Assessment of Treatment-Interfering Behavior: A Collaborative Approach

C. Alec Pollard, Ph.D.
Saint Louis University & Saint Louis Behavioral Medicine Institute

April 14, 2012
ADAA, Washington DC
Organizations that have previously supported my work

- Sydney Baer Foundation
- US Substance Abuse and Mental Health Services Administration
- OC Foundation (currently IOCDF)
- Behavior Therapy Research Foundation
- Solvay
- Upjohn
- Forest
- Pfizer
- Eli Lilly
Therapist Errors in the Age of Evidence-Based Treatment

1. Not using E-BT when it is indicated

2. Persisting with E-BT when it is not working
“First off, we need to kill the impulse to rip up our Anger Workbook.”
Treatment-Interfering Behavior (TIB)

- Behavior incompatible with effective participation in treatment
- Defined by functional outcome, not by intention
- Represents a pattern of behavior
- Can be failure to adequately seek, accept, or participate in treatment
Examples of TIB

- Does not complete therapy homework
- Misses sessions
- Engages in aggression or tantrums
- Dismisses, criticizes treatment model
- Repeatedly switches focus of therapy
- Denies presence or severity of problem
- Provides inaccurate information
- Silence/“I dun-no”/pouting
- Treatment refusal
The TIB Worksheet

A Form to Help Patients & Therapists Identify TIB
What is a TIB? A TIB is any behavior that is incompatible or directly interferes with a person’s ability to participate in treatment successfully. This behavior is important to address because it can prevent people from overcoming problems. A TIB is not defined by a person’s intention, but by the outcome of the behavior. For example, a man who misses therapy sessions to take care of an ill family member is not necessarily trying to disrupt his treatment, but the outcome of his behavior interferes with treatment – in other words, he does not receive the care he needs. For this reason, his pattern of missing sessions would be considered a TIB, no matter why he does it. Also, a TIB is not an isolated event. Typically, it is an ongoing pattern of behavior. Missing one session is probably not a problem, but missing several sessions would be considered a TIB.
Instructions: Please check each TIB listed below that is exhibited by this patient. If there is more than one TIB, circle the number of the one you feel should be addressed first.

1. Does not acknowledge having a problem.
2. Does not adequately or consistently acknowledge the problem’s severity or its impact on others.
4. When discussing the nature of the problem or the treatment plan, argues with the treatment team, dismisses the things they say, or lectures them.
5. Attempts to change the focus of sessions to issues not on the treatment plan.
6. Has difficulty explaining the treatment plan or the rationale behind it.
7. Has difficult answering questions in a timely fashion (e.g., provides information not relevant to the question, provides too much detail, does not respond).
8. Is frequently late or does not show up for treatment sessions.
9. Has difficulty following the treatment plan (e.g., does not complete therapy assignments, doesn’t take medication as prescribed) when:
   - accompanied by staff
   - not accompanied by staff.
10. Provides information to the treatment team that is either inaccurate, misleading, or inconsistent (e.g., does not adequately report difficulties, reports different things to different staff members, leaves out critical details)
11. Engages in, threatens to engage in, or hints at engaging in self-destructive acts.
12. Speaks or acts in a way that makes other patients or members of the treatment team feel physically threatened.
13. Other: ___________________________
When to Use the TIB Worksheet

1. You have directly observed the TIB

1. The pt’s primary complaint includes a history of TIB

2. The pt is referred to you by another therapist because of a history of TIB
Involving the Patient in the Assessment of TIB: The Critical Session

- Agenda predetermined
- Objective is to have patient choose one of the 2 options
- Therapist demeanor: *excited* and *apologetic*
- Therapists takes responsibility
- TIB concept explained
- Emphasize functional outcome (not intent)
- Use hypothetical example (no mention of pt’s TIB)
- Invite pt to work on TIB
- If accepts, ask pt to complete *TIB Worksheet*
- Review *TIB Worksheet* together and identify target TIB/Goals
Now what do you do?

That’s another talk
Contact Information

Address: Saint Louis Behavioral Medicine Institute
1129 Macklind Avenue
St. Louis, MO 63110

Phone: 314-534-0200, Ext. 424
Fax: 314-289-9427
Email: pollarda@slu.edu
Website: www.slbmi.com