



## Implementation of Dialectical Behavior Therapy (DBT) as an Effort to Overcome Emotional Dysregulation and Post-Traumatic Disorder Stress (PTSD) in Adolescents Violent Behavior and Suicide Attempts

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### ABSTRACT

Violent behavior is a situation where a person can endanger himself and others both physically and psychologically. To reduce this violent behavior, it is necessary to carry out a prevention, namely applying Dialectical Behavior Therapy (DBT). Dialectical Behavior Therapy (DBT) is a psychotherapeutic therapy intervention that can help patients control their emotions, accept the current situation, and change the negative behavior that the patient previously carried out towards a more positive behavior. The purpose of this study is to find out how the effect of Dialectical Behavior Therapy (DBT) is on clients with violent behavior of suicide attempts, Emotional dysregulation, Posttraumatic Distress Stress. This research uses the literature study method, namely by searching through electronic databases, Garuda, and Google Scholar. The inclusion criteria used were articles from 2011-2022 and resulted in several significant research articles. The results found using this literature study show that Dialectical Behavior Therapy (DBT) is very effective as an intervention to help patients with violent behavior

## **INTRODUCTION**

In this era of globalization, the tendency for mental disorders is increasing and is caused by stressful activity events such as loss of loved ones, hostility, divorce, depression, economic crises, work stress and threats that can increase the risk of suffering. Mental disability. Soul Malfasari et al., 2020). Mental disorders are one of the main health problems in advanced, modern industrial countries, including Indonesia, with the number of mental disorders annually in the world to date experiencing a very relevant increase and continues to grow (Handayani et al., 2017). According to data from the World Health Organization (WHO), there are around 35 million people affected by depression, 60 million people affected by bipolar, 21 million affected by schizophrenia, and 47.5 million affected by dementia. The 2018 Riskesdas recorded the prevalence of severe mental disorders in the Indonesian population at around 0.7%. The most severe mental disorders were found in DI Yogyakarta, Aceh, South Sulawesi, Bali and Central Java. The prevalence of emotional mental disorders in the population of Central Java is 9.8% of the entire population of Indonesia (Ministry of Health, 2018).

Most youth come to the community after non-suicidal self-harm, such as cutting or burning, because of significant difficulties with self-regulation of their emotions. These adolescents frequently reported using self-harm strategies to overcome emotional numbness, and many experienced ongoing suicidal ideation, while some continued to engage in at least one occasion and attempted suicide frequently. Given the nature of the difficulties they face, many would argue that these adolescents have a "personality structure that appears at the boundary".

These depressed adolescents, and the family systems in which they have developed, can prove so difficult to treat, that many will graduate from child and adolescent mental health settings into long-term adult mental health patients. With few hospitalizations due to high rates of dysfunction, extreme management problems, and treatment resistance. The challenges of government-funded health services in both the public and private sectors in Indonesia and nationally are very interesting.

Violent behavior is a response to something dangerous that is faced by someone. This response can cause harm to oneself, others and the environment. Seeing the impact of the losses incurred, the handling of patients with violent behavior must be carried out professionally. There is a significant relationship between family support as seen from emotional support, information, reality and expectations with relapse in schizophrenia patients (Tiara et al., 2020) Nurses are professionals and have the responsibility to provide nursing services according to their competence and authority independently and collaborate with other medical personnel, in the form of nursing care (Arya T Candra et al., 2020). In addition, interventions are also needed that can control violent behavior in patients, so that other people and patients themselves feel protected from violent behavior both physically and verbally, one of which is Dialectical Behavior Therapy (DBT).

Dialectical Behavior Therapy (DBT) is a highly effective psychotherapy that helps therapists help their patients find their way out of the labyrinth of their previous self-destructive behaviors. Marsha Linehan first developed DBT three decades ago, and since then has provided much needed guidance to doctors and a welcome hope to patients and their families. DBT is an excellent evidence-based treatment that is widely used around the world.

The structure of DBT focuses the therapist and client on the important issues that need to be addressed (eg, suicidal behavior and self-harm), helps them stay on track, and prevents the detours that can be easily taken when the client has a crisis-driven life. This roadmap keeps the therapeutic couple moving toward a mutually agreed upon goal.

Dialectical Behavior Therapy (DBT) has been proven effective in several studies that have been conducted regarding intellectual interventions in helping patients with problems in avoiding harmful negative thought patterns and habits such as self-harm, depression, hurting others, alcohol and drug addiction, and other negative habit problems (Sugawara & Nikaido, 2014).

There is a large body of literature linking self-abuse with emotional dysregulation and traumatic childhood experiences, such as physical and sexual abuse. In fact, it has been argued that this behavior is used as a compensatory strategy in post-traumatic adaptation, aiding intrapersonal and interpersonal regulation. Thus, emotional dysregulation and childhood trauma are considered as closely related aspects of the developmental process underlying self-injury and suicidal behavior. Support for the superiority of emotional dysregulation as a mediator of self-injury was provided in a randomized controlled trial of cognitive behavioral therapy (CBT) for adolescents aged 13 to 35 years who experience this difficulty. The results suggest that difficulties with emotion regulation, in particular, impulse control and goal-directed behavior, partly mediated a significant reduction in self-injury; however, in contrast, measures of depression, anxiety, and suicidal thoughts did not play a mediating role. Therefore, it is suggested that interventions aimed at reducing self-injury need to specifically target emotional dysregulation, rather than other associated mental health disorders.

The influence of Dialectical Behavior Therapy (DBT), namely patients who have a tendency to experience biological difficulties in regulating their emotions. These patients also experience profound invalidation of their emotional, cognitive, and behavioral experiences in their own environment. To control emotions, principle-based psychotherapy tries to change this behavior by balancing skill-building change strategies with validation (Suprpto, 2016). Mental disorders are still a serious problem in today's world. To improve health services, it is necessary to increase the capacity of nurses by adding the concept of a spiritual and technological approach (Suprpto et al., 2021). The aim is to analyze and provide an overview of the various evidences from previous studies regarding the Effects of Dialectical Behavior Therapy (DBT) on Patients with Violent Behavior.

**METHODOLOGY**

The research approach uses a qualitative study with a literature study method that uses article reference criteria that discuss Violent Behavior, Dialectical Behavior therapy Emotional Dysregulations, Suicide Attempts. The procedure for collecting data is through several international and national journal sites related to Dialectical Behavior Therapy among Adolescents on Google Scholar, Researchgate, PubMed, and Sciencedirect.

**RESULTS**

Table 1. Based on the Analysis, the Literature Used in Making this Literature Review

Tittle	Years	Subject	Research Result
A Qualitative Analysis of College Counseling Center Staff Experiences of the Utility of Dialectical Behavior Therapy Programs on Campus	2021	15 Staff	Dialectical behavior therapy (DBT) is an evidence-based practice for suicidal and self-injuring behavior with growing popularity in college counseling centers (CCCs). With the exception of a single, quantitative study, no research to date investigates how DBT is used in CCCs or what factors influence program implementation. We conducted qualitative interviews with 15 CCC staff that were delivering DBT programs in order to inform a more richly detailed understanding of the process of developing and implementing a DBT program housed in a CCC (Kannan, Divya; Chugani, Carla D;; Muhomba, Monicah; Koon, Kimberly, 2021)
Acceptance and Mindfulness in Behavior Therapy: A Comparison of Dialectical Behavior Therapy and Acceptance and Commitment Therapy	2006	30 adolescents	Dialectical Behavior Therapy (DBT) and Acceptance and Commitment Therapy (ACT) are both innovative behavioral treatments that incorporate mindfulness practices and acceptance-based interventions into their treatment packages. Although there are many similarities between these treatments, including the fact that they are part of a newer "wave" in behavior therapy involving mindfulness and acceptance interventions, there also are some key differences in the ways in which ACT and DBT conceptualize and use acceptance and mindfulness interventions in

			treatment. This article discusses these similarities and differences.
Family Functioning and Self-Injury in Treatment-Seeking Adolescents: Implications for Counselors	2020	29 adolescent s	Practitioners specializing in dialectical behavior therapy. Our primary aim was to better understand the family environment of these adolescents. A second aim was to elucidate interrelations among family communication, roles, problem-solving, affective involvement, affective responsiveness, behavioral control, and conflict and SIB. We found a high rate of SIB among adolescent participants. There was significant congruence between adolescent and caregiver reports of the family environment, with families demonstrating unhealthy levels of functioning in several indicators of family environment. The latent variable of family functioning significantly predicted nonsuicidal and ambivalent SIB. Counselors working with adolescents should consider family functioning when assessing risk for SIB
A Case Analysis of MDT with an Adolescent with Conduct Personality Disorder and Fire Setting Behaviors	2005	16.5-year-old male adolescent	This case study examines a 16.5-year-old male adolescent who engages in fire setting, severe aggression and self injurious and impulsive behaviors. He was treated with Mode Deactivation Therapy (MDT) for four months and his problem behaviors have been reduced significantly. He was previously treated with Dialectical Behavior Therapy (DBT). It appears that in this case study MDT was effective in reducing his severe behaviors.
A Comparison of MDT and DBT: A Case Study and Analysis	2005	13 year old adolescent	This case study examines a 13 year old adolescent male who engages in severe aggression, self- injurious and impulsive behaviors. He was treated with Dialectical Behavior Therapy (DBT) for thirteen months. DBT had limited success in reducing his problem behaviors. He was treated with Mode Deactivation Therapy (MDT) for four months and his problem

			behaviors were reduced significantly. It appears that in this case study MDT was more effective than DBT in reducing his severe behaviors.
Mode Deactivation Therapy (MDT): A Theoretical Case Analysis on a Suicidal Adolescent	2005	Literature Review	This case study presents a case study of the effectiveness of Mode deactivation therapy (MDT) (Apsche, Bass, Jennings, Murphy, Hunter, and Siv, 2005) with an adolescent male, with reactive conduct disorder, PTSD and 8 lethal suicide attempts. The youngster was hospitalized four times for suicide attempts, three previous placements in residential treatment centers. MDT is a form of cognitive behavioral therapy (CBT) that combines the balance of dialectical behavior therapy (DBT)
Best Practice Clinical Interventions for Working with Suicidal Adults	2012	Adults	Drawing from existing empirical literature, this article examines best practices for working with adults who are in suicidal crisis. An explanation of suicidal thinking and how to assess for suicidality is provided, and specific clinical interventions and techniques that have been empirically evidenced as useful with this population are highlighted. Based on the premise that understanding the suicidal mind leads to more effective intervention, a consideration of psychache as the basis for behavior in suicidal clients is discussed. Finally, dialectical behavioral therapy, problem solving therapy, and cognitive therapy are examined as mechanisms for addressing the needs of suicidal clients, with a consideration of specific counseling techniques available and effective within those contexts. Working with suicidal clients is challenging.
The Feasibility and Promise of Dialectical Behavior Therapy Skills Training with Teachers and School	2022	Teachers and School Personel	This study examined the feasibility and promise of using virtual Dialectical Behavior Therapy Skills Training (DBT-ST) with educators. DBT-ST was offered to 39 educators (89% female, mean age 46.45)

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in one high-poverty school district during the COVID-19 pandemic using a pre-post design. Educators attended five of eight groups (Mode = 8) and there were statistically significant decreases in stress ( $p = 0.001$ ,  $r[\text{subscript rb}] = -0.51$ ) and dysfunctional coping ( $p = 0.000$ ,  $r[\text{subscript rb}] = -0.57$ ), and increases in DBT skill use ( $p = 0.016$ ,  $r[\text{subscript rb}] = 0.44$ ). Ratings on anxiety and depression were unchanged. The  $\chi^2$  analyses indicated a significant relationship between stress and attendance with the high stress group more likely to attend the groups than the low stress group,  $\chi^2(1) = 4.88$ ,  $p = 0.027$ . DBT-ST may be feasible for teachers but future considerations regarding the role of mental health personnel in delivering teacher health and wellness interventions is warranted.

Effect of Dialectical Behavioral Therapy Skills Training for Emotional Problem Solving for Adolescents (DBT STEPS-A) Rural Ninth Grade Students Program

2022 92 Student

A classroom guidance curriculum following the dialectical behavior therapy skills training for emotion problem solving for adolescents (DBT STEPS-A) was evaluated using a pretest-posttest nonequivalent groups quasi-experimental design. Data from 94 ninth-grade students (42 treatment, 52 control) enrolled in a rural high school were analyzed via hierarchical linear modeling. Results indicated a treatment effect on students' self-reported social resilience and emotion regulation difficulties, indicating potential for the classroom guidance curriculum. Results from exploratory analyses also supported a treatment effect for understanding and acceptance of DBT skills. The findings have direct implications for school counselors and other school-based mental health professionals, highlighting the positive effects of proactively employing universal social and emotional learning interventions targeting the development

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of adolescent social and emotional skill building. A discussion on future practice and research is also included.

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## DISCUSSION

The review conducted by the researcher is divided into several discussions which will be discussed based on the literature found by the researcher as follows;

### **Philosophy of Dialectical Behavior Therapy**

Dialectical Behavior Therapy's philosophy that emotional dysregulation is a fundamental problem that leads to disorganized behavior helps practitioners to remain non-judgmental and accepting, DBT's philosophy that encourages validation and transparency allows practitioners to engage adolescents in what will be hard work towards change.

### **Behaviors to Manage Emotional Pain**

Behaviors that are so dangerous and problematic in adolescent life are seen as the way adolescents have learned to manage emotional pain (Linehan, 1993a). This part of mine is not attention-seeking or "manipulative. Teenagers are not "lazy," "disobedient, or "opposite. Both teens and parents are innocent.

Practitioners using the DBT framework recognize and acknowledge pain, as well as intense emotions that lead to dangerous behavior and that bring clients and their families to care. Parents and adolescents understand very quickly that if these behaviors have been learned, then new behaviors can be learned to replace them and DBT will provide a special way to improve life. Help is clear: hope becomes possible. In a validated and accepting environment in which adolescents do not feel "badly" or to blame, adolescents are better able to accept the feedback provided and are less defensive about their own behavior.

### **Process Treatments**

Practitioners strive to explain the processes, theories and structures of Treatment to adolescents and their families so that they are transparent, and involve them in the collaborative process of the Adolescents from the practice of Dialectical Behavior Therapy (DBT) that the work they will do together will help them achieve their own goals in life; the process of developing goals engenders confidence, as does ongoing practical explanation of how each skill will help him. Practitioners may even reveal their own use of the skill. The explanation of the reason for using the skill occurs continuously. This approach increases youth's willingness to be involved in the change process.

### **Dialectical Behavior Therapy (DBT) Treatment Structure**

Dialectical Behavioral Therapy (DBT) demands that practitioners teach new skills and behaviors in an organized and structured way that moves adolescents and families from feeling miserable to developing the lives they desire (Linehan, 1993), DBT guides practitioners to target symptomatic behaviors in ways strategic and logical.

### **Advanced Development**

Dialectical behavior therapy (DBT) is a method developed by Marsha Linehan by focusing on present experiences and acceptance. Initially, DBT was intended for people with Borderline Personality Disorder (BPD) who have suicidal tendencies and

self-harm. But recently, DBT is also effective in helping not only BPD patients, but also some psychological problems such as victims of domestic violence who are overcome with negative emotions. DBT has four basic and important skills, namely: (1) distress tolerance, (2) mindfulness, (3) emotional regulation, and (4) interpersonal effectiveness.

## **CONCLUSIONS AND RECOMMENDATIONS**

Based on the results of the literature review above, it can be concluded that violent behavior and suicide attempts are not only carried out by adults, but children and adolescents also receive more attention for this behavior. Many unnecessary problems in children and adolescents occur due to hostile environmental factors, giving rise to many abnormal behaviors such as aggressiveness, truancy, drunkenness, drugs and promiscuity. Some areas have moved towards this child-friendly environment, so that abnormalities often make individuals experience uncontrollable emotions. To overcome this problem, one of the therapies that can be used to treat personality disorders is Dialectical Behavior Therapy and is very effective in helping clients find ways to change themselves before, because Dialectical Behavior Therapy (DBT) focuses on developing emotional regulation, which uses strategies cognitive and behavioral and reduce maladaptive behavior. Dialectical Behavior Therapy (DBT) is carried out by way of dialogue, with the aim that sufferers can control their emotions, accept pressure, and improve relationships with other people. This therapy can be done alone or in a consulting group with a therapist. Further studies with larger sample sizes are urgently needed in assessing the broader effects of Dialectical Behavior Therapy (DBT). It is hoped that it can be used as an academic experience, add knowledge and deepen insight for writers about the fields studied in the preparation of Scientific Writing with the Literature Review methodology approach.

## **FURTHER STUDY**

Every research is subject to limitations; thus, you can explain them here and briefly provide suggestions to further investigations.

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