

THE BEHAVIOR PROBLEMS INVENTORY - 01

[BPI-01]

| The Client | | |
|--------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------------|
| ID: _____ | Age: _____ years _____ months | Gender: <input type="checkbox"/> male <input type="checkbox"/> female |
| Ethnicity/Race: | <input type="checkbox"/> Caucasian | <input type="checkbox"/> African-American |
| <input type="checkbox"/> Asian/Pacific Islanders | <input type="checkbox"/> American Indian/Eskimo/Aleutian | <input type="checkbox"/> Hispanic-American White |
| <input type="checkbox"/> Hispanic-American Black | <input type="checkbox"/> Mixed ethnic background | <input type="checkbox"/> other/do not want to answer |
| Intellectual Disability: | <input type="checkbox"/> mild ID (IQ 56-70) | <input type="checkbox"/> moderate ID (IQ 41-55) |
| | <input type="checkbox"/> severe ID (IQ 26-40) | <input type="checkbox"/> profound ID (IQ < 26) <input type="checkbox"/> unknown |

| The Respondent | | |
|----------------------------------------------------------|----------------------------------------------------|----------------------------------------------------|
| Relationship to the client: | <input type="checkbox"/> biological parent | <input type="checkbox"/> guardian or foster parent |
| <input type="checkbox"/> non-parental relative | <input type="checkbox"/> teacher/day program staff | <input type="checkbox"/> psychologist |
| <input type="checkbox"/> case manager | <input type="checkbox"/> behavior specialist | <input type="checkbox"/> other |
| Time you typically spent with the client per day: | _____ | |
| How long have you known the client: | _____ | |

| BPI-01 Results Summary | | |
|----------------------------------------|-------------------------|------------------------|
| Subscales | Sum of frequency scores | Sum of severity scores |
| SIB | | |
| Stereotyped Behavior | | |
| Aggressive/Destructive Behavior | | |

Instructions

On the following pages you will find generic definitions followed by specific descriptions of three types of behavior problems: self-injurious behaviors (items 1-15), stereotyped behaviors (items 16-40), and aggressive/destructive behaviors (items 41-52).

Please indicate which behaviors you have observed in this individual **during the past two months** by circling the number in the appropriate boxes to indicate (a) how often the described behavior typically occurs (frequency) and (b) how much of a problem the behavior represents (severity).

If the behavior has never been observed during the last two months, check “never” (i.e., number “0”).

Scoring

Below are examples of three items scored for the behavior of a person named Jane:

1. Jane has never been seen biting herself (*check “never” or “0” for item 1*).
2. However, Jane slaps and punches her face. When unobserved, she does it almost constantly (*check “hourly” or “4” for the frequency scale of item 2*). This behavior potentially causes serious harm and Jane has thick calluses on her forehead (*check “severe” or “3” on the severity scale*).
3. Jane is also known to slap her thighs; this happens less frequently, every five to ten days or so (*check “weekly” or “2” on the frequency scale of item 3*). Nevertheless this behavior has been a big concern because it has caused serious bruises (*check “severe” or “3” on the severity scale of item 3*).
4. To obtain the subscale scores for these three items, sum up the numerical values of the checked boxes, separately for the frequency and the severity scales.

| | | Frequency | | | | Severity | | | |
|---|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------|--------|-------|----------|----------------|----------|--------|
| | | Never | Monthly | Weekly | Daily | Hourly | Mild | Moderate | Severe |
| 1 | Self-biting (so hard that a tooth print can be seen for some time; bloodshot or breaking of skin may occur) | × | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 2 | Hitting head with hand or other body part (e.g., face slapping, knee against forehead) or with/against objects (e.g., slamming against a wall, knocking head with a toy) | 0 | 1 | 2 | 3 | × | 1 | 2 | × |
| 3 | Hitting body (except for the head) with own hand or with any other body part (e.g., kicking self, slapping arms or thighs), or with/against objects (e.g., hitting legs with a stick, boxing the wall) | 0 | 1 | × | 3 | 4 | 1 | 2 | × |
| | | Frequency Total | | | | 6 | Severity Total | | 6 |

SELF-INJURIOUS BEHAVIOR

Generic definition: Self-injurious behavior (SIB) causes damage to the person's own body; i.e., damage has either already occurred, or it must be expected if the behavior remained untreated. SIBs occur repeatedly in the same way over and over again, and they are characteristic for that person.

| | | Frequency | | | | | Severity | | |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------|--------|-------|--------|----------------|----------|--------|
| | | Never | Monthly | Weekly | Daily | Hourly | Mild | Moderate | Severe |
| 1 | Self-biting (so hard that a tooth print can be seen for some time; bloodshot or breaking of skin may occur) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 2 | Hitting head with hand or other body part (e.g., face slapping, knee against forehead) or with/against objects (e.g., slamming against a wall, knocking head with a toy) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 3 | Hitting body (except for the head) with own hand or with any other body part (e.g., kicking self, slapping arms or thighs), or with/against objects (e.g., hitting legs with a stick, boxing the wall) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 4 | Self-scratching (so hard that reddening of the skin becomes visible; breaking of the skin may also occur) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 5 | Vomiting and rumination (deliberate regurgitation of swallowed food with rumination) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 6 | Self-pinching (so hard that reddening of the skin becomes visible; breaking of the skin may occur) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 7 | Pica: Mouthing or swallowing of objects which should not be mouthed or swallowed for health or hygiene reasons (non-food items such as feces, grass, paper, garbage, hair) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 8 | Inserting objects in body openings (in nose, ears, or anus, etc.) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 9 | Pulling finger or toe nails | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 10 | Inserting fingers in body openings (e.g., eye poking, finger in anus) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 11 | Air swallowing resulting in extended abdomen | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 12 | Hair pulling (tearing out patches of hair) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 13 | Extreme drinking (e.g., more than 3 liters per day) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 14 | Teeth grinding (evidence of ground teeth) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 15 | Other: | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| Frequency Total | | | | | | | Severity Total | | |

STEREOTYPED BEHAVIOR

Generic definition: Stereotyped behaviors look unusual, strange, or inappropriate to the average person. They are voluntary acts that occur repeatedly in the same way over and over again, and they are characteristic for that person. However, they do NOT cause physical damage.

| | | Never | Monthly | Weekly | Daily | Hourly | Mild | Moderate | Severe |
|----|---------------------------------------|-------|---------|--------|-------|--------|------|----------|--------|
| 16 | Rocking back and forth | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 17 | Sniffing objects | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 18 | Spinning own body | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 19 | Waving or shaking arms | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 20 | Rolling head | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 21 | Whirling, turning around on spot | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 22 | Engaging in repetitive body movements | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 23 | Pacing | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |

| | | Never | Monthly | Weekly | Daily | Hourly | Mild | Moderate | Severe |
|----|-----------------------------------------------|-------|---------|--------|-------|-----------------|------|----------|----------------|
| 24 | Twirling things | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 25 | Having repetitive hand movements | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 26 | Yelling and screaming | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 27 | Sniffing own body | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 28 | Bouncing around | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 29 | Spinning objects | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 30 | Having bursts of running around | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 31 | Engaging in complex hand and finger movements | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 32 | Manipulating objects repeatedly | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 33 | Exhibiting sustained finger movements | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 34 | Rubbing self | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 35 | Gazing at hands or objects | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 36 | Maintaining bizarre body postures | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 37 | Clapping hands | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 38 | Grimacing | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 39 | Waving hands | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 40 | Other | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| | | | | | | Frequency Total | | | Severity Total |

AGGRESSIVE/DESTRUCTIVE BEHAVIOR

Generic definition: Aggressive or destructive behaviors are offensive actions or deliberate overt attacks directed towards other individuals or objects. They occur repeatedly in the same way over and over again, and they are characteristic for that person.

| | | Never | Monthly | Weekly | Daily | Hourly | Slight | Moderate | Severe |
|----|--------------------------------------------------------------------------------|-------|---------|--------|-------|-----------------|--------|----------|----------------|
| 41 | Hitting others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 42 | Kicking others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 43 | Pushing others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 44 | Biting others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 45 | Grabbing and pulling others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 46 | Scratching others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 47 | Pinching others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 48 | Spitting on others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 49 | Being verbally abusive with others | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 50 | Destroying things (e.g., rips clothes, throws chairs, smashes tables) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 51 | Being mean or cruel (e.g., grabbing toys or food from others, bullying others) | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| 52 | Other: | 0 | 1 | 2 | 3 | 4 | 1 | 2 | 3 |
| | | | | | | Frequency Total | | | Severity Total |