

# The Biodyne Model of Integrated Behavioral Health

Pedro R. Choca, Ph.D., LISAC  
Associate Clinical Professor  
Doctor of Behavioral Health Program  
Affiliate Faculty, Center for Applied Behavioral Health Policy  
Arizona State University



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

## The Biodyne Model of Integrated Behavioral Health, Cont. 2

- Objectives:
  - By the end of the presentation, participants will understand Integrated Health Care Models.
  - By the end of the presentation, the participants will understand how the Biodyne Model is useful in Integrated Health Care settings.
  - By the end of the presentation, participants will be able to apply basic concepts of the Biodyne Model to their own practices.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

## PCP referral to Behavioral Health Provider 3

- When a PCP identifies a patient who could benefit from a referral to a Behavioral Care Provider (BCP), he/she initiates the contact by bringing and introducing the BCP.
  - The patients are referred to the BCP by the PCP in what is called a "hand-off." (C:\Users\pchoca\Videos\RealPlayer Downloads)
    - (Dr. Peter Van Houten and Ms. Jennifer Sayle, Sierra Family Health Center)



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

The Role of the BCP

4

- At that point, the BCP assesses the patient for about 15-20 minutes, at the end of which, the BCP formulates a plan, communicates it to the patient, and then has a "hallway conversation" with the PCP about the results of the assessment and treatment plan.
- The BCP has several choices for disposition:
  - Re-schedule the patient for one or more 20-25 min. follow up visits (usually 3, but no more than 6).
  - Refer the patient out to another provider in the community.
  - Refer the patient to an in-house psycho-educational group. These are usually 3-6 sessions in duration.
  - And, of course, she can refer the patient back to the PCP for follow up with medical treatment.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

5

- At the point of assessment, the therapist can initiate the use of the Biodyne Model.
- The Biodyne Model refers to method of conducting therapy using techniques meant to facilitate a rapid connection with the client and the identification of issues that have implications for how to approach treatment.
  - o This method is referred to as Focused Psychotherapy Throughout the Life Cycle
  - o The basic information appears in the book *Focused Psychotherapy: A Casebook of Brief, Intermittent Psychotherapy Throughout the Life Cycle* by Nick Cummings, Ph.D., Sc.D. and Mike Sayama, Ph.D.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

6

- "Focused Psychotherapy" refers to the fact that the approach is designed to work on one issue or one set of related issues at a time.
- "Brief" refers to the fact that psychotherapy should be efficient as well as focused, and is generally brief.
- "Throughout the life cycle" is used to emphasize the similarity with primary health care. A patient comes in to see a PCP with a specific set of symptoms, receives the applicable treatment, returns for follow up one or more times, and is then discharged. The patient is likely to return again at a later date with a different presenting problem. The approach of the Biodyne Model is similar.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Bidyne Model of Integrated Behavioral Health, Cont.

7

- In this approach to psychotherapy, anxiety is considered “the fundamental psychological problem.”
  - When our defenses (or coping abilities) have been breached, we experience anxiety and feel threatened.
  - As we feel threatened, we regress to earlier methods of coping that were ingrained at a young age (the repetition compulsion).
  - That method of coping was a solution at that time, but at a later age, it becomes the problem instead of the solution.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Bidyne Model of Integrated Behavioral Health, Cont.

8

- Structuring the episode:
  - Who's presenting?
  - Why now?
  - What for?
  - How?
    - Answering these questions will allow the therapist to structure the episode of care,
    - Connect quickly with the client,
    - And avoid pitfalls that derail treatment.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Bidyne Model of Integrated Behavioral Health, Cont.

9

- 1) Who's presenting?
  - There are two broad categories that are very useful in distinguishing the type of person presenting for treatment. Defense mechanism can be divided into two kinds:
    - Onion
    - Garlic
  - This is a metaphor based on what happens when a person eats foods containing a lot of one or the other of these ingredients.
  - The general therapeutic axiom: TREAT GARLIC BEFORE ONION.
    - Guilt is the salient characteristic of the onion person, while
    - Denial is at the core of the garlic dynamic
      - You cannot treat a person who is in denial by trying working on their guilt issues



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont. 10

- Many well-intentioned therapists fall into the trap of treating a garlic person as if they were onion. This can go on for a long time, and very little change will take place.
  - Persons with a garlic presentation will often disguise themselves as onion. If the therapist is not astute, he or she will continue to follow the lead of the client and fall right into a trap.
  - For example, the addict who presents wanting to work on his depression.
  - Or the borderline who complains of extreme anxiety as well as depression.
- Many people have some of both, but if you get taken by the one, you're likely to miss the other.
- Empathizing with the person while identifying what is really going on, is often the key to connecting with the garlic person.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont. 11

- 2) Why now? (or the Operational Diagnosis).
  - o Identifying the Why Now along with the Implicit Contract, will permit a more accurate understanding of the problem and facilitate rapid progress.
  - o The Operational Diagnosis tells you why the person is here now instead of last week, a month ago or even a year ago.
  - o When you ask "What brings in for treatment now?" people will give you many different answers; however, most of them will not be the Why Now.
  - o The Operational Diagnosis is very helpful in assessing the degree of motivation of the client.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont. 12

- 3) Implicit Contract:
  - o Just as helpful as knowing the Why Now in assessing the motivation of the client, is knowing the Implicit Contract.
  - o In group dynamics, we would call this the Hidden Agenda.
  - o It is important to deal with the Implicit Contract for the same reason it is important to deal with the Hidden Agenda: Nothing is going to get done, unless you take it into account.
  - o Examples:
    - The person who says that he wants to stop drinking, but he doesn't really (he was told by his wife to get therapy or else...)
    - The woman who wants to bring her children for you to see them in order to reassure her that they are not being harmed by her divorce (when she is planning to try to get sole custody).



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

13

- o The Implicit Contract is often fantasy-laden or what Freud called "primary process" thinking.
- o If the Implicit Contract is shared at all (or implied is a better word), it is often shared in a very casual way.
  - By definition, it is not stated explicitly.
  - It often has the tone of a teaser in the form of a half-expressed thought.
  - Sometimes it's mentioned casually, as an after-thought,
  - At other times it comes at the end of the session ("doorknobbing")
  - But it could just as easily be brought up at the beginning
  - If by the end of the session, you haven't heard it, it is important that you try to figure it out and/or you take a guess at it.
    - Sometimes you get what Adler called "the recognition reflex:" a very slight non-verbal gesture indicating a reaction.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

14

- Sometimes you want to confront it directly, but at other times, especially when it signifies "resistance" you don't want to confront it immediately.
  - With garlic people, confronting it is not very useful because it leads to denial.
  - Not taking account of the Implicit Contract almost always will result in prolonging therapy.
- The more that you can use the client's words in discussing the Implicit Contract, the greater the chance that you will get the "Recognition Reflex."



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

15

- How? The Therapeutic Contract and Homework.
  - o The Therapeutic Contract: "I promise never to abandon you, and never to ask you to do something I don't think you are ready to do; and in exchange you'll be joining with me to make me obsolete as soon as possible."
  - o You don't make this agreement until you have a clear understanding of the Why Now and the Implicit Contract.
  - o The homework is a way of tying the needs of the client with the resistance in a way that helps the client to see that it is a partnership.
    - It must not be too hard or it violates the contract and is discouraging to the client.
    - It must not be too easy, or the client will think that you are not serious.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.  
16

- Homework must be part of every session, although it does not always have to be different.
- Homework must be inspired, rather than standard or a cookie cutter.
- Also keep in mind the Stages of Motivation and plan accordingly.
  - Precontemplation: Homework should help the person decide whether or not it's a problem. Sometimes prescribing the symptom is helpful in these cases.
  - Contemplation: If there is a problem, how is it a problem.
  - Determination/Preparation: Give information and encourage the person to make a decision about what to do. The Cost-Benefit Analysis can be helpful.
  - Action: Help the person to continue with the plan of action he or she has already begun.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.  
17

- The Ideal First Session:
  1. **Hit the ground running.** The first session has to be therapeutic. Believing that the first session has to be devoted to collecting data is to waste precious time. A skillful therapist elicits information and makes appropriate interventions in a smooth fashion.
  2. **Perform an operational diagnosis (Why Now).** The operational diagnosis is absolutely essential before formulating a treatment plan.
  3. **Elicit the implicit contract.** Know the difference between the explicit contract, the reason the client gives for being there; and the implicit contract which is the real reason for his/her being there.
  4. **Formulate the therapeutic contract.** Without a mutually agreed upon plan, the therapy cannot progress. If by the end of the first session the therapist does not know the operational diagnosis or the implicit contract, then a treatment plan should not be formulated.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.  
18

- If by the next session, the therapist realizes that the original operational diagnosis or implicit contract was wrong, then s/he has to revise the treatment plan.
- 5. **Create a therapeutic contract.** "I shall never abandon you as long as you need me..."
- 6. **Create running hypothesis in your mind** as to what the client is doing, saying or wanting, but always be ready to revise these as you obtain more information.
- 7. **Do something novel.** Find something novel or unexpected to do. This tends to dispel the notion that this is traditional long-term therapy if the person has had that experience before.
- 8. **Give hope in the first session.** Reassurance has limited value; instead, aim to achieve a small therapeutic gain, or if not, share a successful story of a client with a similar problem. Maximize the probability that the person can identify with the example.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

19

- 9. **Be honest without being blaming.** Most often, clients have had difficult lives and made mistakes. They will often bring this up to test whether or not the therapist is going to be judgmental. Therapists often fall into the trap of not commenting on these in order to avoid being perceived as judgmental. But you have to be honest without being judgmental.
- 10. **Give homework in the first session and every session thereafter.** We have already covered the importance of homework and how to approach this task.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

20

- Two more concepts are important:
  1. Change behavior first, not feelings or attitudes.
  2. Do not strong-arm the resistance



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

---

---

The Biodyne Model of Integrated Behavioral Health, Cont.

21

- Exercise:
  - o Break out into groups of two.
  - o Take turns playing the client, and the therapist, 5 minutes each.
  - o Each should present a fictitious or very disguised. Use the provided case presentation outline as a guide.
  - o The person role playing the therapist, is to do as many of the first session tasks as possible, but at the very least, identify the Why Now/Operational Diagnosis, the Implicit Contract, whether the persons is Garlic or Onion, agree on a treatment goal, and assign homework.
  - o Then switch roles.
  - o After 10 min. we'll call time to come back and share experiences.



The Nicholas A. Cummings Doctor of Behavioral Health Program

---

---

---

---

---

---

---

---

---

---

---

---