

Helping Families of Treatment-Refusers:

The Family Well-Being Approach



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Last Year's Presentation

- Provided detailed update on the past 20 years

▀ Today's Presentation

1. Description of *Family Well-Being Consultation*
2. Future Directions



Pop Quiz



This is the most common clinician response to families seeking help for a treatment-refuser.





a) What is
"There's nothing
I can do?"

b) What is
"Have him call
me when he's
motivated?"

c) What is
"Sorry, I don't
take your
insurance?"

TYRO
FERGUSON

**Actually, all
3 answers
are correct.**

**That's what
your mother
said!**



The Family Burden of OCD

- 75% of family members report feeling distress dealing with OCD or experience disruption to their lives*
- 1/4 of primary caregivers: “severely burdened”**
- Impact includes: 1) direct interference with life; and 2) secondary emotional responses (e.g., guilt, anger, anxiety)
- Multiple studies suggest direct and significant impact***

*Calvacoressi et al., 1999; Cooper (1993); **Laidlaw et al., 1999; ***Black et al., 1998; Steketee, 1997.

The Extra Burden of Treatment-Refusal

- Emotional responses may be even more pronounced
- Hopelessness
- Greater family conflict
- Lack of resources to assist

■ Evolution of the Project

- Phase 1: *Early Development*
- Phase 2: *BFC Model*
- Phase 3: *CFTR Model*
- Current Phase: *The Family Well-Being Model*



Family Well-Being Consultation

Helping Families Deal Effectively with Recovery Avoidance



The Family Consultation Team

*Center for OCD & Anxiety-Related Disorders
Saint Louis Behavioral Medicine*

Original Team

- Gary Mitchell, MSW, LCSW
- Heidi Pollard, RN, MSN
- Alec Pollard, Ph.D.
- Melanie VanDyke, Ph.D.

Additional Collaborators

- Gloria Mathis, Ph.D.
- Julie Hill, Ph.D.
- Amy Kurz, MSW, LCSW

Concepts Used in *Family Well-Being Consultation*

- Recovery Avoidance
- Accommodation of Commission
- Accommodation of Omission
- Minimizing
- Recovery Avoidance Trap

Recovery Avoidance

- *Persistent failure to pursue or adequately use available resources to resolve problems or improve health or functioning.*

Note that:

- Defined by functional outcome (not intention)
- Must be a pattern of behavior

■ Accommodation of Commission

- *Participating in compulsions or facilitating avoidance of obsessional triggers in an attempt to assist a relative with OCD.*

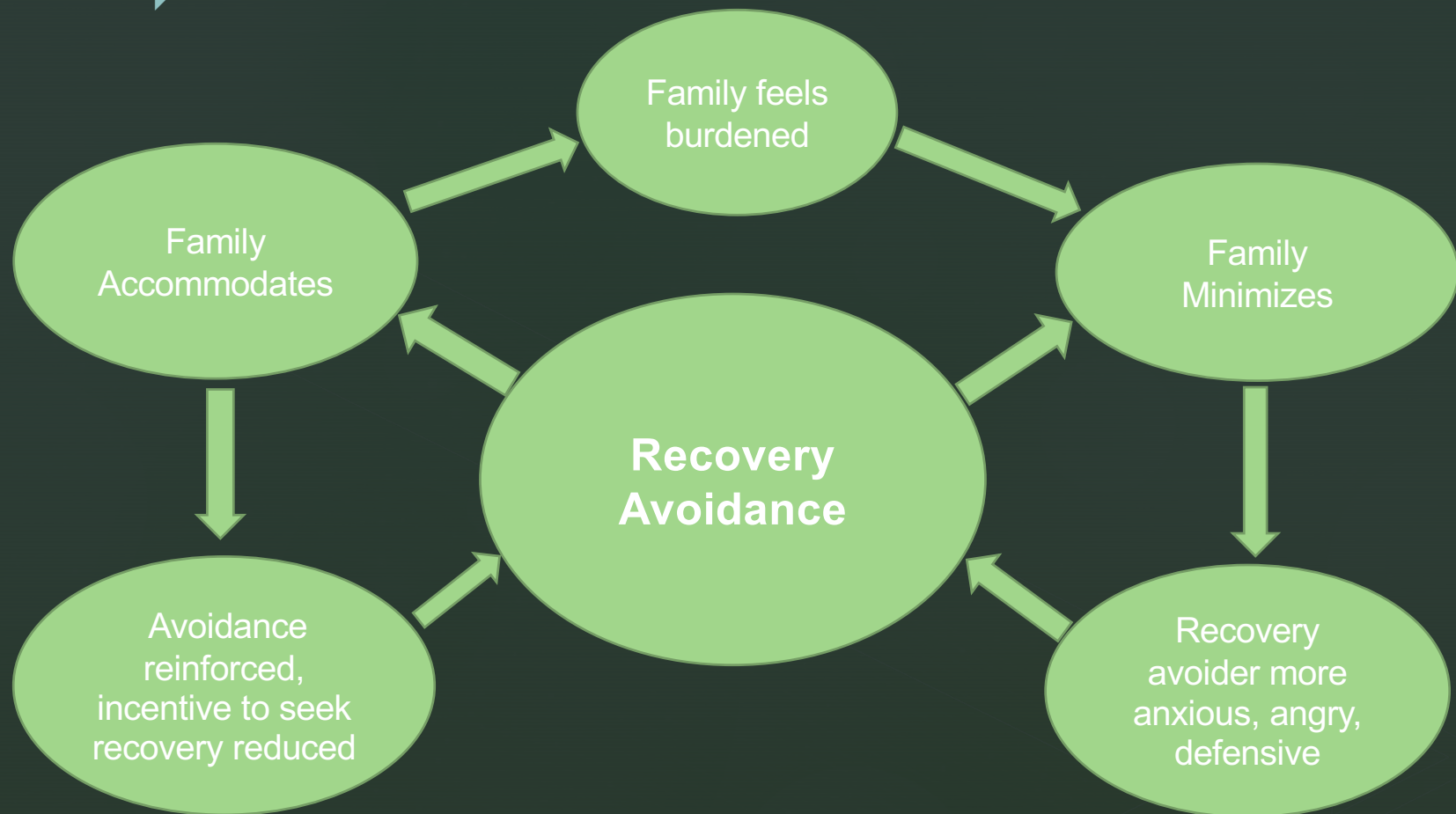
■ Accommodation of Omission

- *Discontinuing valued activity as a result of attempts to assist a relative with OCD.*

■ Minimizing

- *Persistent, ineffectual verbal behavior (e.g., yelling, nagging, lecturing, pleading, criticizing) intended to convince an individual to change.*

The Family's Recovery Avoidance Trap



Assumptions of Family Well-Being Consultation

- Recovery avoidance is a function of the same types of factors that influence other behavior (e.g., reinforcement, beliefs, skill levels).
- Any attempt to modify recovery avoidance that does not address the factors driving the behavior will be unsuccessful.

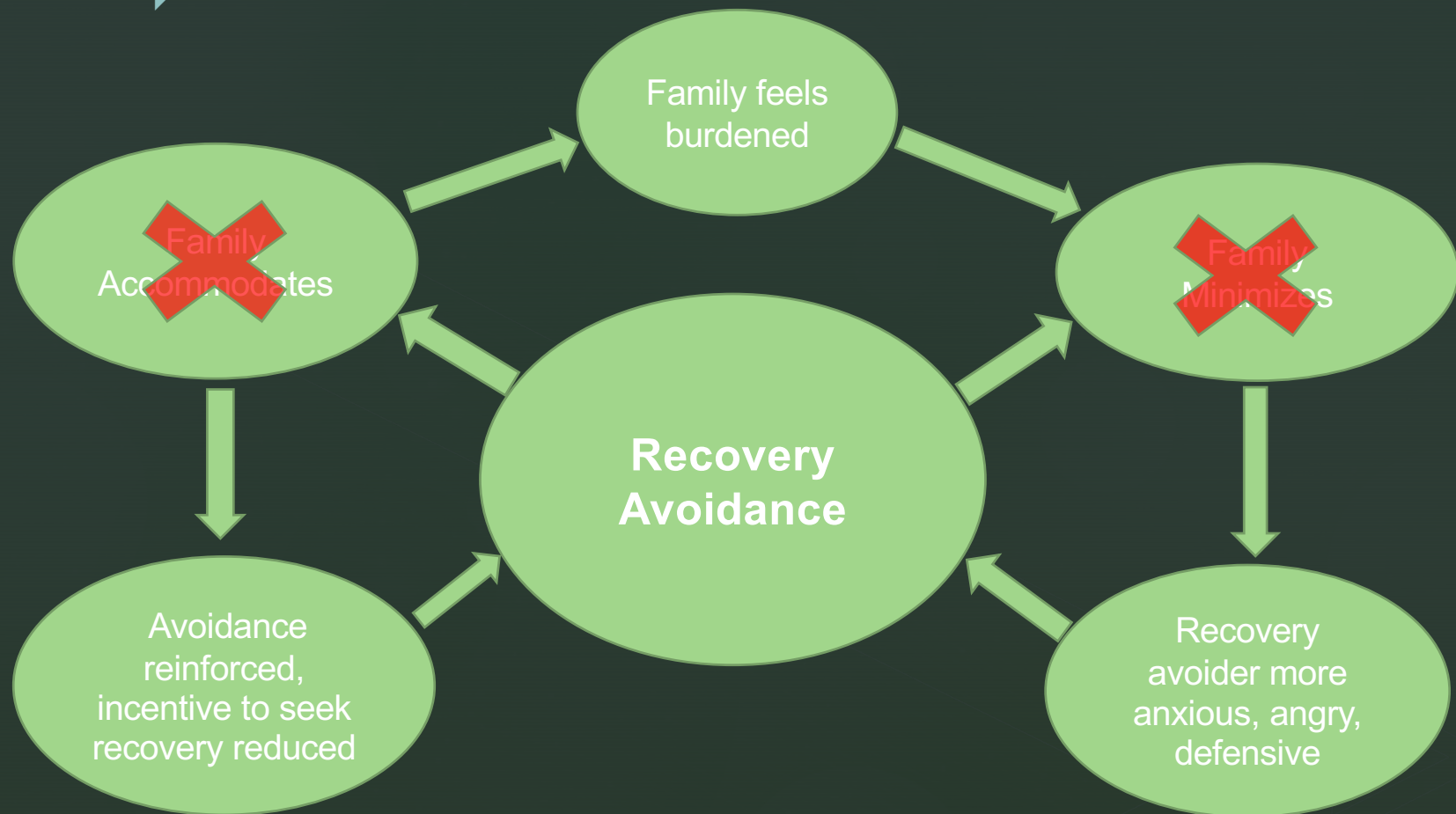
Assumptions of Family Well-Being Consultation, continued

- The natural family response to recovery avoidance is usually ineffectual and often counterproductive.
- It is ineffectual because it does not address the real factors that drive the behavior.
- It is counterproductive because it reinforces the disorder and reduces incentive to seek recovery.

Assumptions of Family Well-Being Consultation, continued

- Families burdened by recovery avoidance are stuck trying to change the recovery avoider, often at the expense of family well-being.
- Impairments to family well-being compromise the family's ability to adopt or implement the kinds of strategies that might be more productive.
- Families with improved well-being will be more effective in dealing with recovery avoidance.

Initial Focus of Family Well-Being Consultation



Modules of Family Well-Being Consultation

1. Education and Engagement
2. Recapturing *PFM's Neglected Valued Activities
3. Reducing PFM's Counterproductive Behavior
4. Promoting Recovery-Seeking in the **RA
5. Dealing with Obstacles
6. Planning for Long-Term Family Welfare

*PFM = participating family member; **RA = recovery avoider

Future Directions

- Expand the scope beyond OCD
- Publish manual
- Conduct additional research
- Improve access for families



POST-TEST

This is how therapists *should* respond to families seeking help for a treatment-refuser.



What is "Although your relative is unwilling to come in, perhaps I could help you and the family."



**That is
correct!**

**That's what
your wife
said!**



Contact Information

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