Milton Keynes Specialist CAMHS Dialectical Behaviour Therapy (DBT) Team information for patients
This leaflet aims to tell you a little bit more about Dialectical Behaviour Therapy (DBT) in Milton Keynes Specialist CAMHS. We hope it will answer some of your questions and tell you more about our DBT treatment programme.

What is Dialectical Behaviour Therapy (DBT)?

DBT was first developed in the USA for adults who were often suicidal. It then moved on to become a treatment for adults with a diagnosis of Borderline Personality Disorder (sometimes called BPD). DBT is now being used successfully in the UK to treat adults with this diagnosis and is part of Department of Health guidance on the treatment of adults with BPD.

If it is for adults, why is it being suggested for me?

The treatment has been adapted for use with young people and your therapist thinks it might help you. DBT is aimed at helping young people like you. These are people who are frequently suicidal and who self-harm as a coping strategy.

You may also have difficulties in managing your emotions and experience rapid changes in mood. Young people like you also tend to be impulsive (act without thinking) in their behaviour and may take part in impulsive and risky behaviours such as unplanned sex, substance abuse, restricting their diet, and running away from home and/or school.

You do not need to have a diagnosis of BPD to benefit from this treatment.
What does the treatment involve?

DBT treatment is intense. You will attend weekly individual therapy appointments with the Milton Keynes Specialist CAMHS DBT Team and also attend a weekly DBT Skills Training Group with other young people on the programme.

There are four key parts of DBT: a skills training group, individual treatment, DBT telephone coaching, and the DBT Consultation Team.

1. The DBT skills training group will teach you new skills to understand and manage your difficulties better. The group is run a bit like a class where the group leaders teach the skills and assign tasks for you to practice using the skills in your everyday life. Groups meet on a weekly basis and there are 24 weeks of teaching.

2. DBT individual therapy will focus on helping you to apply the skills you learned in the group to problems in your everyday life. Individual therapy takes place once a week and runs alongside the skills groups. You must attend both the group and individual sessions to keep your place on the DBT programme.

3. DBT telephone coaching will provide you with ‘in-the-moment’ practice on how to use the skills you are learning in the group to cope with difficult situations in your daily life. You can call a DBT therapist between sessions to receive coaching so you can discuss with your therapist what skills may be useful in that situation. Phone coaching is available on week days between 9am and 4pm, but exact times can be negotiated with each individual therapist.

4. The DBT Therapist Consultation Team is intended to support DBT therapists in their work with young people. Teams typically meet weekly and are made up of individual therapists and skills group leaders who share responsibility for your care.
How long is the DBT programme?

The commitment is about six months to complete one cycle of treatment. Sometimes people can stay on for another six months if this is needed. However, the programme has a strictly enforced four-miss rule, which means if you miss four sessions in a row you will be considered to have dropped out of DBT and will not be offered a continued place in the programme.

What exactly will I be working on?

DBT has some very specific targets to work on. These are listed below in order of priority:

1. Helping a young person to stop any life-threatening behaviours (such as suicide attempts and self-harm).

2. Decreasing behaviours likely to interfere with therapy, such as non-attendance and not completing therapy homework. This is important because many of the young people in DBT may have been known to mental health services for some time and may have had many therapists but not experienced change or improvement because of behaviours, which interfered with the therapy process. DBT aims to stop this happening.

3. Decreasing behaviours that reduce the young person’s quality of life (such as drug use and poor school attendance).
What skills will I be taught in DBT?

DBT aims to increase your skills to respond to situations effectively. These skills are taught in the weekly skills group and in individual sessions.

The skills covered are in four areas:

1. **Mindfulness** - This skill will help you to observe and describe what is happening inside you (thoughts, feelings) and around you. You will learn to be in ‘the present’, rather than the past or future. You will be taught the skills to monitor your thoughts and urges and to let them pass, rather than acting on them impulsively.

2. **Distress Tolerance** - This will help you tolerate a stressful situation without making it worse (by, for example, self-harming in some way). You will learn a number of strategies to distract attention during moments of stress. You will also learn to try to accept difficult feelings and/or situations before trying to change things.

3. **Emotional Regulation** - This will help you to manage difficult feelings like anger, fear, shame and sadness. Skills in building positive emotions and increasing pleasant events in life are also taught.

4. **Interpersonal Effectiveness** - This will teach you how to effectively ask others to meet your needs, assert your limits and problem-solve relationship difficulties.

What is different about DBT?

Unlike traditional psychological therapies (such as Cognitive Behaviour Therapy – CBT) where the focus is largely on change, DBT also focuses on the idea of acceptance and teaching new skills to improve the quality of your life. DBT more strongly focuses on the role of emotions rather than just thoughts and how these both can affect your life.
What does dialectical mean?

The term ‘dialectical’ is about how two different opposing (opposite) ideas can be true at the same time. For example, people can be both good and bad, not just one or the other. It also refers to the idea in DBT of working towards a balance between acceptance and change. This means accepting things we cannot change at the moment and changing things we can.

Does DBT work?

Research has shown DBT to be effective in reducing suicidal behaviour, reducing self-harm, and reducing the likelihood of a young person being admitted to a mental health hospital. It is also helpful at reducing treatment dropout, substance misuse, anger, depression and improving a young person’s general quality of life.

Ok, I’m interested! What happens next?

If you’re keen and your CAMHS clinician agrees it might help you, your clinician will make a referral (complete a special form detailing some of the main problems) to the DBT team. The DBT team discusses all referrals at their weekly meeting. If we think you have the kinds of problems we can help you with, you will be offered an appointment to meet a DBT clinician to begin thinking about whether DBT is the right treatment for you at that time. DBT has a special name for these sessions which are known as ‘Pre-treatment’. During pre-treatment you and the DBT clinician meet several times to discuss how DBT might fit with your problems, think about goals for treatment and decide whether you can commit to the treatment. If at the end of these sessions, it is decided that DBT is the right treatment for you, you will be offered a place on the full DBT programme.
What if it isn’t for me?

Sometimes a decision is made that DBT is not right for a young person. If this is the case, the CAMHS clinician working with the young person will spend time thinking about next steps and what other treatment might be suitable.

Feedback, complaints and compliments

We are always pleased to hear what you think about our services. Sharing your views and experiences can help us to make improvements. If you have received good treatment or service and would like to thank the staff involved, please let us know by contacting the Patient Support Service (PSS) by email on feedback@nhs.net or call 0300 013 4799. They will make sure that your feedback is passed onto the service or individual as quickly as possible.

If you are unhappy with any part of the care you received from Central and North West London NHS Foundation Trust (CNWL) DBT service please speak to the Service Manager or your DBT therapist in the first instance. You can also contact the Patient Support Service if you wish to make a complaint.

Tell us, we’re listening!

We also collect feedback, complaints and compliments online. Tell us what you think at www.cnwl.nhs.uk/feedback then we’ll share and learn from your feedback.

Contact details

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