

ACT and DBT: a practical integrative approach for beginner and intermediate therapists working with multi-problematic clients.



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SURVEY: If, when and how clinicians integrate ACT & DBT
HYPOTHESIS: Therapists trained in ACT & DBT, integrate both models intuitively in the treatment of multi problem clients

RESULTS: patterns followed when integrating ACT & DBT

DBT skills in ACT based treatment.

DBT strategies for suicidal behaviors, in ACT treatment.

ACT in stage III of DBT.

Use of ACT metaphors and experiential exercises in the context of DBT treatment.

Values work from an ACT perspective, in DBT pre-treatment.

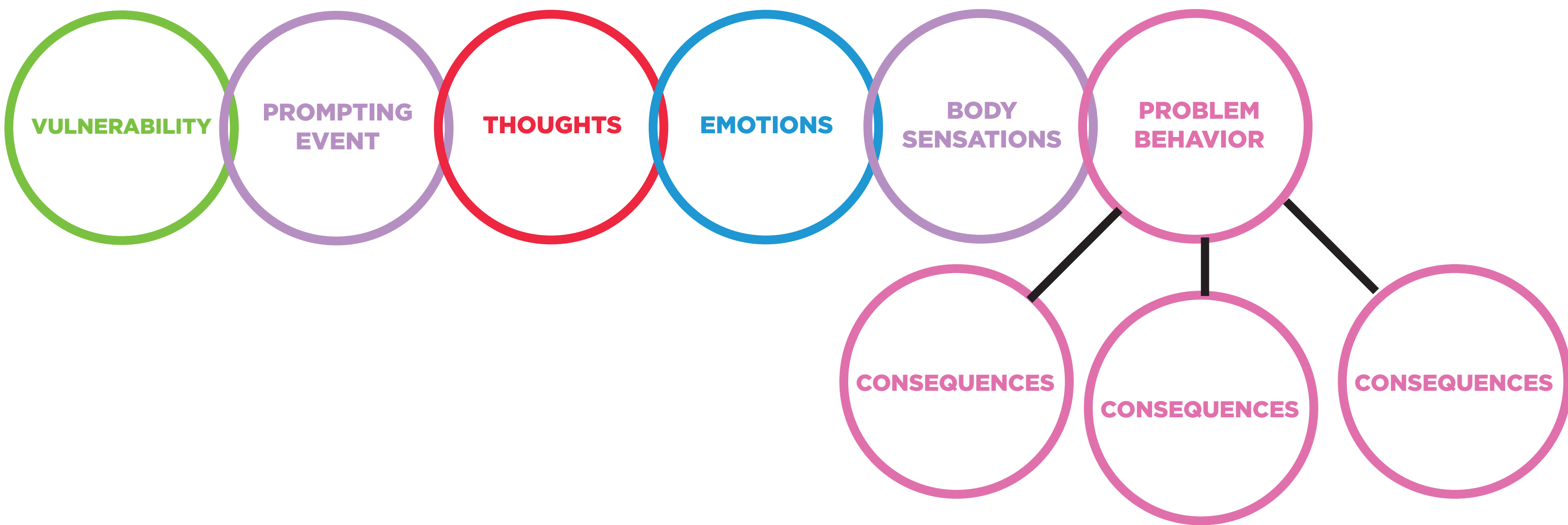
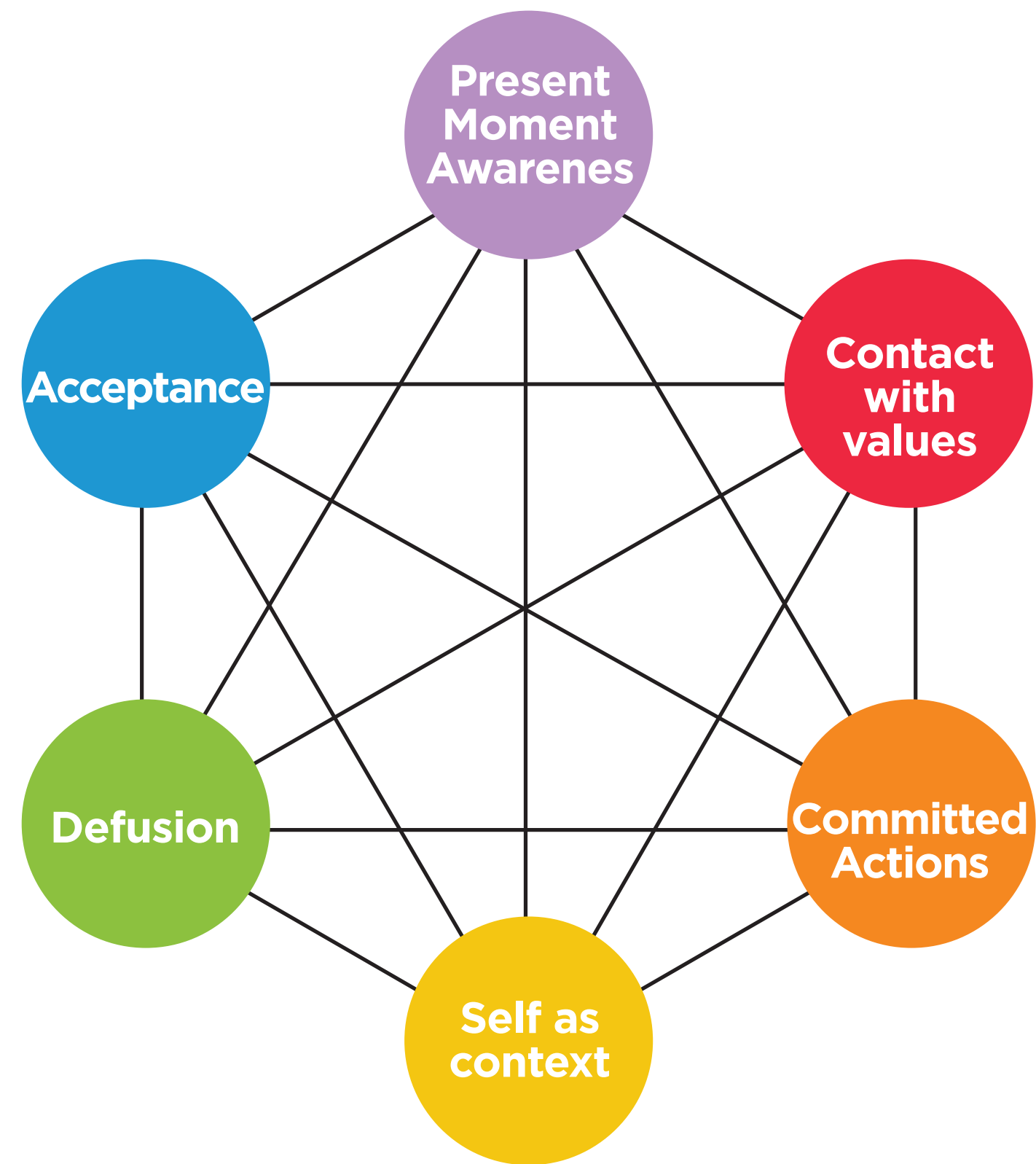
DISCUSSION: limitations of these integration attempts.

Combination of techniques instead of process integration.

Intuitive integration, based on therapist’s perceived limitations of each model.

Lack of clarity regarding the case conceptualization and treatment plan, both for client and therapist.

OUR PROPOSAL → Cross-model conceptualization: a practical integrative approach.



ASSESSMENT	CASE CONCEPTUALIZATION / TREATMENT PLAN	CLINICAL COMPETENCIES AND SKILLS
<p>Check suicidal risk and parasuicidal behaviors (DBT).</p> <p>Use the ACT hexaflex to assess psychological flexibility/inflexibility in each of the six processes</p> <p>Consider the potential existence of an invalidating environment and determine it’s importance in the case (DBT).</p> <p>Assess client’s deficit in specific skills, such as DISTRESS TOLERANCE, EMOTIONAL REGULATION and INTERPERSONAL EFFECTIVENESS (DBT).</p> <p>Evaluate attachment to the control agenda (ACT).</p> <p>Tools: Hexaflex + chain analysis.</p>	<p>Set short and long term goals, based on values. (ACT & DBT)</p> <p>Determine behavioral hierarchy (DBT): a. life threatening behaviors, b. therapy interfering behaviors, c. quality of life behaviors.</p> <p>Plan DBT Skills training, considering client’s specific skills deficit.</p> <p>Choose Hexaflex processes to focus on, based on client’s struggles (ACT).</p> <p>Decide environmental interventions (family training - DBT).</p> <p>Consider the need to work with creative hopelessness (ACT)</p> <p>Tools: Hexaflex + chain analysis or missing links.</p>	<p>Stylistic strategies from DBT (irreverence - validation)</p> <p>Dialectical stance (DBT)</p> <p>Flexibility (therapist’s hexaflex, ACT)</p> <p>Experiential approach (ACT)</p> <p>Directive role of the therapist (DBT)</p>