

Identifying Treatment Interfering Behaviors (TIBs)¹

What are TIBs? A TIB is any behavior that is incompatible or directly interferes with a person's ability to participate in treatment successfully. TIBs are important to address, because they can prevent people from overcoming problems. TIBs are primarily defined by a person's behavior (or lack of), not their intentions. For example, a person not engaging in daily exposure exercises, because they are caring for a sick parent does not have the intention of disrupting treatment. However, the behavior is still a TIB and it is important to address. Some reasons may be useful to identify for the purposes of designing anti-TIB measures. TIBs are ongoing behaviors; a single instance of disrupted treatment is not a TIB. Finally, it's okay if you don't have a reason for your TIB. Identifying the behavior is the most important step.

Instructions: If you are having any difficulty with your recovery program, please check any of the items below that may apply.

Exposure Issues:

- 1. Not engaging in daily exposure.
 - a. It makes me too anxious.
 - b. I don't seem to have time.
 - c. I don't want to take the risk.
 - d. other _____
- 2. Lying to helpers about your doing exposures or any aspect of treatment.
- 3. Other _____

Response Prevention Issues:

- 1. Not using response prevention.
 - a. It makes me too anxious.
 - b. I don't want to take the risk.
 - c. other _____
- 2. Ritualizing following exposure.
 - a. It makes me too anxious.
 - b. I don't want to take the risk.
 - c. My mind won't let me rest until I ritualize.
 - d. other _____
- 3. Other _____

Script Issues:

- 1. Not listening to scripts as often as possible.
 - a. It's too much work.
 - b. I don't want to take the risk.
 - c. other _____
- 2. Not writing or listening to scripts at all.
 - a. It's too much work.
 - b. I don't have an MP3/iPod player.
 - c. I can't write or don't know what to write..
 - d. I don't like the sound of my voice.
 - e. other _____

Treatment Preparation Issues:

- 1. Not filling out forms to assist in designing treatment:
 - a. I don't think they are necessary.
 - b. It's too much work.
 - c. other _____

¹Adapted from Pollard, C.A. (2006). Treatment readiness, ambivalence, and resistance. In M.M. Antony, C. Purdon, & L. Summerfeldt, *Psychological treatment of OCD: Fundamentals and Beyond*, (pp. 61-75). Washington D.C.: APA Books. This appears in *From Freedom from Obsessive Compulsive Disorder: A Personalized Recovery Program for Living with Uncertainty* by Jonathan Grayson. Penguin-Putnam. NYC, NY. 2014.