

A Levels-of-Explanation Approach

USING A BIOPSYCHOSOCIALSPIRITUAL
AND EVIDENCE-BASED MODEL

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LEARNING OBJECTIVES

- Explain the key features of a scientifically informed, biopsychosocialspiritual approach to assessment and case conceptualization.
- Evaluate how the empirical basis of the levels-of-explanation approach exemplifies the ethical principles endorsed by professional codes of ethics.
- Select a significant feature of this consultation that you find particularly valuable and describe its worth for your own counseling practice.

Introduction, Priorities and Initial Impressions

To say that Jake has a lot of problems is an understatement. These likely include polysubstance abuse; impulsivity and perhaps attention deficit hyperactivity disorder; anger management problems and a probable impulse control disorder in general; posttraumatic stress; depression; suicide risk; learning problems and possible learning disabilities, among other difficult challenges. His social and occupational functioning appear to be poor, as does his prognosis. His Global Assessment of Functioning (GAF) score using the American Psychiatric Association's *Diagnostic and Statistical*

Manual (DSM-IV-TR) would be rather low for sure. Where does a counselor (or a consultant working with the counselor) even begin addressing all of these complex areas of concern?

Any counselor working with Jake likely will feel overwhelmed rather quickly with the breadth and depth of his multiple troubles. Additionally, in contemporary professional practice there are usually many limitations to the services that can be provided to clients due to managed care and general insurance limitations. Furthermore, in order to make progress the client has to be willing to work hard toward behavior change and trust that the counselor can help them to do so. This can't be assumed with Jake or with many other clients either. When someone has multiple troubles, counselors typically want to utilize a wide variety of services that may or may not be available in the community or even allowed by insurance coverage. Moreover, services offered may not be supported by the client or the client's family. So, in working with Jake, the counselor must first take a very deep breath, say a prayer and think through ways to best help him—perhaps by triage or prioritizing assessment and intervention strategies, and keeping options, possibilities and limitations in mind.

Although Jake has an overwhelming array of concerns, the counselor can indeed be hopeful. Many potentially effective tools and strategies are available to help Jake make progress and have a more satisfying, productive and health-promoting life. While the bad news is that Jake has enormous and concerning problems, the good news is that psychology and related fields have much to offer him to address these troubles. In the levels-of-explanation approach discussed by David Myers (2010), the best available information in science and practice can be brought forth to help our understanding of human behavior and thus maximize our intervention strategies to improve human functioning. The sciences, not only in psychology but in medical and other fields as well, can all be put to good use to help Jake.

These levels of explanation include a biopsychosocialspiritual approach that is evidence-based (i.e., informed by the best research data available and consistent with guidelines for clinical practice supplied by the American Psychological Association, 2006). We need to better understand Jake from a biological, psychological, social and spiritual perspective in order to plan our intervention, being attentive to multiple aspects of Jake and his functioning as well as the research to support each assessment and intervention approach.

For example, many of Jake's issues may have a biological origin or biological implications that should be considered and addressed. His ongoing substance abuse as well as his significant head injury may have altered his brain and brain functioning, which can manifest itself in his difficulties with impulse control, reasoning and judgment. His brain may well be compromised, which could be assessed and treated as part of this intervention.

On another level of explanation, many of Jake's difficulties also may have a psychological origin. His challenges from his family of origin and stress including the loss of his father at a young age through severe alcohol abuse, combined with Jake's military experiences and trauma, his rejection by his former girlfriend and her family, and other stressful life experiences may have taken their toll on Jake's psychological functioning, contributing to feelings of depression, anxiety, anger, isolation and low self-esteem.

Social factors may also play an important role in Jake's many issues. For example, being a college student yet feeling very different from his peers due to being older, perhaps being less well prepared for academic life, and having traumatic military experiences may all lead to loneliness, withdrawal and not fitting in with others. As Jake compares his skills, talents and place in life to that of his classmates, he most likely feels that he comes up short. Feeling that he doesn't belong, is inferior in some ways and doesn't measure up may lead to further isolation, withdrawal, frustration, substance abuse and self-esteem challenges.

Spiritual factors likely play an important role as well in Jake's concerns. He chose to attend a Christian college, and his mother is reported to be very religious and highly engaged in her spirited church community. Although he expressed reservations about his own Christian commitment and engagement, a spiritual void likely fuels his difficulties and, at the very least, prevents him from engaging in the many benefits of religious coping.

Thus, there are multiple levels of explanation to understand and ultimately treat Jake's many challenges. Of course, one can't treat all of his troubles all at once. We must triage (i.e., prioritize what should be accomplished first based on the most serious and immediate problems) as well as take into consideration Jake's desire for change and relief from the issues that matter to him most.

It is important to determine what needs to be addressed first. Typically, the issues that cause serious and immediate harm to self and others are the

very first on the list. Since Jake has made statements about harming himself, evaluating and potentially treating his suicidality becomes the highest priority. However, Jake has a recent history of violence toward others as well, and so examining his potential for homicidality also becomes extremely important right away. The combination of impulse control challenges, alcohol and substance abuse difficulties, access to (and skills with) firearms, his breakup of a significant intimate relationship, and a history of violence toward others is highly concerning and may place Jake at substantial risk for impulsive acting-out behaviors such as violence.

Jake may also be at risk for dropping out of treatment—his failure to attend recent appointments by “forgetting” or not showing up is highly troubling. Thus, addressing the therapeutic alliance and finding ways to engage Jake so that he can come to value and appreciate the counseling endeavor is critical to make any therapeutic gains. After all, you can't help someone if they either don't want to be helped or if they fail to show up for scheduled appointments. As they say, “you can lead a horse to water but you can't make it drink.”

Finally, some of the practical limitations of professional counseling services (such as fees, managed care policies, scheduling conflicts, transportation) must be immediately addressed as well so that thoughtful assessment and treatment can proceed given the often limited resources and options available. Typically university counseling centers allow students a limited number of sessions on the order of 12 or less. Since Jake came to the university counseling center, it may likely mean that only a handful of sessions will be authorized. His numerous issues are unlikely to be adequately addressed with such limitations in the number of sessions allowed or available. Therefore, knowing the number of available sessions ahead of time (assuming limitations are expected) can help the counselor to prepare a realistic assessment and treatment plan.

In summary, Jake has a lot of difficulties that need attention. His many serious troubles might be overwhelming not only to him but to the treating counselor as well. There is a lot of work to do, and yet there may be limited resources to make adequate and lasting progress. The clinician needs to take a deep breath, roll up his or her sleeves, and get to it. Jake needs to do the same. The levels-of-explanation approach suggests that we take the very best that science and practice has to offer and apply that knowledge to

this particular individual and the unique challenges that he faces. Quality science, not only in psychology but also in related fields as well, can help us provide a state-of-the-art and biopsychosocialspiritual, multifaceted approach to hopefully help Jake better manage his many issues and live a healthier, productive and satisfying life. The good news is that he can be helped. The bad news is that it will take much work not only by the counselor but by Jake himself, and it is unclear if he is up to the challenge.

Assessment

Before counselors begin an intervention or treatment plan, they must know exactly what they are treating. A helpful and effective tool available in psychology involves thoughtful psychodiagnostic assessment. The assessment process can utilize a levels-of-explanation approach, assessing the biological, psychological, social and spiritual dimensions of Jake's problems, which can give both the counselor and Jake a better sense of what might contribute to his many difficulties. The counselor could inquire about the availability of psychological testing reports and notes from previous treatment with Jake and, with his permission, secure these reports by contacting the institutions and professionals who have worked with Jake in the past.

Jake's history of head injury and polysubstance abuse may suggest brain impairment, which may also be at the root of his impulsive and disorganized behavior as well as his poor judgment and school performance. A comprehensive neuropsychological evaluation is likely needed, assuming that it hasn't already been conducted recently. Furthermore, an evaluation by a physician (perhaps by an internal medicine physician first and then, if the physician deems it appropriate, by a neurologist) would likely be helpful in the assessment process as well. These evaluations can be time consuming and expensive, and so being mindful of insurance limitations is important. Since Jake is a veteran, a local Veteran's Administration (VA) hospital may be able to provide these services at no charge to Jake. A comprehensive and state-of-the-art physical, neuropsychological and neurological evaluation could help assess the biological influences on Jake's troubles. The counselor might wish to determine if Jake would be willing to participate in this type of evaluation.

Again, it is possible that a complete neuropsychological and neuro-

to depression and frustration, perhaps leading to additional substance abuse and sleep troubles. Jake must come to understand that dysregulation and systems theory can help him better plan his days to better ensure that he takes adequate care of himself and his needs in a health-promoting (rather than health-damaging) manner.

While we can't know for sure how Jake will respond to a treatment plan or suggestions, for the purpose of this chapter I'll outline the key treatment issues that should be addressed in a biopsychosocialspiritual framework the counselor might wish to keep in mind while working with Jake. Since this book focuses on Christianity and counseling, the spiritual elements of the treatment plan will be highlighted in more detail than the other factors.

Biological. Jake's head injury and substance abuse is concerning. He may have permanent cognitive impairment that must be addressed. He may need to develop (with assistance) strategies to cope with his impairment. His goal of completing college may or may not be realistic, and selecting an educational and vocational plan needs to take into consideration his cognitive strengths and weaknesses.

Jake may also need medication management to address his biologically related challenges. Medication for impulse control, attention deficit, depression and substance abuse may need to be addressed by an appropriate physician, such as a psychiatrist or neurologist.

Psychological. Jake's psychological needs are numerous. He likely feels rejected by many, including his parents, his former girlfriend and her family, among others. He clearly feels isolated from other students, not fitting in on campus. These issues may also surface as he develops a professional relationship with the counselor, and thus attending to transference issues and projections becomes important. For example, he might expect the counselor to reject him or judge him negatively as he believes others do. He may have trouble being honest and open or admitting distress to his counselor.

Jake may also feel burdened by his belief that he needs to fulfill the educational goals of his military friend who died. College may not be his calling, yet he feels compelled to complete the goals of his fallen soldier friend. It would be important to work with Jake to determine what life plan and goals make sense for him, separate from the goals of his now deceased fellow soldier.

Often those who have similar troubles as Jake set themselves up for failure by sabotaging their efforts. For example, Jake's habit of staying up all night or abusing alcohol and substances may provide him with an excuse for not doing well in school. He may conclude that his failures are due to these habits rather than something that might feel more uncomfortable and threatening, such as not being smart enough for college work. He may believe that his lack of satisfying relationships is due to the fact that he is an older student who has experienced military service rather than due to his difficult personality, acting-out behaviors and poor social skills.

The counselor may wish to carefully address these issues with Jake, trying to minimize a defensive reaction from him. There are many techniques and strategies to accomplish this goal. First, a rapport and a trusting relationship with the counselor is very important. Then, for example, it could prove productive for Jake to create some distance from his own conflict by talking about a hypothetical third person who experiences the very same challenges and behavioral responses that Jake does. The counselor could ask Jake to advise this third party on how to handle his difficulties. In this way, the counselor puts Jake in the therapist or trusted advisor role where he may have more distance from his own emotional reactions to his problems.

Social. Jake's college milieu may very well create a social comparison that isn't helpful to him. He may not have much in common with the typical students in his classes and living quarters. While he may be older and more hardened from his life experiences and military service, they may be better prepared for college work and social life. These issues should be discussed with Jake, and perhaps strategies could be implemented for him to feel more socially connected (if not on campus then perhaps through off-campus activities). Working to improve his social functioning is also part of the treatment package.

Spiritual. Addressing Jake's spiritual needs and perhaps feelings of alienation are important too. Jake may feel distant from his faith tradition and from God for a variety of reasons, including his losses and stresses in life and his conflictual relationships with his parents, or perhaps from feeling like God has not blessed him in ways that he expected. It would be helpful to discuss these matters with Jake and develop strategies for spiritual renewal. Research clearly demonstrates a variety of physical and mental health benefits to religious and spiritual engagement as well as the

use of religious coping and contemplative practices (Plante, 2009, 2010; Plante & Thoresen, 2007). For example, examining Jake's prayer life and satisfaction with a faith community, and discerning his calling may prove very useful for him. In my careful review of the spiritual and religious traditions, there appear to be many spiritual and religious tools that could be well integrated into counseling for Jake and others (see Plante, 2009). I'll briefly review 13 tools here and then focus on a few of them that might be especially useful for Jake.

Meditation. Research has demonstrated that there are many mental and physical health benefits from regular meditative contemplative practices (Kabat-Zinn, 2003; Plante, 2010; Shapiro & Walsh, 2007). These benefits include stress reduction, acceptance of self and others, as well as improved coping and enhanced interpersonal relationships. Many physical benefits such as lower blood pressure and tempered stress reactivity are also probable for those who meditate in an ongoing manner. Jake may wish to explore meditative techniques to help him manage his stress and discontent. These could include specifically Christian approaches (such as centering prayer) or meditative approaches from Eastern traditions such as mindfulness meditation or yoga.

Prayer. Research from a variety of quality studies suggests that there are both mental and physical health benefits of engaging in regular prayer activities, including enhanced psychological functioning, well-being and meaning, and stress reduction (Masters, 2007). Jake may wish to examine his prayer life, perhaps seek spiritual direction from a clergy member or prayer mentor/director, and work toward a more satisfying prayer life.

Vocation, meaning, purpose and calling in life. Spirituality and religious engagement provide direction and opportunities to develop and nurture an enhanced sense of meaning, purpose, calling and vocation in one's life. Jake's life appears rudderless, and he could likely benefit from efforts to find more purpose and meaning.

As mentioned, Jake may somehow feel compelled to complete the goal of education in response to his fellow soldier buddy who died. This may have been the deceased soldier's calling but not Jake's. One technique that might help Jake is the use of the "calling protocol" (Dreher & Plante, 2007). It uses the principles from the Spiritual Exercises of St. Ignatius (founder of the Jesuits) to help people develop a better sense of vocation,

Conclusion and Recommendations

Although Jake has numerous and serious problems that involve biological, psychological, social and spiritual factors and dysfunction, the science and practice of psychology has much to offer him if he is willing to engage in the process of counseling. Counselors must do their part, and Jake must do his part as well. Together they can work as a team to help Jake improve his functioning and life. Consultation will likely be needed from other professionals, as well as supplemental services provided outside of the counseling sessions. Hopefully, Jake can look forward to a better future if all of the elements work together for his well-being.

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