

INSTRUCTIONS FOR DBT CITI CASE PRESENTATION

Each team will present a clinical case using a DBT case formulation. The intent of this learning activity is to help further solidify your conceptual understanding of DBT and your capacity to clinically apply DBT principles and strategies. We have allotted one hour for each team's case presentation. This document provides you the basic framework for how to prepare and what to expect. At the start of Part II, we will decide as a community the order of teams for the case presentation.

How Will the Time Be Used? We will use the following time allocation:

- Presentation of case: 20-25 minutes
- Consultation questions for the trainers: 5 minutes
- Illustrative role play and/or audio tape of client session: 20 minutes
- Questions/Comments by DBT CITI Participants: 10 minutes
- Trainer Feedback: 30 Minutes

How to Select Your Case: We encourage you to select a difficult case that has baffled you and your teammates and not your easiest or most successful case. Remember the intent is to learn, hone your skills. Select a Stage I client.

Suggestions for Preparation: Your primary source material will be Linehan's (1993) Cognitive Behavioral Therapy for Borderline Personality Disorder and your DBT CITI slides & notes. There are several other excellent sources for how to prepare a case formulation:

- Koerner, K. (2010). Navigating a Case Formulation (Chapter 2). From K. Koerner's Doing Dialectical Behavior Therapy: A Practical Guide New York: Guilford Press.
- Koerner, K. & Linehan, M.M. (1997). Case formulation in Dialectical Behavior Therapy for Borderline Personality Disorder (pp.340-367). In T. Eells (Ed.), Handbook of Psychotherapy Case Formulation. New York: Guilford Press.

What Will You Need to Develop: A written document that describes your case and a PowerPoint presentation that you can use during your oral presentation; a role-play or audio segment of an actual session with the client. If you choose to use an audio, you will need to bring documentation from the client that he/she has provided consent for the session to be played for training purposes.

What Elements Should You Include & Address?

- **Background:** Provide basic demographics/identifying information and presenting problem; brief history of the presenting problem; prior efforts to solve the problem; developmental history & treatment history. What is the client's education and social history? What is current socio-economic, marital, and family status?
- **Treatment Goals:** What were the client's stated goals upon entering treatment? What are his/her most important life-worth living aspirations, goals, hopes? In other words, if treatment is fully successful, what do they hope will be different in their life?
- **List DBT Stages and Targets for Treatment:** List the stage of treatment your client is currently in and provide your rationale; list your client's behavioral targets in hierarchical order; make sure all behaviors within a domain (e.g., Quality of Life Interfering Behaviors) are also listed within hierarchical order for that domain); list behaviors that you are seeking to increase and decrease. (Note: Please make sure

you *list* (verses describe) these behaviors.

- List and describe those **secondary targets** of greatest relevance to your client. How specifically do you encounter the secondary target? How does it function to compromise your ability to work on the primary targets?
- **Describe/Diagram a Recent Behavioral Chain Analysis for Primary Behavioral Target.** Describe and diagram the chain analysis should include all elements of the chain (e.g., problem behavior, prompting event, vulnerability factors, short term and long term consequences, links that connect the prompting event to the problem behavior). Be sure to be detailed.
- **Weave in Solution Analysis Into Your Chain.** Identify those specific links where you could have or did weave in solution analysis. Identify the link in the chain and the solution tied to that link that was or in retrospect the most sensible area of the link to intervene with your solution analysis. (It is not uncommon for there to be more than two solutions you and the client identify). Of all the potential places where a person could potentially intervene, where was the most sensible spot for solution analysis? Why?
- **Describe the Common Patterns & Controlling Variables Across Chains.** Consider the numerous chain analyses you have performed on the selected target behavior. What patterns of behavior consistently emerge? What are the common elements that are always present?
- **Present Your Treatment Plan for the Target Behavior.** What interventions did you/can you use to change the target behavior you have selected. Consider the four change strategies (skills training, exposure, cognitive modification, contingency management). How can you practice the treatment plan in and out of session? Make sure to link your intervention specifically to the dysfunctional behavior and/or controlling variable. For example, teaching client how to effectively say no to her boss to decrease her work demands and stress; exposure treatment to particular stimulus associated with envy to decrease stealing objects; reinforcing non-drug use by putting money "saved" from not using drugs in a "piggy bank" for massage). How did you tailor the diary card to the specific needs of the client, if doing so was indicated?
- **How Was the Treatment Plan Carried Out?** In retrospect, how did it go? What obstacles if any did you hit up against? How did you seek to solve them?
- **Present client's clinical outcomes for primary target.** Briefly describe the client's outcomes over time. (See chapter by Rizvi, Monroe-DeVita, and Dimeff in Dimeff & Koerner book). Report specific measurable behaviors (e.g., number of times engaged in self-harm) over specific period of time (e.g., weekly, monthly). Keep it simple. Consider including those outcomes of greatest relevance to your client and the viability of your DBT program (e.g., # of ER room admissions over past six months; # of inpatient hospitalization days over past six months; # of suicide attempts over past six months, etc). Consider tracking 2 to 3 behaviors.
- **Questions for DBT Consultants.** Please specify your three top consultation questions about your case.