

## **Distress Tolerance: Acceptance and Change** **Supplemental Handout**

### **Practice Exercise 1: Validation**

Your patient logs into her telehealth session in tears, saying her boyfriend is “the worst person ever” and you’ll never believe what he said today. She reports having engaged in self-harm by cutting as soon as she got home from school, and then she cried and took a nap before logging onto your session. She hasn’t yet connected with her parents or friends.

**Practice generating validating statements** without approving of her self-harm behavior.

### **Validation cheat sheet:**

- “You must feel...”
- “It makes sense that...”
- “I understand how...”
- Be awake and aware
- Accurately reflect back what they’re communicating
- Articulate the unspoken thoughts, emotions, etc
- If you can, validate in terms of past experiences (“this makes sense based on what you’ve experienced before,” not always applicable)
- If you can, validate in terms of *present* context (“I think anyone would have felt or reacted the way you did,” not always appropriate)
- Be a genuine human/ be yourself!

### **Practice Exercise 2: Distress Tolerance Skills**

You complete a behavior chain analysis and learn that your patient attempted to call her mom after school; mom acknowledged the call but said she could not talk until she finished a meeting at work.

Your patient needed to tolerate several hours of difficult emotions without making things worse. Imagine a “do-over” and identify distress tolerance skills that can help her reduce negative emotions or at least “survive” these difficult feelings. She is unable to immediately resolve the conflict with her boyfriend, as he is not available to talk until later this evening.

- **Discuss 3-4 skills** that may be helpful, and help your patient imagine how specifically she could have used these in the moment.
- What **barriers would you anticipate** your patient having to using these skills? How would we troubleshoot these?

#### **Skills cheat sheet:**

- Wise Mind ACCEPTS (Distraction)
  - Activities, Contributing, Comparisons, Emotions, Push Away, Thoughts, Sensations
- IMPROVE the Moment (Positivity)
  - Imagery, Meaning, Prayer, Relaxation, One thing, Vacation, Encouragement
- Self-Soothe (Six Senses)
  - Vision, Hearing, Touch, Smell, Taste, Movement
- TIPP (Physical Regulation)
  - Temperature control, Intense exercise, Paced breathing, Progressive muscle relaxation
- Pros and Cons
- Radical Acceptance

### **Practice Exercise 3: Dialectics**

Your patient logs into her telehealth session in tears, saying her boyfriend is “the worst person ever” and you’ll never believe what he said today. You had been planning to start problem-solving her school avoidance at today’s session, and she has an upcoming court hearing for truancy.

During session, your patient discloses worsening intensity of suicidal thoughts in the past week. She feels stuck waiting for her upcoming court date but not feeling ready to return to school full-time after staying home for several weeks. She’s been hospitalized before (six months ago) and reports enjoying having a “break from reality.”

- How do you proceed in session (e.g. how do you assess and manage risk, where do you start with the session agenda, etc.)?
- What dialectical tensions are present? (look for two opposing positions) Can you find any dialectical synthesis or coexistence?

### **Dialectics cheat sheet:**

- Look for and highlight potential fusions between acceptance and change
- Reciprocal and irreverent communication
- Entering the paradox
- Devil’s advocate
- Metaphor
- Lemonade out of lemons
- Dialectical assessment