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Doing FAP is Doing Assessment


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The ramp up

- FAP depends on a lot of things
 - It depends on which person
 - It depends on which problem
 - It depends on which context we are talking about for this person with this problem

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The ramp up

- This is what makes FAP challenging
 - We quickly leave a specific technology
 - We leave manualized treatments
 - We leave the realm of when your client does this, it means this, and you do this
 - e.g. it means a dysfunctional thought, it means avoidance


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The ramp up

- Principle and Personal
 - FAP is very **personal**
 - Highly individualized
 - Therapist is very much *in the room*
 - FAP is **principle-based**
 - Using consistent principles to
 - Understand our clients
 - Guide our interventions
 - Can understand all human action this way


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FAP and Assessment

- Doing FAP is Doing assessment
 - **Assess** to know what to intervene on
 - **While you intervene** (FAP), **assess** the impact
 - **After the immediate intervention** (FAP), **assess** the immediate outcome
 - Continue this **assessment-intervention process** and ultimately tie to **outcome goals**
- Idiographic assessment is key to track short- and long-term client gains

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FAP

Overview and
Mechanisms of Change



FAP assumptions

- Many client problems are **fundamentally interpersonal**
 - These are about or inextricably tied to relationships
- Clients form **relationships with therapists** as a part of treatment
- Those client behaviors that occur in relationships with others **will occur with the therapist** as a relationship is developed

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FAP assumptions

- These client **relationship behaviors** with the therapist **are the same behaviors** that the client does with other people
 - These include problem behaviors and improvements
 - These behaviors are not metaphors or re-enactments
 - These are the real deal, live, and in-person
 - AND...

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FAP assumptions

- The therapist has **direct access** to the client behavior **as it occurs** in-session
 - Specifically, the therapist has access to contingencies that give rise to and support client behavior in-session
 - Of course, outside of session behavior is important
 - But, therapist only has direct access to **verbal report** of that out of session behavior
 - SO...

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FAP assumptions

- The therapist will **change client behavior** by **directly responding** to that behavior in-session
 - The assumption here is that the behavior the client does inside of session is the same as what he or she does outside of session with others
 - How do we know?
 - We'll get to that...

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FAP and mechanisms of change

- Mechanism of clinical change: in vivo responding to client behaviors
- **In-session contingent responding to client problems and improvements**
 - Use therapeutic relationship to provide consequences to (consequence) improvements and ineffective strategies
 - Respond to client behaviors as they impact the therapist

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FAP and mechanisms of change

- Therapist gives response as member of social community to how client's behavior impacts the therapist
- Uses social consequences (contingencies)
 - Informs client of impact of behavior on therapist
 - What works and what doesn't

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FAP and mechanisms of change

- FAP therapist's goal
 - Attempt to prompt and shape new and more effective client responses
 - Successive approximation
 - What about punishment?
 - Not used very much at all
 - May create temporarily aversive states
 - Constantly clarifying for client why we are doing this work in-session
 - Therapist responses are all based on client's (agreed to by therapist) goals for intervention
 - Based on assessment...

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FAP and clinical populations

- Really, anyone
 - After meeting the person
 - Targets or goals appear to be about skills for
 - Finding
 - Creating
 - Maintaining
 - Relationships
 - For many of us, everything is personal
 - Said differently, everything is interpersonal

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Assessment



Functional Analytic Psychotherapy (FAP) Assessment

- Requires a **functional analysis** and **case conceptualization** of **individual** client's behavior
 - The key is **functional** in the sense of *how does it work?*

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Functional Analytic Psychotherapy (FAP) Assessment

- Look for important and alterable variables that control client behaviors
- Especially focused on complex clinical behaviors
- This is tailored to each and every individual client
- Use idiographic analysis of our targets

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FAP assessment

- **Clinically Relevant Behaviors (CRBs)**
 - Occur during a therapy session
 - Define behaviors functionally as *response classes*
 - This is the function
 - Not by what behavior *looks like*
 - What is it *doing* for the client
 - Really doing, not just our intentions (see also paths to Hell)

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FAP assessment

- Assessment can be:
 - Through **interview**
 - Asking questions
 - Through in-vivo **observation**
 - Looking for behaviors in-session
 - Can
 - Evoke or pull for them
 - Or just watch

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The Functional Idiographic Assessment Template

(FIAT)

Downloadable at

<http://www.functionalanalyticpsychotherapy.com>



Assessment strategies: FIAT

- **Functional Idiographic Assessment Template (FIAT)**
 - Callaghan (2001)
 - Behaviorally-based assessment system
 - Breaks client responding into classes of behavior based on function of responding
 - Function is tied to **interpersonal effectiveness and distress**
 - These groupings can be anything you want

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Assessment strategies: FIAT

- Idiographic template
 - Each assessment for each person is **different**
 - Uses common language for classes of behavior across clients
- Goal is to arrive at **intervention through assessment**

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Assessment strategies: FIAT

- Includes targeted problem areas
 - Identification and specification
 - Contextual control
 - Response repertoire
- FIAT system speaks to both
 - **Disruptive behavior** (psychopathology) and
 - **Increased effectiveness** (positive psychology)

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Assessment strategies: FIAT

- Class A: **Assertion of needs/values**
- Class B: **Bidirectional communication**
- Class C: **Conflict**
- Class D: **Disclosure and interpersonal closeness**
- Class E: **Emotions**

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Definitions & Examples

- Gives explicit definitions of **Classes** and **Instances**
 - When, where, with whom does problem occur?
 - What specifically is the client doing?
- Approaches to assessment are highlighted
 - How to ask clients
 - Questions therapists can ask themselves post-session
 - The FIAT-Questionnaire

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Definitions & Examples

- CLASS A: Problems with Identification and Assertion of Needs or Values
- Instance:
 - Problems with identification or specification of needs or values
 - "I don't know what I want from other people."
 - *What would we need to do here for the client?*

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FIAT-C (Pre)

- Examples for all Instances included for client as reminder (in own words)
- For each Class overall:
 - Rate problem for past week
 - Rate progress for past week
 - Rate progress overall

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FIAT-T (Post)

- For each Class:
 - Rate problem for Client for past week
 - Rate progress for Client for past week
 - Rate progress overall for Client in general
 - Rate progress overall for Client with Therapist (in-session)

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So far...

- The assessment dictates the intervention
- The assessment is based on groups of behaviors based on how they function for the client
- Interventions construct a **prosocial repertoire**
 - Interventions are not simply destructive or about removal of problems
- Need to determine
 - How does this behavior function for the client in outside relationships?
 - How will this behavior come into session?
 - How will I respond to it and shape a more effective repertoire given the clients goals?

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Doing Assessment-based FAP

Assess then Do
then Assess again!



FAP in a nutshell

- FAP emphasizes the role of interpersonal relationships
 - Focuses on in-session responding by client to therapist
 - Utilizes the therapeutic relationship to help alter the problematic behaviors AND increase the more effective behaviors

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FAP in a nutshell

- Therapist directly alters client behavior
 - Provides social contingencies to establish and maintain effective responding
 - Referred to as contingent responding
- This client responding *must generalize* to other out of session situations
- Therapist *can* get any behavior to occur in room
 - What about self-injury behaviors?
 - Look at function of response

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FAP Therapist's Task

- Continue to, as much as possible, utilize in-session behaviors to assist client in meeting goals of treatment
- Requires very active role of therapist
- Requires therapist to directly comment on behaviors
- Therapist must constantly keep this client's case conceptualization in mind to determine
 - impact of behavior AND
 - how to respond to client

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The process of learning FAP

- Handout on process
 - Assess, then do
 - Start with improvements
 - Assess then do
 - We can all do this
- Eventually, with supervision, can focus on very complex in vivo problems
 - Need supervision for this

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The Conceptualization

- Step 1: Create the Client Conceptualization
 - Use worksheet
 - Create a basic conceptualization of the client using A, B, Cs
 - Do this for an improvement
 - How would this show up outside of session?
 - How would this show up inside session?
 - Can we think of this functionally?

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The Conceptualization

- Layers of the conceptualization
 - Broad understanding of this client and his or her life
 - Understanding his or her goals for treatment
 - Understanding this session or series of session with focused goals
 - Understanding this interaction now and its impact on therapist

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Layers of Conceptualization

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Layers of Conceptualization

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Layers of Conceptualization

- Understanding broad context of client
 - Who is this person
 - How do I make sense of their life?
- Goals of therapy
 - Ongoing goals
 - New or revised goals
 - What are we trying to accomplish in treatment?
- Goals of session
 - This session in a series of sessions
 - What is being targeted today?
- Goals of moment
 - What am I trying to have happen here?

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Layers of Conceptualization

- All of these tied to each other
 - How does this strategy I am attempting now tie into my goals for this session given my intervention in the context of this client's life?
- The conceptualization applied to these levels will tell the therapist what to do next

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Improvements

- Step 2 & 3: **Watch for and Respond to In-session Improvements**
 - Use worksheet
 - Based on the conceptualization of the client using A, B, Cs
 - Consider an improvement
 - How would this show up in-session?
 - What is its impact on you?
 - How could you respond to this naturally?
 - What is the effect of your response?
 - What does this cost you and what does it buy you?

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FAP Responding

- Responding to **in-session** content vs. content about what occurs **outside of session** responding
 - Call this in-session and outside session responding
 - Both are important to understand
 - Outside will help direct you what to look for in-session
 - Remember that everything can show up in-session
 - Looking at actual impact of client behavior
 - We are members of the Greek chorus

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FAP Responding

- Responses should be
 - Natural and representative
 - Prompting and reinforcing alternative, more effective behavior
 - Not wanting to say this is HOW to do it
 - Less focused on rule generation here
 - Want to say, this is WHAT HAPPENS when you do what you do
 - Putting client in verbal contact with contingencies
- Tend to avoid simple reflection and interpretations
- Looking at actual impact of therapist behavior here

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FAP Responding

- Looking at actual impact of therapist behavior here
 - The road to Hell and good intentions
 - Need to be open to not actually doing what we think we are doing
 - Just like clients
 - Just like everyone
 - Key is to look at impact of what we do

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Where are we now?

- Step 4: **Assess progress**
- On-going assessment
 - Assessing progress never stops
 - Can NOT look at pre-, post-
 - MUST constantly re-assess to be FAP
 - Always looking at two levels
 - **In-session** changes with therapist
 - **Outside** session changes with others
 - **MUST have both to be successful**
 - What if we are not successful at both?
 - Use the conceptualization process!!!

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Full-on FAP

- "FAP proper"
 - Prompting and reinforcing alternative, more effective behavior is always key
- Fully efficient FAP requires noticing and responding to **in-session problems**
 - May also prompt or evoke these
 - Do not have to wait for behaviors to improve
 - May be what clients want and expect in therapy
 - May not be...
 - **MUST prompt more effective behavior**

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FAP and ethics

- **UNETHICAL FAP***
 - Responding to in-session problem behavior **WITHOUT** prompting for and **reinforcing alternative, more effective behavior**
 - This is just punitive and aversive to client
 - This is not therapeutic without prompt for more effective behavior
 - Have called this "Sport FAPPING"

*World according to Glenn

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FAP and ethics

- FAP has some risks without full training and on-going supervision
- Responses to improvements in-session are good to do
- Responses to problem behaviors in-session has its risks

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Problems

- Steps 5 & 6: **Watch for and Respond to In-session Problems**
 - Use worksheet
 - Based on the conceptualization of the client using A, B, Cs
 - Consider an occurrence of a client problem
 - How would this show up in-session?
 - What is its impact on you?
 - How could you respond to this naturally?
 - What is the effect of your response?
 - What does this cost you and what does it buy you?

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Thinking about responding to client problems

- Practicing a response to a problem
 - Outside the client pulls away during conflict
 - How would that show up in the room?
 - Think about this functionally
 - How can you respond effectively?
 - What is the impact of your response on the person pulling away?

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Thinking about responding to client problems

- Now, how can you get a **different behavior** to occur that would help create a **more connected relationship**?
 - Now, make that response
 - What is the impact of the person trying something different with you?
 - Are you more connected?

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Where are we now?

- Step 7: **Assess progress**
- On-going assessment
 - Assessing progress never stops
 - Can NOT look at pre-, post-
 - MUST constantly re-assess to be FAP
 - Always looking at two levels
 - **In-session** changes with therapist
 - **Outside** session changes with others
 - **MUST have both to be successful**
 - What if we are not successful at both?
 - Use the conceptualization process!!!

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Taking it on the Road

- **In FAP**
 - Using the therapeutic relationship to reinforce approximations toward more effective relationships
 - **KEY** is to get the client to practice outside of session **WITH OTHERS**
 - MUST get improved behaviors going on out of session

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Being in the room with your own history

- And then there is our own stuff...
 - How do we know what is **the client impacting us**?
 - (What is their stuff?) and
 - What is **our own history coming to bear**?
 - (What is our stuff?!)
- Key is to ask: **What is in the service of the client's goals?**
 - What **gets in the way** for the client?
 - What **helps** the client?

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A Plea for Supervision

- Really need to be willing to address own repertoire as a therapist
 - Some of this you can do by yourself
 - Some of it needs an outside observer
 - Someone separate from you
 - Someone who will call you on your stuff
 - Can conceptualize and assess own therapist behaviors
 - Just like we do with the client!

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The FAST manual

- **Functional Assessment of Skills for Therapists**
 - Callaghan, 2002
 - Uses similar template as FIAT for therapists in training
 - Identify therapist repertoires
 - Goal is to identify therapist behaviors that assist and hinder the implementation of interpersonal therapies (e.g., FAP, FECT)

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The FAST manual

- **Functional Assessment of Skills for Therapists**
 - Callaghan, 2002
 - Use this to empirically document the effect of training and supervision on therapist effectiveness with clients
 - Important to identify strengths and weaknesses of therapist skill set
 - Especially for responding to problem behaviors

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Wrapping up



FAP assessment

- **Doing FAP is Doing assessment**
 - **Assess** to know what to intervene on
 - **While you intervene (FAP), assess** the impact
 - **After the immediate intervention (FAP), assess** the immediate outcome
 - Continue this **assessment-intervention process** and ultimately tie to outcome goals
- Idiographic assessment is key
 - Track short- and long-term client gains

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Learning FAP

- **DO** assess client problems idiographically
- **DO** watch for and respond to client improvements in session
- **DO** work to have these occur outside in the clients life
- **BE CAREFUL** with client problems and your responses
- **ALWAYS** prompt for a more effective client response following addressing a problem behavior in-session

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