

INFORMATION

...foundation for good policy

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The Department of Mental Health and Addiction Services A Healthcare Service Agency

John G. Rowland Governor

Dialectical Behavior Therapy

Thomas A. Kirk Jr., Ph.D.

Commissioner

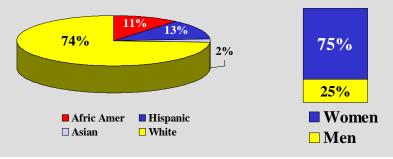
An important DMHAS goal is to provide evidence-based services..."to persons whose needs are particularly challenging or not being well met in the current system of care." The use of Dialectical Behavior Therapy (DBT) by the Southwest Connecticut Mental Health System (SWCMHS) reflects this goal. Clinicians have often had difficulty in successfully treating persons who hurt themselves - by cutting, burning, and frequent suicide attempts. The introduction of DBT is providing **new hope and expectations of success** for many people and the clinicians who serve them. It is also a prime example of providing a **more effective**, **higher quality of care at a reduced cost**.

DBT targets serious problem behaviors that prevent a person from living a life they believe is worthwhile. Such behaviors may include suicidal and self-harming actions, substance use and abuse, binge eating, withdrawing from life, chronic depression and despair.

SWCMHS is a network of DMHAS operated and funded non-profit mental health and addiction services in Southwest Connecticut. It provides a range of inpatient and outpatient psychiatric, substance abuse, crisis, support and rehabilitation services.

DBT looks at self destructive behavior as attempts by people to deal with intense emotions that seem impossible to control. A DBT therapist helps a person to replace the problem behaviors with more skillful responses. A person learns *acceptance skills* to better manage situations, feelings and history they cannot change. *Change oriented skills* teach persons more effective ways to manage relationships and emotions. DBT interventions are being used in a number of SWCMHS programs including Greater Bridgeport Community Mental Health Center, F.S. Dubois Center in Stamford, Keystone Services in Norwalk, and at Norwalk Hospital.





Major Depression	48%
Bipolar Disorder	18%
Post-Traumatic Stress Disorder	58%
Personality Disorder	71%
Substance Abuse	30%

Diagnoses (most clients have more than one diagnosis)

A woman in her mid-40s was referred to GBCMHC from another community program that was unable to provide treatment to effectively meet her needs. During the year prior to referral, she had spent 7 of the 12 months in inpatient psychiatric units in response to extreme self destructive behavior. Since she started DBT treatment in September 2000 she has not spent a day on a psychiatric inpatient unit. She and her family feel proud of her accomplishment, and she has begun to consider the possibility of having a life worth living. At the same time, the extraordinary expense of inpatient care, has been replaced with more effective care at a reduced cost. These resources can now be used for other persons in need.

Source: Department of Mental Health and Addiction Services SWCMHS (203) 551-7400 Visit "www.dmhas.state.ct.us/infobriefs.htm" on the Web to view previous issues of "Information..."