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Got DBT? Understanding and Applying Dialectical Behavior Therapy in Sex Offender Treatment

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Dialectical Behavior Therapy (DBT; Linehan, 1993) is an empirically supported skills-based, cognitive-behavioral therapy originally developed for use with clients with borderline personality disorder and associated self-harm behavior. Its unique combination of individual therapy, skills group, in vivo skills coaching, and support for the therapists in the form of a weekly consultation team meeting, provide a comprehensive framework for treating difficult behaviors in a client population who do not demonstrate positive outcomes when participating in traditional psychotherapy practice. Multiple randomized control trials have demonstrated its effectiveness in reducing chronic suicidality and self-harm, particularly among those with personality pathology and substance abuse problems. Since its initial use, DBT has been applied to a myriad of treatment needs, including emotion dysregulation, reactive aggression, and other mood-dependent behavior.

Recent evidence indicates that self-regulatory problems are quite common among sexual offenders (Stinson, Becker, & Sales, 2008; Stinson, Robbins, & Crow, 2011; Stinson, Sales, & Becker, 2008; Ward & Hudson, 2007), including difficulties with emotion regulation, violent and sexual aggression, interpersonal skills deficits, suicidality, and problems with substance use. Sex offenders benefit from DBT's emphasis on self-monitoring, interpersonal and emotional skills development, and the use of a hierarchical treatment structure that addresses multiple behavioral problems and life concerns. Further, some sex offenders – particularly those who present with personality pathology or pronounced self-regulatory deficits – may be unable to meaningfully engage in sex offender specific treatment until they address more acute symptomatology.

DBT presents an interesting new take on addressing complex emotional and behavioral problems in adolescent and adult sex offenders. Therapists using DBT benefit from a comprehensive and empirically-supported framework, as well as techniques specifically designed to protect clinicians from the burn-out so often associated with treating challenging and high-risk clients. But admittedly, for those unfamiliar with DBT, this novel way of conceptualizing and addressing sex offender clients can be difficult. The primary objective of this workshop is to introduce sex offender therapists to the tenets of DBT and facilitate the implementation of DBT principles and techniques in sex offender treatment. A secondary goal is to familiarize practiced DBT therapists with recent updates to the DBT skills manual.

Workshop presenters are experienced DBT clinicians and sex offender therapists. Within this workshop, we will address the following components of DBT in relation to the treatment needs of sex offenders:

- Biosocial model and its applicability to sex offenders in treatment
- Validation, including examples of how to integrate validation into all therapeutic interactions
- The hierarchy of treatment targets in DBT, and where sex offender needs fall within this framework
- The individual and group therapy components of DBT, as well as the role of coaching calls and the DBT consultation team for involved therapists
- The use of diary cards and behavioral chain analysis in sex offender treatment using a DBT approach
- Recent changes to the DBT skills manual and how these can help sex offenders address self-regulatory skills deficits, to include sexual behavior problems

Workshop participants can expect to address the following learning objectives:

1. Participants will be able to list primary components of the Biosocial Model.
2. Participants will review validation techniques.
3. Participants will identify the four components of DBT and targets of sex offender treatment in a hierarchical framework so that they may better understand the application of DBT with this population.
4. Participants will receive an overview of the DBT skills, including those identified in the recent manual update, diary cards examples adapted to sex offender specific needs, and a behavior chain analysis.