

# Radically Open Dialectical Behavioral Therapy (RO-DBT) in the Treatment of Eating Disorders

Emily Hartl, MA, LCPC

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# Disclosure Statement

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# Objectives:

Through this presentation, we will discuss the following:

Review the neurobiosocial theory and biotemperament principles that are the foundation of the RO-DBT modality

Identify differences between undercontrolled biotemperament and overcontrolled biotemperament

Understand how the RO-DBT modality pertains to the treatment of eating disorders

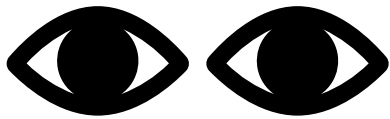


# Let's Talk About Bioperament

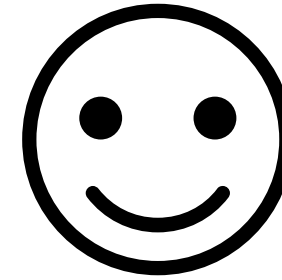
Genetic and biological predispositions that affect one's perception and regulation of emotions

“Temperament” is purely genetic; however, we will be talking about this in terms of a “trait” (combination of biology/genetics AND environment, e.g., nature and nurture)

Bioperament is the biological basis of emotion that influences two important principles:



How we perceive the world



How we regulate emotion



**“What if I’ve been using DBT to treat clients and patients with eating disorders?”**

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# DBT: How We've Used It To Treat Eating Disorders

Type of Skill	Application
Mindfulness	Increase overall awareness (interoception, proprioception, exteroception, etc.) in order to reduce impulsivity, increase cognitive control, reduce judgment, and increase objectivity in perspective
Distress Tolerance	Increase ability to sit with distress and allow it to reduce naturally, without engaging in maladaptive coping; to expand overall window of tolerance; to promote acceptance of present reality
Emotion Regulation	Reduce vulnerability to “emotion mind”; manage and cope with emotions effectively without resorting to maladaptive coping; to change habitual emotional responses; to improve emotion identification
Interpersonal Effectiveness	Combat communication patterns that we know are often inherent in predisposition to eating disorders; to promote identification of the “middle path”; to help build healthy and effective supports for recovery while limit-setting with those who harm recovery



# Neurobiosocial Theory (in a nutshell!)

Maladaptive overcontrol is essentially the result of a convergence of three primary factors:

## Nature

- Biotemperament
- Genetic influences

## Nurture

- Influences from family and culture
- Influences from environmental factors
- How these factors impact learning

## Coping

- Use excessive self-control under stress
- Compulsively fix problems
- Deficits in prosocial signaling



# Biotemperament and Biosocial Theory: Nuts and Bolts

## Differences Between Overcontrolled vs. Undercontrolled Presentation

Temperamental Domain	Overcontrolled	Undercontrolled
Threat Sensitivity	↑	↓
Reward Sensitivity*	↓	↑
Novelty Seeking	↓	↑
Detail-Focused vs. Globally-Focused Processing	Detail-Focused	Globally-Focused
Inhibitory Control*	↑	↓
Distress Tolerance*		





# Overcontrolled and Undercontrolled Traits and Coping

<u>Overcontrolled (OC)</u>	<u>Undercontrolled (UC)</u>
<ul style="list-style-type: none"><li>• Get minimal sense of reward from most things, even things one really wants</li><li>• Highly focused on details</li><li>• Cautious or sensitive to threat and avoid whenever possible</li><li>• Inhibited</li><li>• Hold true emotions close to self; more constricted and/or may cover express opposite of way one feels (e.g. smile emotions)</li><li>• Can be highly rigid, planned, and perfectionistic</li><li>• Behaviors are often determined by perceived rules and belief about what is right</li><li>• Tend to avoid new experiences, sensations, or risks</li><li>• Want to be appreciated for self-sacrifice, achievements, and hard work</li></ul>	<ul style="list-style-type: none"><li>• High focus on sense of reward</li><li>• Often don't attend much to smaller details</li><li>• Less cautious or sensitive to threat and sometimes disregard threat in service of seeking reward</li><li>• Uninhibited</li><li>• Emotionally expressive; dramatic</li><li>• Less rigid, more spontaneous and impulsive</li><li>• Behaviors are often mood dependent</li><li>• Actively seek new experiences, sensations, and are more risk-taking</li><li>• Want to be understood</li></ul>



**“Okay, I think I’m starting to get it. How does this tie into the treatment of eating disorders?”**

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# Some Important Theoretical Principles:

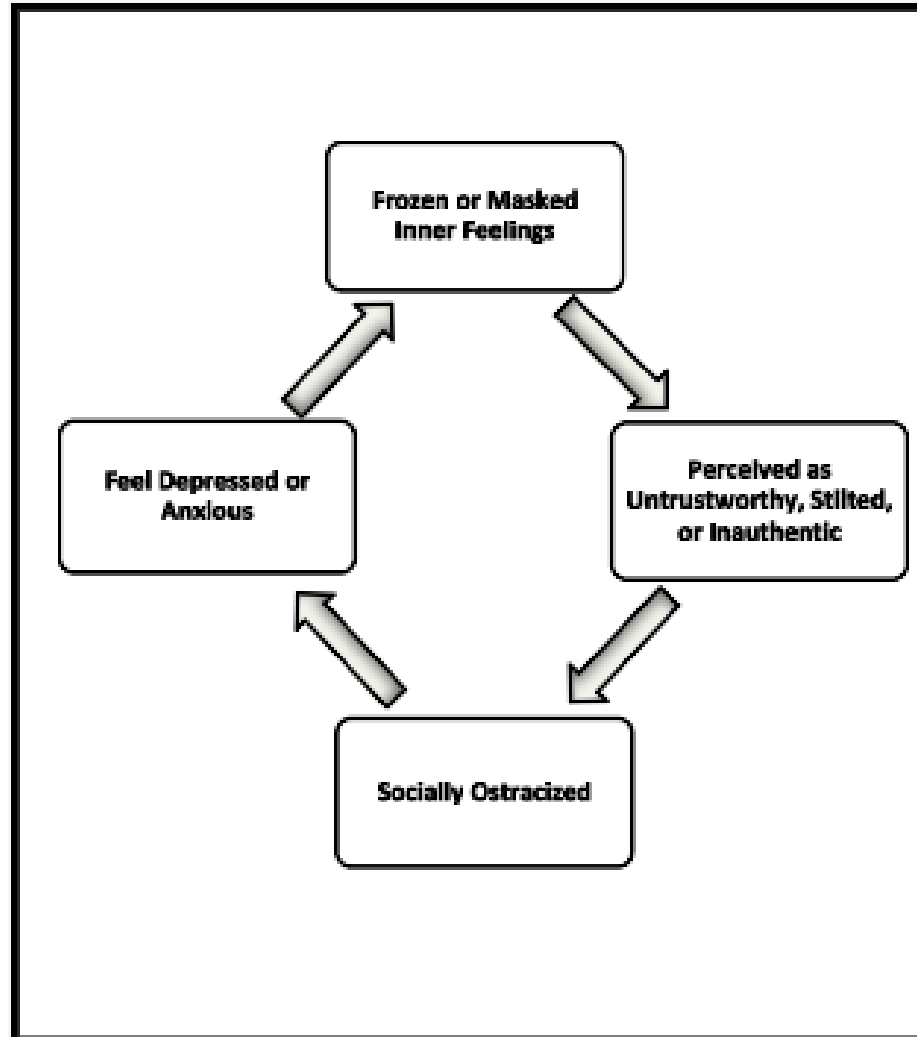
1. RO-DBT skills will *not* teach how to take things more seriously, try harder and increase effort, or improve publicly and socially acceptable behavior (our OC clients already do this... often TOO much!)
2. Overcontrolled clients with *maladaptive* overcontrol lack three main facets of psychological health:
  1. Openness and receptivity (why would I be open to new ideas when they feel so threatening to my view of life?)
  2. Flexibility (rigidity helps me feel a sense of control – I LOVE RULES.)
  3. Social connectedness (In order to connect with others, I have to be vulnerable and show my authentic emotions with others... that sounds TERRIFYING.)
3. RO-DBT differs from many other types of treatment because it does **not** consider the eating disorder (or the depression, or the OCD, or the neurodivergence, etc.) to be the primary issue. Rather, we see these mental health problems as symptoms or results of maladaptive overcontrol and excessive overcontrolled coping.



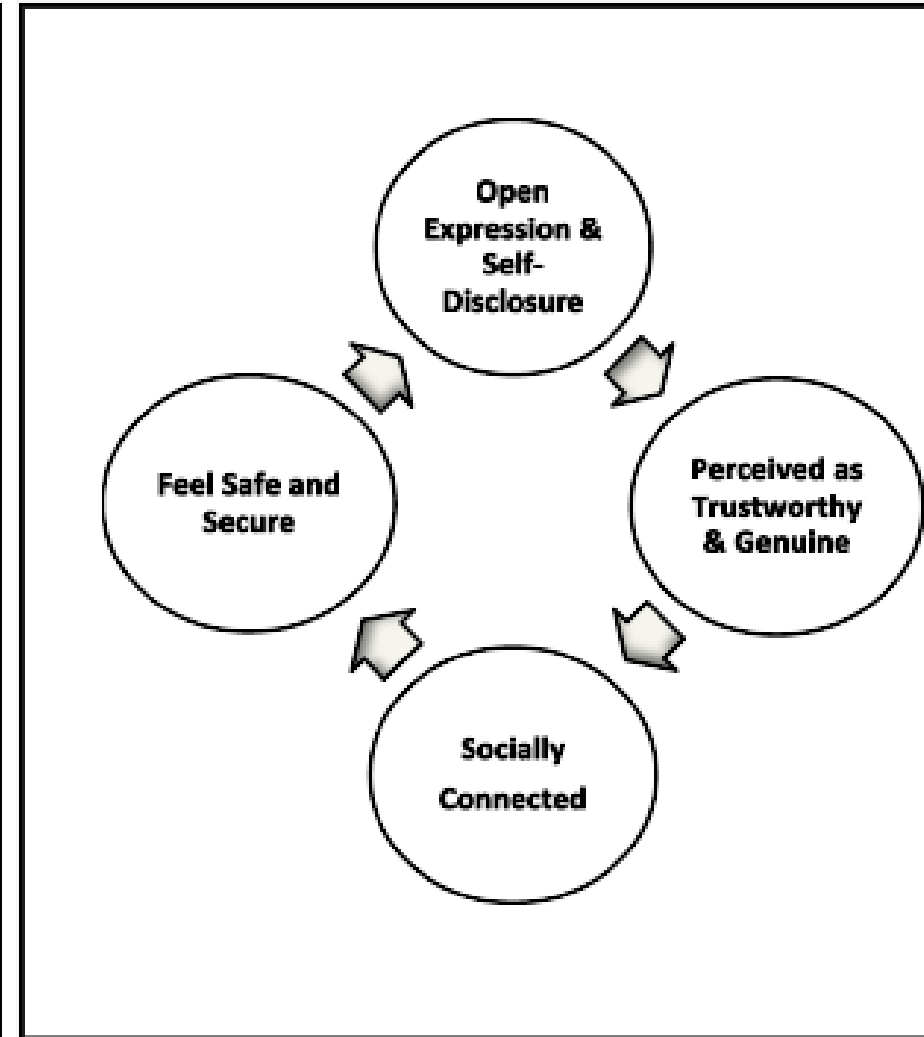
# A novel mechanism of change:

Open Expression = Trust = Social Connectedness

*Overcontrol*



*Flexible-Control*



# RO-DBT + Eating Disorders

If my client or patient is *overcontrolled*...

Uses eating disorder behaviors to numb or down-regulate intense emotions (e.g., engage in purging or bingeing to disconnect from feelings of distress)

May utilize superior inhibitory control to resist impulses and urges (e.g., resist the urge to eat even when hungry)

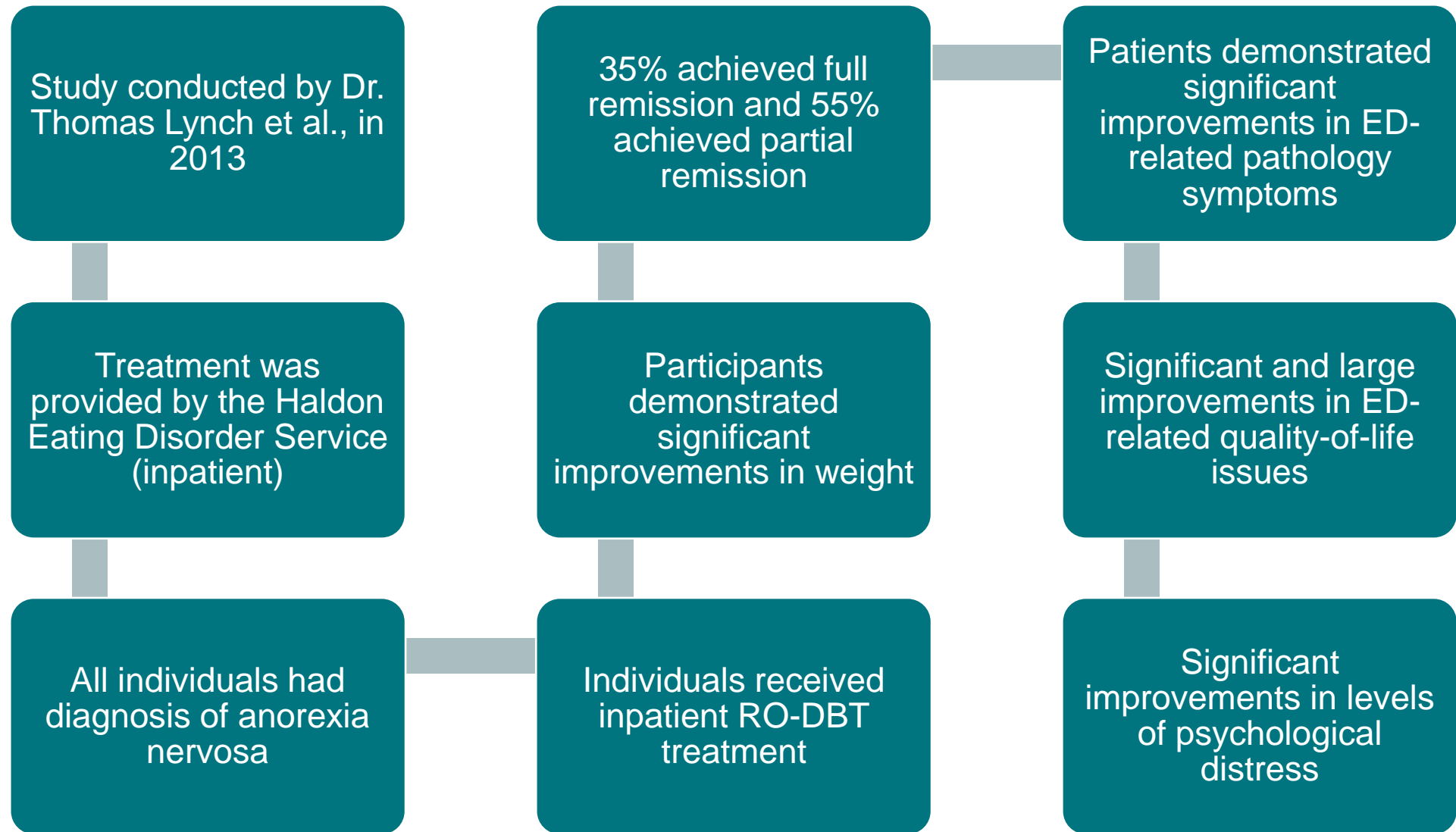
Possible Presentations

High threat sensitivity and low novelty seeking present unique challenges in pursuing recovery (e.g., asking OC patients to break their ED “rules” that help them feel safe)

May struggle with too much attention to small details which impairs ability to see the big picture (e.g., hyperfixating on “failure” at one single meal without acknowledging overall progress)



# RO-DBT and Eating Disorders – Research Study Example



**“[Participants] described that the treatment had a holistic view of their problems, beyond mere focus on food and weight, which helped them reduce both maladaptive overcontrol and eating disorder symptoms.”**

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Isaksson, M., Ghaderi, A., Wolf-Arehult, M. *et al.* Sharing and connecting with others – patient experiences of radically open dialectical behavior therapy for anorexia nervosa and overcontrol: a qualitative study. *J Eat Disord* **9**, 29 (2021).  
<https://doi.org/10.1186/s40337-021-00382-z>



“Clinical practice and emerging research show that to treat an eating disorder, it’s better to address the underlying cause of the disorder, such as overcontrolled coping, rather than the overt problem (e.g., anorexia). For example, you can see the trunk and limbs of a tree, but the roots are not so obvious. If we were to remove the limbs of the tree (similar to addressing the restriction, purging, binge eating, or other symptoms of an eating disorder), the roots would be left untouched (the overcontrolled personality style). Just as treating the roots of a tree can make the limbs healthier, treating the overcontrol can affect the maladaptive eating disorder emotions and behaviors, by making it easier for an ED sufferer to live their values, express themselves more openly, be more flexible, and connect with others.”

From *“The Radically Open DBT Workbook for Eating Disorders: From Overcontrol & Loneliness to recovery & Connection”*





# Examples of RO-DBT Skills

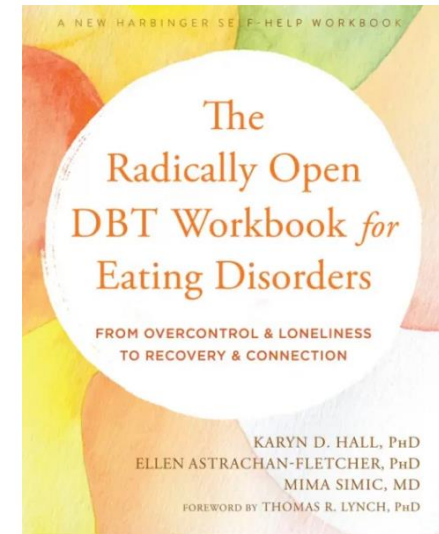
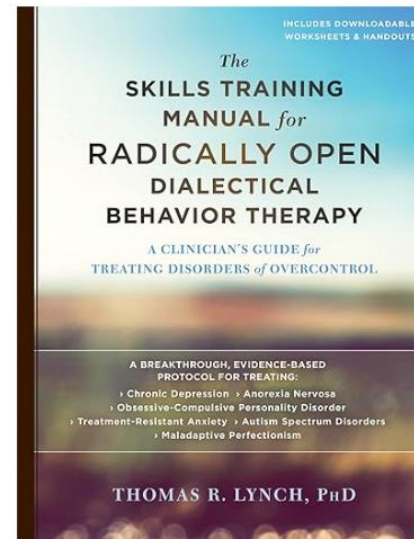
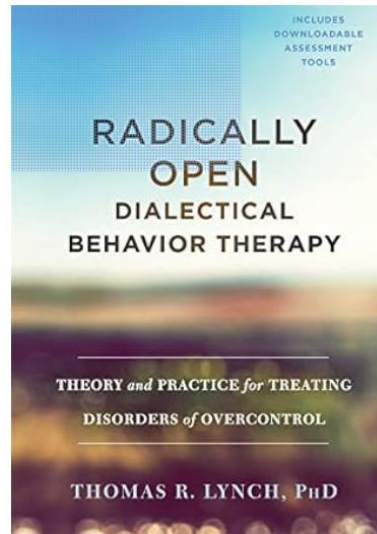
Taught from 'The Skills Training Manual for Radically Open Dialectical Behavior Therapy'

- How to activate social safety in order to enhance openness to new information and experiences, and improve social connectedness
- Engaging in novel behavior
- Social signaling patterns, when they become maladaptive, and why they matter
- How to improve ability to receive difficult or challenging feedback
- How to incrementally build intimacy and connectedness with others and gradually expand vulnerability
- Evolutionary origins of self-conscious emotions such as shame, guilt, and embarrassment
- When aspects of overcontrol are a good thing... and when they aren't
- Mindfulness skills that are specifically oriented to maladaptive overcontrol
- Forgiveness and grieving
- And so much more!



# RO-DBT Resources

Website: [www.radicallyopen.net](http://www.radicallyopen.net)



# References

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# THANK YOU

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