# 2020 DBT Summit The Latest in Practice-Based Innovations

Dialectical Behavior Therapy's guiding theory and deep use of acceptance-based and CBT tools and techniques makes it one of the most adaptable and useful treatments across settings and diagnoses.

Join Lane Pederson, PsyD, as he hosts this one-day summit where you will hear from top DBT practitioners with real-world experience applying it to PTSD and attachment issues, dual diagnosis disorders, and even bipolar disorder.

In addition, you'll learn:

- Distinctions between DBT and CBT that increase the **effectiveness of this** approach with clients that struggle with emotions and harmful urges
- The keys to making practice-based applications of DBT evidence-based, and
- Bring DBT online via Telehealth in the age of Covid-19.

Bring your questions as this summit concludes with a roundtable discussion of current client and DBT issues of concern to you. Join faculty members: Lane Pederson, PsyD; Eboni Webb, PsyD; Sheri van Dijk, MSW and Steve Girardeau, PsyD for this exciting day of learning and connection with colleagues!

### **TARGET AUDIENCE**

Counselors • Social Workers • Psychologists Therapists • Marriage & Family Therapists Case Managers • School Psychologists School Counselors • School Social Workers Nurses • Physicians • Addiction Counselors

# **Live Webcast Schedule**

Times Listed in Central)

8:00am 4:15pm

Program begins **12:15-1:00pm** Lunch break Program ends

here will be two 15-min breaks (mid-morning & mid-afternoon) Actual lunch and break start times are at the discretion of the speaker. more detailed schedule is available upon request



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**Dr. Eboni Webb** earned her doctorate of clinical psychology from the Minnesota school of Professional Psychology. Dr. Webb began her clinical work as assistant clinical director and program director at Mental Health Systems in Minnesota, a large clinic specializing in Dialectical Behavior Therapy (DBT). She has extensively practiced DBT developing two special treatment programs for clients with developmental disabilities and borderline-intellectual functioning. Dr. Webb opened and runs the private practice The Village of Kairos, offers diverse DBT specializations including DBT for trauma-based disorders and co-occurring disorders. The Village of Kairos has expanded therapy programs, better known as Restorative

Services, to include individual and group therapy sessions for adolescents, parents, families, and adults including in-the-moment coaching for patients.

Dr. Webb has recently completed Level II training and is in the process of completing her board certification in Sensorimotor Psychotherapy<sup>SM</sup> as an Advanced Certified Practitioner (will complete in October 2020) which has become a prominent feature of therapy offerings in the Village.

Speaker Disclosures:
Financial: Eboni Webb maintains is the founder and a primary therapist at The Village of Kairos. She is an advisor to the Dialectical Behavior Therapy National Certification and Accreditation Association (DBTNCAA). Dr. Webb receives a speaking honorarium from PESI, Inc. Nonfinancial: Eboni Webb has no relevant nonfinancial relationship to disclos



**Sheri van Dijk, MSW,** is a registered social worker who has been working in the mental health field since 2000, both at a community hospital outpatient clinic and now in her full-time private practice. Sheri works with clients aged 16 and older who are experiencing severe mental health problems; she has had extensive training in mindfulness and dialectical behavior therapy (DBT) and has been running DBT-informed groups since 2004.

Sheri is the author of eight DBT books for both adults and teens, the focus of which is to teach clients how to use DBT skills to help them live emotionally healthier lives.

She has also written DBT Made Simple, the aim of which was to make DBT more accessible to therapists working with diagnoses other than borderline personality disorder; and she has been presenting extensively in Canada and abroad with this goal as well. Sheri is the winner of the R.O. Jones award for her research on using DBT skills with bipolar disorder, presented at the Canadian Psychiatric Association Conference in September, 2010.

Financial: Sheri van Dijk is in private practice. She receives a speaking honorarium from PESI, Inc.



**Steve Girardeau, Psy.D.,** is the director of clinical services for Mental Health Systems (MHS), one of the largest DBT-specialized practices in the Midwest. He has overseen the care of thousands of clients including clients with co-morbid major mental health and personality disorders. Dr. Girardeau has worked in non-profit community mental health clinics, in private practice and in multi-clinic settings. He has been a therapist for over two decades, specializing in providing clinical services to clients with serious and persistent mental health diagnoses as well as personality and chemical use disorders.

riancial: Steven Girardeau is the Director of Clinical Services of Mental Health Systems, PC. He receives a speaking honorarium from PESI, Inc.



Lane Pederson, PsyD, LP, C-DBT, has provided DBT training and consultation to over 20,000 professionals in the United States, Australia, South Africa, Canada, Mexico, and the Middle East through his training and consultation company, Lane Pederson and Associates, LLC (www.DrLanePederson.com). Notable organizations he has trained for include Walter Reed National Military Hospital, the Federal Bureau of Prisons, the US Navy, the Canadian Department of Defense, the Ontario Psychological Association, the Omid Foundation, and Psychotherapy Networker. He has provided DBT training for community mental health agencies, chemical

dependency treatment centers, hospital and residential care settings, and to therapists in forensic settings.

Dr. Pederson's DBT publications include the award-winning The Expanded Dialectical Behavior Therapy Skills Training Manual, Second Edition (PESI, 2017); Dialectical Behavior Therapy: A Contemporary Guide for Practitioners (Wiley, 2015); and Dialectical Behavior Therapy Skills Training in Integrated Dual Disorder Treatment Settings (PESI, 2013). He also authored the best-selling DBT Deck for Clients and Therapists.

Financial: Lane Pederson maintains a private practice. He is an author for PESI Publishing & Media and receives royalties. Dr. Pederson receives a speaking

Non-financial: Lane Pederson has no relevant non-financial relationship to disclose



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# Summit

# The Latest in Practice-Based Innovations

**ONLINE:** Wednesday, November 18, 2020 8:00am – 4:15pm (Central time)



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# The Latest in Practice-Based Innovations

**ONLINE:** Wednesday, November 18, 2020 8:00am - 4:15pm (Central time)

- A deeper understanding: Key similarities and differences between **DBT** and CBT
- Bringing acceptance strategies to the session. Key tips that will transform your use of mindfulness
- Where's the evidence? How to make practice-based DBT evidencebased for special settings and populations
- DBT online? Yes, you can!













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# Session I: Trauma-Informed DBT Strategies

# Eboni Webb, PsyD

Working with emotionally-dysregulated and clients across the lifespan in your practice can be overwhelming and exhausting.

In this session with Dr. Eboni Webb, you will discover how powerful the intersection of Sensorimotor Psychotherapy® and Dialectical Behavior Therapy® (DBT) can be for treating challenging and traumatized clients across the lifespan.

Learn how to implement key elements of a trauma-focused DBT program while developing the skills needed to be more effective in treatment, avoid burnout and achieve positive outcomes. Help clients see the function of their behaviors through the lens of trauma, reestablish structure, and implement a safe structure that enables your clients to learn and master these skills at home.

### Learning Objectives

- 1. Propose the critical steps in clinical sessions for effective TF-DBT therapy.
- 2. Determine the biosocial model of pervasive emotional dysregulation disorders found in innately sensitive clients most vulnerable to trauma.
- 3. Demonstrate validation of client's self-defeating beliefs and feelings (e.g. trauma reenactments)
- 4. Adapt DBT to somatic interventions for the clinical need of the client.

### Outline

# Trauma and attachment

Biosocial model Symptoms of a pervasive emotional

dysregulation disorder Developmental vs. attachment trauma

### Trauma and brain development Biphasic arousal model

Core organizers of experience

# **TF-DBT** survival resources

Survival resources Somatic resources

### Critical interventions

Proximity maintenance: restructuring boundaries

Creating a secure therapeutic base Creating a safe therapeutic haven Validation: Connection before redirection

# Outline

Session III: DBT for Dual Diagnosis: Innovation and Integration

### **DBT and Chemical Health Treatment** Separate tracks

As they have been combined

# What needs to be covered in

Breaking out of ineffective patterns Alternatives to emotional blunting Skillful addressing of issues vs. reactivity Development of healthy and supportive relationships

### The special role of Dialectical Abstinence

A process of change vs. an on off switch Leaving shame behind and replacing it with choices to reinforce.

### Key issues and application in practice Full integration

Address the full set of issues

Expect slips/lapses and program to address them Focus on change and hope vs. shame and

# **Learning Objectives**

clients.

1. Assess three important distinctions between DBT and

**Evidence, and DBT via Telehealth** 

Elements of Dialectical Behavior Therapy have been used

have a limited understanding of important concepts and

by therapists for decades. Yet many of those therapists

issues that directly affect DBT practice and outcomes.

In this presentation, Dr. Lane Pederson will detail the

and how those differences influence interventions. In

addition, he will emphasize how acceptance-based

strategies can be maximized in session, highlighting

and share the latest in bringing DBT programming to

clients via telehealth. Leave this session with a deeper

common myths about mindfulness that affect practice.

And finally, Dr. Pederson will tell you how to apply DBT in

an evidence-based manner beyond the research literature,

knowledge of DBT and practical tips to bring back to your

important differences between DBT and traditional CBT,

Lane Pederson, PsyD – Host and Presenter

- 2. Evaluate the differences between treatment fidelity and evidence-based practice
- 3. Determine three best practices for providing DBT via telehealth

# **Outline**

Session IV: DBT in Action: Fundamentals, Following the

### Key similarities and differences between DBT and CBT

Different theories drive different interventions

Integrating acceptance to open the doors of change

# Bring acceptance strategies to the

Key tips that will transform your use of mindfulness

Debunking mindfulness myths Tolerance in the moment: What therapists

# How to make practice-based DBT and populations

following evidence

Telehealth in the age of Covid-19

# 2020 DBT SUMMIT: THE LATEST IN PRACTICE-BASED INNOVATIONS

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commonly miss

# evidence-based for special settings Freatment fidelity and evidence-based

Different, yet equally legitimate ways of

Determine what works for your clients and

# DBT online? Yes, you can!

Future directions for DBT online

PESI, Inc., #1062, is approved to offer social work

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receive 7.0 Clinical Practice continuing education credits. Course

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# Session II: DBT-Informed Treatment of Bipolar Disorder Sheri van Dijk, MSW

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Go to www.pesi.com/DBT2020 for more information.

Bipolar Disorder (BD) typically causes chaos in an individual's life, often leading to risky and impulsive behaviors, damaged relationships and careers, substance use problems, hospitalization, and even suicide.

Based on Sheri van Dijk's ground-breaking work on using DBT with bipolar disorder, Sheri will briefly review the rationale for using DBT to treat this condition before looking at the efficacy of DBT in treating this illness, and delving more into how to teach some of the DBT skills most pertinent to clients with BD.

# Learning Objectives

- 1. Determine the research and nature of current evidence base for using Dialectical Behavior Therapy with clients diagnosed with bipolar disorder.
- 2. Integrate the core skills of DBT (mindfulness, distress tolerance, emotion regulation and interpersonal effectiveness) in your clinical treatment planning for clients with bipolar disorder diagnosis.
- 3. Propose how to conduct DBT sessions in both individual and group settings for this client base.

### Outline

How DBT evolved as an effective treatment of Bipolar Disorder (BD)

### On-target DBT skills applied to treatment of BD:

Mindfulness Distress tolerance

Emotion regulation Interpersonal effectiveness skills

Special considerations for teaching skills in group vs. individual

The Research: Risks, limitations and the nature of current evidence

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Steve Girardeau, PsyD

being broadly used in therapy.

**Learning Objectives** 

with dual diagnoses.

population.

DBT in its early years explored providing services to

The presentation will be focused on a fully integrated

program that includes both DBT and chemical health

1. Determine three specific ways to plan therapy that

integrates DBT and chemical health treatment.

2. Extrapolate how an innovative model of care can more

3. Propose how the model of care can support a different

model of payment that best meets the needs of the

successfully address the special needs of a population

in all areas of life throughout the program.

individuals with dual mental health and chemical health

diagnoses. Thus, came DBT-S which is now, a decade later,

interventions in an innovative model of care that focus' on

the necessity for treatment and the generalization of skills

Addiction Counselors: CA, OK

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# **Questions?**

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Lane Pederson, Dr. Eboni Webb, Sheri van Dijk, Steve Girardeau and PESI are not affiliated or associated with Marsha M. Linehan, PhD, ABPP, or her organization.



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