



NeuroRehab Evidence Database

Target Area: Challenging Behaviour

Neurological Group: Traumatic Brain Injury

Aeschleman and Imes (1999). Stress inoculation training for impulsive behaviours in adults with traumatic brain injury. <i>J Ration Emot Cogn Behav Ther</i> , 17(1): 51-65.	RoBiNT score - 13/30
Method / Results	Rehabilitation Program
Design <ul style="list-style-type: none">• Study Type: SCD. Multiple baseline across participants.• Population: 5 males with moderate-severe TBI:<ul style="list-style-type: none">○ Joe: age 20, 16 months post injury○ Bill: age 24, 5 years post injury○ John: age 27, 7 years post injury○ Ken: age 30, 12 years post injury○ Mark: age 29, 10 years post injury• Setting: Residential facility that provides habilitation/rehabilitation programs for young adults with disabilities.	Aim: To use a stress inoculation program to decrease frequency of impulsive behaviour. Materials: Behaviour diary, self-control rating scale (SCRS); quizzes to test knowledge of: <ol style="list-style-type: none">1. Self-control.2. Self-statements.3. Applications.4. Relaxation tapes.
Target behaviour measure/s: <ul style="list-style-type: none">• Observation of impulsive behaviours: verbal; gestural; physical and other; as recorded by trained recorders during 1.5 hours early and late in the day and 2 hours during day activities.• Role play probes (participant rated on 9 dimensions of self-control). Primary outcome measure/s: <ul style="list-style-type: none">• No other standardised measure.	Treatment Plan: <ul style="list-style-type: none">• Duration: 10 weeks.• Procedure: 20 sessions x 50 minutes x 3 times/week.• Content: Progressive sessions (supplemented with homework):<ol style="list-style-type: none">1. Identification and characterisation of problem behaviours2. Conceptualization 4 self-control steps introduced to the client3. Relaxation training4. Self-instructional training5. Coping skills training6. Role playing of tasks7. Anger management8. Generalisation and Cuing9. Review.
Results: Behaviour remained highly variable but mean "impulsive behaviours" fell from 8.4 (baseline) to 3.3 at follow-up (no statistical analysis performed). Role playing ratings also increased over time (no statistical analysis performed).	

Note that these rehabilitation summaries reflect the current literature and the treatments are not necessarily endorsed by members of the NRED Team.