

■ Pre-treatment

■ Follow-Up

■ Discharge

Brown Assessment of Beliefs Scale (BABS)

Name _____ Diagnosis _____

Date _____ Treatment _____

Belief: Describe principal belief(s) during the past week: _____

For each item circle the number identifying the response which best characterizes the patient over the past week. The patient's specific belief can be incorporated into the question - for example. "How convinced are you of this belief-that touching doorknobs will make you ill?" Optional questions are indicated in parentheses: instructions to the interview are italicized.

1. Conviction

How convinced are you of these ideas/ beliefs? Are you certain your ideas/ beliefs are accurate? (What do you base your certainty on?)

- 0- Completely convinced beliefs are false (0% certainty)
- 1- Beliefs are probably not true, or substantial doubt exists.
- 2- Beliefs may or may not be true, or unable to decide whether beliefs are true or not.
- 3- Fairly convinced that beliefs are true but an element of doubt exists.
- 4- Completely convinced about the reality of held beliefs. (100% certainty)

2. Perception of others' views of beliefs

What do you think other people (would) think of your beliefs? [PAUSE] How certain are you that most people think your beliefs make sense.

(Interviewer should clarify if necessary that the patient answers this question assuming that others are giving their honest opinion)

- 0- Completely certain that most people think these beliefs are unrealistic.
- 1- Fairly certain that most people think these beliefs are unrealistic.
- 2- Others may or may not think beliefs are unrealistic, or uncertain about others' views concerning these beliefs.
- 3 - Fairly certain that most people think these beliefs are realistic
- 4- Completely certain that most people think these beliefs are realistic.

3. Explanation of differing views

You said that *(fill in response to item 1)*, but that *(fill in response to item 2)*. [PAUSE] How do you think and what others think about the accuracy of your beliefs? (Who's more likely to be right?)

(Interviewer should not ask this item if responses on item 1 and 2 are the same. In that case give the same score as items 1 and 2.)

- 0- Completely certain that beliefs are unrealistic or absurd (e.g., "my mind is playing tricks on me.")
- 1- Fairly certain that beliefs are unrealistic.
- 2- Uncertain about why others don't agree-beliefs may be unrealistic or others may be wrong.
- 3- Fairly certain that beliefs are true: view of others is less accurate.
- 4- Completely certain that beliefs are true: view of others is not accurate

CONFIDENTIAL

4. Fixity of ideas

If you were to question (or challenge) the accuracy of your beliefs, what would your reaction be? [PAUSE] Could I convince you that you're wrong?

(If necessary, supply a nonconfrontational example.)

(Rate on the basis of whether the patient could be convinced, not whether s/he wishes s/he could be convinced.)

5. Attempt to Disprove Ideas

How actively do you try to disprove or reject your ideas or beliefs? How much of an effort do you make to convince yourself that your beliefs are inaccurate?

(Interviewer should rate attempts patient makes to talk himself/ herself out of the beliefs, not attempts to push the thoughts/ideas out of his/her mind or think about something else.)

6. Insight

What do you think has caused you to have these beliefs? [PAUSE] Do they have a psychiatric or psychological cause, or are they actually true?

(Interviewer should determine what the patient actually believes, not what s/he has been told or hopes is true. Psychological enology should be considered equivalent to psychiatric illness.)

(Recognition that the thoughts are excessive -i.e. taking up too much time - or causing problems for the patient should not be considered equivalent to psychiatric! psychological enology. Instead, rate patients awareness that the source/ cause of the beliefs are psychiatric! psychological.)

- 0- Eager to consider the possibility that beliefs may be false; demonstrates no reluctance to entertain this possibility
- 1- Easily willing to consider the possibility that beliefs may be false; reluctance to do so is minimal.
- 2- Somewhat willing to consider the possibility that beliefs may be false, but moderate resistance is present.
- 3- Clearly reluctant to consider the possibility that beliefs may be false, but moderate resistance is present.
- 4- Absolutely refuses to consider the possibility that beliefs may be false-i.e., beliefs are fixed.

- 0- Always involved in trying to disprove beliefs, nor not necessary to disprove because beliefs are not true.
- 1- Usually tries to disprove beliefs.
- 2- Sometimes tries to disprove beliefs.
- 3- Occasionally attempts to disprove beliefs.
- 4- Makes no attempt to disprove beliefs.

- 0- Beliefs definitely have a psychiatric! psychological cause.
- 1- Beliefs probably have a psychiatric/ psychological cause.
- 2- Beliefs possibly have a psychiatric/ psychological cause.
- 3-¹³ Beliefs probably do not have a psychiatric/ psychological cause.
- 4- Beliefs definitely do not have a psychiatric/ psychological cause.

TOTAL BABS SCORE _____ = SUM OF QUESTIONS 1 THROUGH 6

ADDITIONAL ITEM:**7. Ideas/ delusions of reference**

Does it ever seem that people are talking about you or taking special notice of you because of *(fill in beliefs)*
OPTIONAL What about receiving special messages from your environment because of *(fill in beliefs)*
(How certain are you of this?)

(This question pertains only to the beliefs being assessed by the BABS interviewer-not if patient think s s/he is noticed for a reason unrelated to the beliefs being assessed. Interviewer should NOT bas answer on observable actions or compulsions; instead, rate core belief)

- 0- No; others definitely do not take special notice of me.
- 1 - Others probably do not take special notice of me.
- 2- Others may or may not take special notice of me.
- 3- Others probably do take special notice of me.
- 4- Others definitely do take special notice of me.

Brown Assessment of Beliefs Scale (BABS)

BABS KEYSHEET (I)

Patient Initials: _____ Date of Interview _____ / _____ / _____

Rater: _____ Diagnosis: _____

Treatment: _____

Principle Belief: _____

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1. CONVICTION _____

2. PERCEPTION OF OTHERS' VIEWS _____

3. EXPLANATION OF DIFFERING VIEWS _____

4. FIXITY OF IDEAS _____

5. ATTEMPT TO REJECT BELIEFS _____

6. INSIGHT _____

TOTAL BABS SCORE (total of items 1-6) _____

ADDITIONAL ITEM:

7. IDEAS/ DELUSIONS OF REFERENCE _____