

# Dulcinea Pitagora LCSW PLLC

## DBT (Skills) Agreement

Dialectical Behavior Therapy (DBT) is an evidence-based treatment that was developed by Dr. Marsha Linehan to treat borderline personality disorder (BPD). DBT Skills Group as stand-alone treatment has many benefits (Linehan et al., 2015; Valentine et al., 2014); these include positive changes in psychosocial functioning and coping, depressive symptoms, behavioral dyscontrol, disordered eating, and emotional processing and regulation. Group facilitators work with individuals on improving attentional control, identifying and changing emotional responses, responding effectively to interpersonal wants and conflicts, and identifying and responding to crises without making the situation worse (Valentine et al., 2014)

Our program is committed to the adherent practice of DBT through a queer, anti-oppressive lens. We work with adults in the kink, sex-work, polyamorous/consensually non-monogamous (CNM), trans, gender non-conforming (GNC)/non-binary (NB), lesbian, gay, bisexual, queer, intersex, asexual, and pansexual communities. Making this program inclusive and accessible is a top priority; we welcome people of every gender, national origin, race/ethnicity, religious affiliation, and sexual orientation. Additionally, we create space for conversations that de/reconstruct whiteness and cultivate positive racial and intersectional identities.

## Client Agreement

### FEES & PAYMENT

Each group session/week costs \$50.

If at any point you are no longer able to pay this fee, renegotiation may be possible. If you are able to pay more than \$50, please know that you are helping to subsidize appointments for those in our communities whom are struggling financially, and would benefit from skills group.

After 3 unpaid meetings, you will be put on 'vacation' from group until the balance is reduced; after 3 weeks of 'vacation,' you agree that you are no longer a member of the group.

Non-emergency/illness cancellations within 48 hours require payment of the full group fee.

### THE MARSHA SCHOLARSHIP

When possible, we offer scholarships to individuals who are unable to pay the full fee. Scholarship amount is determined by your group application. If you do not communicate difficulty paying for group, we do not know that you are struggling.

The scholarship for Graduate Group is different from other group scholarships. If you are accepted into Graduate Group on scholarship, then your scholarship will automatically renew every 8 weeks. However, we can not guarantee this scholarship indefinitely. At the end of an 8-week cycle, we may inform you that we are no longer able to offer you the rate that you have been paying.

In sum, scholarship status for most groups never changes; scholarship status for Graduate Group will never change during an 8-week period, and you will be informed if it will change for the next 8-week period.

### SKILLS GROUP STRUCTURE

1. Mindfulness (~40 minutes)
2. Homework review (~45 minutes)
3. Break (~10 minutes)
4. New Skill Lesson (~55 minutes)

### GRADUATE GROUP STRUCTURE

1. Mindfulness (~25 minutes)

2. Check-in (~5 minutes)
3. Skills-based peer consultation (~60 minutes)
4. Break (~10 minutes)
5. Skills refresher (~20 minutes)

#### ELIGIBILITY CRITERIA

##### **\*\*All Groups\*\***

Participants have

- completed required paperwork via Theranest
- submitted a complete Provider Referral Form

(Exception: If your therapist is a member of the MAWC DBT Consultation Team, they do not need to fill out Provider Referral Form)

- signed this document (see below)

Participants are

- residents of the state of New York
- attending regular, individual therapy
- willing to follow all group rules and guidelines
- willing to attend individual therapy and DBT Skills Group on a regular basis, on time, and for the duration of the session
- willing to come to group therapy prepared with homework

##### **\*\*Graduate Group\*\***

Participants have

- attended a DBT skills group for at least 6 months, covering all 4 modules (mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness)
- gone a minimum of 6 months without engaging in target behaviors (such as self-harm, suicide threats, suicide preparations, suicide attempts, and/or substance abuse) before joining the group
- gone a minimum of 6 months without psychiatric hospitalization before joining the group.

Participants are

- willing to lead mindfulness practices
- willing to assist peers in solving life problems
- willing to bring life problems to peers

#### RULES & GUIDELINES

- Call ahead if you are going to be late or miss
- Do NOT discuss suicide or self-harm behaviors in group
- Do NOT come to session under the influence of drugs or alcohol; come to session acting and appearing clean and sober
- Support your peers (arrive on time, validate, avoid judging, give helpful feedback when asked)
- Do NOT begin a private or risky relationship (including romance, sex, crime, drugs, or self-injurious behavior) with anyone in this group; please wait until you both leave the group
- When attending via Zoom be sure that those around you cannot see or hear other group members
- Be conscious of pronouns
- Do NOT tempt others in group
- Step forward, step back
- Keep all information about fellow group members strictly confidential

Please note: Depending on the limits of individual members, group rules differ for every group. For example, each group decides how to proceed if members accidentally encounter one another outside of therapy.

## ATTENDANCE

We both agree to attend all scheduled therapy sessions. It is not acceptable to miss therapy because you find it too uncomfortable, are not in the mood for therapy, don't want to talk about a particular topic, or feel hopeless. Of course, our most detailed plans often go awry; if you need to cancel, please give me at least 48-hours notice. If you arrive late to a meeting, we will end at the original time scheduled.

### **\*\*Skills Groups: Rule of 3\*\***

If you miss 3 consecutive meetings in a row, you agree that you are no longer a member of the group.

### **\*\*Graduate Group: 2-of-8 Rule\*\***

Each member of the group is an integral part of the group. Graduate Group is about asking for support and showing up for one another. When group members miss group, they are neither asking for support nor showing up for their peers. Therefore, group members agree to have no more than 2 absences per 8-week cycle. In situations where more than 2 absences per 8-week cycle are likely, group members agree to ask the group for permission to miss more than 2 meetings. For more information, see the Grad Group Handbook. Those who miss 3+ group meetings without the group's consent agree that they are no longer part of the group. Retroactive consent does not count. Participants are not financially responsible for the first 2 absences in an 8-week cycle. Even with the consent of the group, participants are financially responsible for additional absences.

Please note: Both attendance rules do NOT apply to the sudden onset of illness or emergency situations.

## COORDINATION OF CARE

Because we believe in your ability to advocate for yourself, we do not coordinate with other providers very often. If you do not have the skills to advocate for yourself, skills group is an appropriate setting to develop them. Exceptions are made on a case-by-case basis.

If you think your treatment would benefit from a meeting between another one of your providers and group facilitators, we agree that you will organize, lead, be present for, and speak for yourself during the meeting.

## OUTCOME MEASURES

Our program is dedicated to the adherent delivery of evidence-based therapy through an anti-oppressive lens. Not only do we commit to remaining current on best practices, but we directly assess the outcomes of the patients in our program. There's only so much data, however, that we can collect through observation. As a member of our program, you agree to complete assessments as needed. Usually, this happens when you start a new mode of treatment (like individual therapy or skills group) and at regular intervals (like six or twelve months). All data will be saved to your encrypted record; when we synthesize data, it will be deidentified such that it cannot be traced back to you. Whenever we administer an assessment, we will provide a rationale.

## LIFE AS WORTHWHILE

At best, the goal of therapy is to not need therapy. As you gain skills and strive toward a life worth living, you will depend less on therapy.

## MODES OF TREATMENT

### **\*\*Weekly Individual Therapy\*\***

Stage 1.1: Decreasing suicidal behaviors

Stage 1.2: Decreasing therapy-interfering behaviors

Stage 1.3: Decreasing quality-of-life-interfering behaviors

Stage 1.4: Increasing behavioral skills

Stage 2: Decreasing posttraumatic stress

Stage 3.1: Increasing respect for self

Stage 3.2: Achieving individual goals

### **\*\*Weekly Skills Training Group\*\***

Therapy is about learning skills that increase one's ability to live a life worth living. Therapy is not about immediately feeling better. In fact, a good part of therapy is about learning to feel uncomfortable emotions in order to begin living a life worth living.

Comprehensive DBT includes skills training. These groups meet for 90-150 minutes each week over 12-24 week periods and typically include eight to twelve members. The sessions utilize lecture, discussion, and practice exercises in order to teach DBT skills. Individual sessions may also include skills training. An optional DBT graduate group is available for clients who want to continue with skills training.

#### DBT Skills Modules

- Core Mindfulness: Mindfulness is the ability to practice being aware and accepting one's moment-to-moment experiences. Mindfulness teaches participants how to focus the mind, direct attention, and how to non-judgmentally observe and describe what they are feeling and thinking in the moment. These skills can help people develop a more stable sense of who they are and can help reduce reactivity to painful thoughts and emotions.

- Distress Tolerance: Distress tolerance skills teach participants how to effectively distract and productively soothe themselves while in the midst of their distress. These skills typically replace problem behaviors such as missing school or work, self-inflicted cutting, physical fights, and alcohol or drug abuse.

- Emotion Regulation: Emotion regulation skills address extreme emotional sensitivity, rapid mood changes, and other unregulated moods such as chronic depression, anxiety, or hostility. Examples of specific skills include learning to identify and label emotions, learning how to increase positive moods, and learning how to make yourself less vulnerable to negative moods.

- Interpersonal Effectiveness: Interpersonal effectiveness skills address participants' difficulties in maintaining consistent and rewarding relationships by teaching skills such as how to ask for what you want, how to say no in a gentle yet effective manner, and how to maintain your sense of self-respect and independence in the face of external pressure.

#### **\*\*Telephone Coaching with the Therapist\*\***

In the pursuit of new skills, you may find it difficult to think of relevant skills and/or effectively use them in crisis situations. When that happens, call or text me; see below for contact information. We will speak for approximately 15 minutes; over the course of our dialogue, we will develop a plan to survive the crisis without making the situation worse. Sometimes people feel like they burden me with crisis calls; if that's the case, we schedule practice calls until reaching out when necessary feels comfortable. Clients are encouraged to call their primary therapist before engaging in ineffective behaviors. Calls made to your primary therapist after engaging in suicidal or self-harming behaviors will not be returned for 24 hours and will be addressed as the priority target behavior in the following session. Clients who are in crisis and are unable to reach their primary therapist may call skills trainers for consultation. In the case of a life-threatening emergency, clients should immediately call 9-1-1.

#### **\*\*Weekly Therapist Consultation Team\*\***

The DBT treatment team meets weekly to assist each other in providing effective and compassionate treatment. We spend time problem-solving difficulties that interfere with client progress in treatment and help keep each other practicing within a dialectical, anti-oppressive framework.

## **Clinician Agreement**

### REASONABLE EFFORT

We make every reasonable effort to competently conduct therapy. We can neither solve problems for nor save you. If we could make intense pain go away, we would; alas, we cannot. We can work with you to gain insight on your life, teach you skills for solving problems/achieving goals, and practice skills with you.

We can't walk the path for you, but we can walk alongside you with a map.

## ETHICS

We obey standard ethical guidelines and professional codes.

## PERSONAL CONTACT

As mentioned above, we agree to attend scheduled meetings. Theranest/the client portal is the most secure way to reach us.

## RESPECT

Respecting you is an integral part of effective therapy. We are willing to respect your identities, autonomy, and inherent wisdom; when willfulness arises, we turn our minds toward willingness.

## CONFIDENTIALITY

All information that you share with us is confidential, unless you disclose (1) imminent risk of suicide, (2) imminent risk of homicide, and/or (3) abuse or neglect of individuals whom cannot consent (minors, elderly individuals, or disabled individuals). If a court of law issues a legitimate subpoena for information contained in your record, we must comply.

Please note that email and iMessage are insecure forms of communication; the client portal, which is HIPPA compliant, is secure.

If we accidentally see each other outside of the therapy context, we will not acknowledge you first; rather, we will pretend like we do not know you. This is not because we do not like you; rather, your right to privacy and confidentiality is of the utmost importance to us, and we do not wish to jeopardize your privacy by outing you as someone we know. However, if you acknowledge us first, we will be more than happy to briefly speak with you.

## CONSULTATION

Sometimes we need help delivering therapy. Instead of continuing an ineffective therapy or blaming you for problems in therapy, we consult with other professionals in their areas of expertise in order to provide the best treatment for you. While information about you may be shared in this context, your privacy and confidentiality will be respected and upheld per HIPAA requirements.

## **ASSUMPTIONS ABOUT US**

- We are doing the best we can.
- We want to improve.
- We need to do better, try harder, and be more motivated to change.
- We may not have caused all of our own problems, and we have to solve them anyway.
- We must learn new behaviors in all relevant contexts.
- You cannot fail therapy
- All behaviors (thoughts, emotions, urges, actions) are caused
- Figuring out and changing the causes of behavior work better than judging and blaming.

## **By checking the boxes and signing below I am committing to the conditions of treatment of the MAWC DBT Program as described in the previous pages and below.**

- I understand that I can request further clarification when I have a question regarding specific application of any parts of this authorization.
- I am voluntarily requesting to be treated in the Dialectical Behavior Therapy Program.
- I agree to attend DBT Skills Group on a regular basis, on time, and for the duration of the session.
- I will not assume that the professionals involved in my treatment will pass important information along to other treatment providers. I also understand that they may do so when they feel it is necessary for their own supervision/consultation or my treatment.

- I agree to avoid coming to group under the influence of drugs or alcohol.
- I agree to come to group prepared with my homework.
- I agree to keep information obtained during sessions, as well as the names of other clients, strictly confidential.
- I agree to call/email providers ahead of time when I will arrive late or miss a meeting.
- I agree to let the group know in advance if I will not be in group when I am aware in advance.
- I agree I will not form private relationships with other group members.
- I agree to pay my bill.
- I understand that physical violence, intimidation, or destructive comments are unacceptable.
- I confirm that I am eligible for the group I am joining; if my eligibility changes, I will inform group facilitators.

Name (and Legal Name if different)::

## References

Linehan, M. M., Korlund, K. E., Harned, M. S., Gallop, R. J., Lungu, A., Neacsiu, A. D., McDavid, J., Comtois, K. A., & Murray-Gregory, A. M. (2015). Dialectical behavior therapy for high suicide risk in individuals with borderline personality disorder: a randomized clinical trial and component analysis. *JAMA psychiatry*, *72*(5), 475–482. <https://doi.org/10.1001/jamapsychiatry.2014.3039>

Valentine, S. E., Bankoff, S. M., Poulin, R. M., Reidler, E. B., & Pantalone, D. W. (2015). The use of dialectical behavior therapy skills training as stand-alone treatment: a systematic review of the treatment outcome literature. *Journal of clinical psychology*, *71*(1), 1–20. <https://doi.org/10.1002/jclp.22114>