“The test of a first-rate intelligence is the ability to hold two opposing ideas in the mind at the same time, and still retain the ability to function.”
DIALECTICS

• “Throughout therapy, an emphasis is put on dialectical reasoning, both on the part of the therapist and as a style of thinking taught to patients.

• Two seemingly opposing things being simultaneously true

• Move from “either or” to “both AND”

• Change & Acceptance

• Adopt a dialectical world view

• The function is cognitive restructuring; working to actively replace non-dialectical thinking with dialectical thinking
“The primary dialectical strategy is the balanced use of specific strategies and therapeutic positions by the therapist during interactions with the patient. Constant attention to combining acceptance with change, flexibility with stability, nurturing with challenging, and a focus on capabilities with a focus on limitations and deficits is the essence of this strategy…The key for guiding the therapist’s behavior is that for any point, an opposite or complementary position can be held (Linehan, 1993).”
WHAT ARE DIALECTICAL STRATEGIES

• A dialectical philosophical position is needed at all times in DBT.

• Dialectical strategies are tactics used to achieve treatment goals.
WHEN TO USE DIALECTICAL STRATEGIES

• Dialectical strategies are only effective when the therapist wholeheartedly believes that he/she does not hold the ultimate truth.

• Coming from a place of compassion rather than daggers.

• When you’re stuck.

• When topics are highly sensitive.
The patient is constantly moving, so we have to constantly move.

The natural tendency when someone moves backwards is for us to move backwards too… “I can’t stand this”. “Yes you can”.

The idea is to move to the middle together. “I can’t do this”. “I can see this is incredibly difficult for you, maybe you can’t do it alone and I can help you”.

Our clients frequently come to us spinning uncontrollably, our job is to help them make more controlled movements with our direction and support while pushing them off balance enough for them to need to struggle to rebalance themselves.
DBT IS LIKE A GAME OF CHICKEN

- A patient may hate group skills training and want to quit but not want to quit individual. The therapist will not be willing to break the original therapy agreement. Patient leaves the clinic and calls her therapist saying she was on a bus and was going to take it to a distant spot, get off, and kill herself.
- If the therapist goes to the bus station to get the patient, or immediately changed the rules of therapy, it would have been the same as jumping to the patient’s side of the teeter-totter”.
- If the therapist calls the client “manipulative” and refused to talk to her it would be moving back on the teeter totter to maintain balance. The problem is that the client may then move back themself.
- Instead the therapist would be encouraged to move to the middle by expressing faith in the patient, validating her suffering, and encouraging her to find it in herself to get off the bus, come back, and work with the therapist to solve the problem.
DIALECTICAL STRATEGIES
TAKE PRACTICE!!

- Consultation team
- Pick a strategy to try
- Role play
- Watch video
SPECIFIC DIALECTICAL STRATEGIES
1. Entering the paradox
2. The Use of Metaphor
3. Devil’s Advocate
4. Extending
5. Activating Wise Mind
6. Making Lemonade out of Lemons
7. Allowing Natural Change
8. Dialectical Assessment
CASE EXAMPLE

24 year old white male who has been entrenched in severe depression and social anxiety since at least high school when he first felt rejected by his peers.

He has since been living at his parents’ house, had one job that lasted a few months post high school and only leaves the house to dog-sit a family friend’s when they are out of town.

Client has been unwilling to take any risks that could lead to rejection including:

- Applying for jobs
- Going to school
- Dating/socializing
ENTERING INTO THE PARADOX
ENTERING INTO THE PARADOX

• Therapist highlights the paradoxical nature of the therapeutic relationship, the patient’s own behavior and reality in general.

• This strategy works best when the client is stuck in rigid beliefs or engaging in black and white thinking.
ENTERING THE PARADOX

• When applying this strategy, we don’t move in to help with logic or intellectual explanation to pull the client out of the struggle

• When using this strategy, the client’s attempts to rationalize or explain the paradox are met with silence, antlers question from the therapist or a light on the enigma to e solved.

• By entering into the paradox the therapist is stressing that things can both be true and not be true…that an answer can be yes and no

• Captures client’s attention with an element of surprise

• Functions to force therapist and client to let go of rigid patterns of thought, emotion and behavior to make room for more flexible patterns

• Similar to a Zen Koan (dilemmas or enigmatic stories with no logical answers; forcing experiential knowledge rather than intellectual understanding).
CASE
EXAMPLE+ENTERING INTO
THE PARADOX

- “Unwillingness to experience rejection means you will always feel rejected.”

- “I hear that you’re completely unwilling to take risks or experience failure and you’re here”.
ENTERING THE PARADOX

EXAMPLES

• “If I didn’t care for you so much, I would try to save you.”

• “I get that by getting out of the house you’re not going to feel better…the problem is you’re not getting that you won’t feel better.”

• “If you’re not willing to experience anxiety, you’ll be stuck with it forever.”

• “Your inability to accept must be accepted.”

• “Don’t judge judging.”

• It’s necessary to “get in control” of excessive attempts to control.

• “We are both ‘Okay’”. “You really need what you say you need AND I am going out of town this weekend”.

• The client has every right to kill themselves AND if they ever convince the therapist atet suicide is imminent, they may get locked up.

• All behavior is “good” and the client is in therapy to change “bad” behavior.

• The therapist is paid to care for the client and if the client thinks that means the therapist doesn’t care, it’s frequently interpreted as the client’s problems showing up in therapy AND if the client stops paying, therapy ends.

• Treatment for worry is worry time.

• Treatment for insomnia is staying awake.
THE USE OF METAPHOR
THE USE OF METAPHOR

• Using storytelling, analogies, anecdotes, parables or myths to teach dialectical thinking and open up the possibilities for new behavior.

• This strategy works best when you’re discussing highly sensitive subjects or to highlight behavior patterns or to help ideas be more memorable or “stick”.
THE USE OF METAPHOR

• Using metaphors to illustrate problematic behavior, thought patterns etc.

• Alternative methods for teaching dialectical thinking and making room for new behaviors.

• More interesting and easier to remember.

• Create emotional distance (normalizes behaviors) when talking about challenging or high emotion topics.

• Whole sessions can be spent talking about the story or metaphor.
CASE EXAMPLE + THE USE OF METAPHOR

• “It’s like living a life where you’re trying to hide from the sun because you might get burned.”
METAPHOR EXAMPLES

• “It’s like you’ve been training for the Olympics, and now that you’re finally almost there you’re saying you want to go it alone without a coach.”

• “I’ve noticed an experience in our sessions where I feel like we’re both in canoes, paddling along and then all of a sudden we hit some rapids.”

• “Every year you leave a dock hoping it will take you to a different dock and every year you end up back at the same dock again. This year is different because you’ve switched from a speedboat to a row boat…I’m in the boat next to you but it requires you to row yourself with my coaching and I have a compass and a map to a different dock…it’s going to be hard work and we can get there together.”

• “It’s like going to the gym…it’s harder at first and it helps build new muscle memory.”
DEVIL’S ADVOCATE
DEVIL’S ADVOCATE

• Similar to entering into the paradox in the sense that the therapist holds down the maladaptive end of the continuum and there faces the patient to hold the adaptive end.

• This strategy is most effective when you know the client’s “dysfunctional rules” and/or “generalized beliefs” about the world.

• Used most often in the beginning of treatment
DEVIL’S ADVOCATE TECHNIQUE

- Forces client to argue the other side of argument.
- To increase commitment to live and to treatment.
- Must be done with a straight face and be reasonable enough to seem “real” and extreme enough to force client to take the counterargument AND we must know when to do this with lightness and play the argument for tongue-in-cheek humor.
“You getting rejected means that you may get more depressed, more hopeless and find more things to hate about yourself so we need to do everything we can so that you never experience rejection.”
DEVIL’S ADVOCATE EXAMPLES

• “ACES may not be the treatment for you…there are lots of therapists in the community who can help you do more standard DBT.”

• If a client believes some version of the belief, “everyone must love me”… suggest that even if a total stranger is offended by a legitimate activity (such as driving the speed limit or being asked where a product is located in their store then the client should alter their behavior to conform.

• Or if a friend or total stranger is offended because the client is making a choice to not engage in an illegitimate or illegal activity, they should alter their behavior to conform. “Since your friends really want you to drink and they are uncomfortable when you chose not to, and you can’t tolerate them being a little uncomfortable then you might want to risk jail time or on ankle bracelet instead”.

EXTENDING
EXTENDING

• This strategy is done by taking the client more seriously than they expect us to or than they are taking themselves.

• This strategy is particularly useful when the therapist is having thoughts they are being “manipulated”. It helps to manage both the patient’s behavior and also our own desire to attack in response to ineffective communication on the part of our client.

• Similar to Devil’s Advocate
EXTENDING

- Taking the client’s words at face value

- Take the consequences, not the problem seriously…when the patient becomes less extreme make sure to reinforce by taking the problem seriously
  
  - Flunking out of school when otherwise doing well because of not having time to study
CASE
EXAMPLE+EXTENDING

• “Maybe you need to research a therapist that will help you not feel rejection.”

• “You could move to the middle of the desert where no other humans live.”
EXTENDING EXAMPLES

• “It sounds like your current living situation is intolerable. You better researching apartments immediately!”

• “How can we possibly talk about something as mundane as scheduling another therapy session when you’re thinking about killing yourself!”

• “If this therapy isn’t working for you, we need to do something about that! Do you think you need to fire me? This is very serious”.
ACTIVATING WISE MIND
ACTIVATING “WISE MIND”

• Asking the patient not what they “feel to be true” or “believe to be true” but what they “know to be true”.

• This strategy is very helpful when the client is asking for concrete advice.

• I use this a lot when clients are attempting to cancel session or group

• It can be extremely effective when clients are stuck in self-judgement, “they will hate me forever”…
ACTIVATING WISE MIND

• Coach the patient to get into wise mind

• Ask what wise mind mind says

• Be careful not to put your value judgement on client’s wise mind decisions
CASE EXAMPLE + ACTIVATING WISE MIND

• Is that wise mind?
WISE MIND EXAMPLES

• “Is that what wise mind says?”

• “What are some signs that you’re in wise mind or emotion mind right now?”

• “Let’s take a minute to get into wise mind”.

• “What would Marsha do?”
MAKING LEMONADE OUT OF LEMONS
MAKING LEMONADE OUT OF LEMONS

- Taking something that seems problematic and making it an asset
- “Finding the silver lining without denying that the cloud is indeed black”
- Cannot be effectively used without a good therapeutic relationship
- Can be most effective when used with lightness
CASE EXAMPLE+MAKING LEMONADE OUT OF LEMONS

• “Wow! What a great opportunity to practice opposite action! Just imagine, if you can conquer this, everything else is downhill!”
MAKING LEMONADE OUT OF LEMONS EXAMPLES

• “This is a great opportunity to practice skills.”

• “You may have failed this test...the upside is your score can’t get much worse.”

• “Suffering when accepted enhances empathy.”

• Cancer saved my life.
ALLOWING NATURAL CHANGE
ALLOWING NATURAL CHANGE

• Change happens in all contexts in life, avoiding it is not therapeutic also forcing it is not therapeutic.

• Use the therapeutic relationship and skills to help clients through changes in therapeutic relationship, skills group and life.
“Relationships come and go and become deeper and more distant, change in relationships is constant”.
ALLOWING NATURAL CHANGE EXAMPLES

- Schedules change
- Group therapists change
- New group members join
- Jobs change, bosses change
- Two therapists may give two different answers
DIALECTICAL ASSESSMENT
DIALECTICAL ASSESSMENT

- Takes into account both the environment and the client.

- The notion that there may be a fatal flaw in the social fabric is frequently not considered.

- Constantly asking the question, what’s being left out?

- Assessment is ongoing and we need to constantly ask the question, “How does the client’s behavior make sense given the client’s current context and who they are.”
CASE EXAMPLE + DIALECTICAL ASSESSMENT

- “Given your history with rejection it makes perfect sense that you would fear it…it’s also true that people are imperfect and sometimes engage in cruel ways AND I don’t want that to stop you from finding connection.”
DIALECTICAL ASSESSMENT

- Race
- Gender
- Bosses demanding too many hours
- Parents or friends are judgmental
QUESTIONS?