolescent DBT group, please don't hesitate to call Megan Kasdorf, Adolescent DBT Coordinator, at 608/263-6090 or mkasdorf@wisc.edu or call the front reception at 608/232-3171 and ask to leave a message for Michael Thalasinios.