Handout #3: Comprehensive Behavioral* (ComB) Interventions for BFRBs Using SCAMP (Sensory, Cognition, Affective, Motor, Place) Interventions

Domain	Cognitive Behavioral Strategy	Specific Interventions
Sensory	Distraction Stimulation / Soothing	Baths Massages
	Medication	Cortisone and antibiotic creams Lacrilube
	Substitution	Nibble on food Positive Skin Care (Facial masks, toners, creams, astringents Brush hair Nibble food
Cognitive	Cognitive Coping	Cognitive correction Problem-solving strategies
	Cognitive Conditioning	Psychoeducation
Affective	Relaxation	Progressive muscle relaxation Controlled breathing Meditation, yoga
	Emotive	Assertiveness Journal writing, talking with friends Exercise, volunteer work
		Acceptance, use of affirmations Daily gratitude lists
	Positive Practice	Positive visualization, covert and actual rehearsal
	Medication	Serotonin reuptake inhibitors Antidepressants Anxiolytics
Motor	Awareness Training	Self-monitoring Finger bandages
	Response Prevention	Gloves, band-aids on fingertips Band-aids on vulnerable areas of skin Clothes that cover area Cut fingernails short
	Competing Response Training	Self-manicures, positive hand care Holding Koosh ball or other touch toy Knitting or other crafts Physical exercise
Place (Environment: Location, activity, social environment, time of day)	Stimulus Control	Remove/cover mirrors Eliminate tweezers Stay out of certain room Dim lights Cover mirror Go to dermatologist/aesthetician for facials, etc. Wear make-up
	Contingency Management	Rewards Penalties Covert contingencies

^{*} The ComB (Comprehensive Behavioral) Model for BFRBs was developed by Dr. Charles Mansueto and his colleagues at the Behavior Therapy Center of Greater Washington, Silver Spring, MD