

A Summary of Empowerment Plus®: A Wholistic Approach to Wellness

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In this article a number of questions pertaining to this model of service delivery will be briefly addressed. Appendix A contains two case examples for illustration. For more detailed information, including the tools mentioned in the case examples, see www.empowermentplus.org or the chapter on this model in the book edited by E. Cole and J. Siegel (2003), Effective Consultation in School Psychology, Hogrefe and Huber, Toronto, pp. 185-221.

What is Empowerment Plus®?

Empowerment Plus® is an approach to wellness in mind, body and spirit developed by Dr. Teeya Scholten, a psychologist in private practice. It is a practical, innovative, cost-effective form of evidence-based medicine (EBM) in the field of psychological service delivery that integrates aspects of CAM (Complementary and Alternative Medicine) with traditional techniques in a way that is respectful of individual values and beliefs.

It addresses concerns in clients of all ages in the areas of:

- Attention (AD/HD or ADD)
- Learning (LD)
- Depression
- Behavior
- Relationships

Collaborative consultative methodology is used to identify and address classic patterns of difficulties in several areas of functioning. Practical intervention strategies are recommended for common barriers to wellness. In-depth, formal psychoeducational assessment (i.e., IQ and achievement testing) is carried out only if needed. Referrals to specialists are made when needed. Both medication and natural alternatives are explored. The process is described more fully in the Empowerment Plus® Training Manual.

Refinement of this method has resulted in the development of a Manualized Protocol (i.e., script). In this way, Level I training can be applied by a diverse group of professionals, including teachers, social workers, psychologists, guidance and resource personnel, nurse practitioners and many other health care professionals in their work settings. Someone trained at this level is able to address the client or student as a whole person and provide assistance in treating "classic patterns" of concerns in the areas such as attention, learning,

personality and physical health. Level II Certification is available to psychologists with a background in psycho educational assessment and consultation. Training at this level allows the practitioners to make differential diagnoses. Specialty workshops are also available in the areas of personality preferences, behavior management and emotional mastery.

What are the advantages of using this approach?

There are numerous benefits for both clients and professional practitioners:
For clients:

- a practical, efficient, cost-effective and positive approach that is respectful of individual differences in values and beliefs.

For professionals:

- An easy-to-use protocol
- Appropriate for practitioners from varied backgrounds
- Helps to identify and address major areas of functioning (i.e., attention, learning, personality style and food sensitivities) that may be blocking progress in one's professional interventions.
- Does not require in-depth training in diagnosis and intervention in order to address typical concerns.

What is the Empowerment Plus® method?

There are usually three steps in the method:

1. Group Information Session (1 hr) held once per month or available on a 32-minute videotape. Lecture designed to inform potential clients of the process and to review areas of functioning to be explored
2. Basic Empowerment Plus Evaluation:
 - Individual Session 1 (2.5 hrs) – consultative assessment to help client identify:
 - i. Patterns in attention
 - ii. Learning discrepancies
 - iii. Personality type
 - iv. Food sensitivities and other factors
 - v. Intervention strategiesand to select a food to remove from their diet for one week
 - Individual Session 2 (2.5 hrs) – held one week after Session 1- to make a Diagnosis (DX) and Treatment (Tx) recommendations.

These may include nutraceutical supplements, medication or other natural and alternative strategies.

- Individual Session 3 (1 hr.) – Follow-up Evaluation of Tx – held 3-6 weeks after Session 2
3. Additional intervention if needed. This may include counselling (e.g., in communication, time or behavior management techniques, EMDR treatment for trauma), psycho educational assessment or other forms of service

How effective is it?

Hours of Service Delivery: Recent research¹ results have indicated that 40% of clients needed only the Basic Empowerment Plus Evaluation of 6 hours or less to reach their goals, 37% needed 6-10 hours of treatment, 13% 11-16 hours, while only 10% needed more than 16 hrs. of intervention (i.e., usually involved in-depth psycho-educational assessment). This represents significant cost-savings for clients and the health care system when compared to the typical costs of an in-depth psycho educational assessment for every client.

Goal Attainment: Goals are set by clients (e.g., I am happy, I can achieve to my potential, I can remember what I learn, I can focus, I get along well with others). They are asked to rate where they are in the attainment of these goals in the first and second and follow-up sessions. In order to assess goal attainment, client ratings on a scale of 1-10 were assigned to four categories:

- Poor (0-3)
- Fair (4-5)
- Good (6-7)
- Excellent (8-10)

The results indicated that 74% of clients rated their goal attainment as Good to Excellent. Of this 74%, 39% rated the results as Good and 35% as Excellent. 26% achieved Fair results, and none were rated as Poor.

These results suggest that almost half of clients can benefit from the Basic Empowerment Plus® Evaluation alone. Three-quarters of those clients who finish the Empowerment Plus® process are likely to perceive themselves to be achieving their goals at a Good or Excellent level.

¹See www.empowermentplus.org for Self-Managed Journey Page FAQ#1 for a poster session report on these research results.

Appendix A: Case Examples – Aaron and Judith

These case studies are fictitious, but typical examples of how the Empowerment Plus® process works. All of the tools mentioned in the text can be found on the Web site: www.empowermentplus.org.

Judith – a wife and mother

Judith was the mother of two grown children and had been married for over 35 years. She worked as an accountant, enjoyed her job and was a valued, long-term employee. The only problem was that she had been moderately depressed for as long as she could remember. She had received counseling on and off over the years. It seemed to help a little and she enjoyed getting the understanding and support, but it didn't seem to help her get over her need for anti-depressants. The frustrating thing was that she seemed to have everything going for her and didn't understand why she was depressed.

Session 1: Basic Empowerment Plus® Evaluation

During her **Empowerment Plus®** evaluation, it was determined that Judith did not have any difficulties with learning. She reported **attentional challenges**, but reported that these seemed to be related to her depression. Both she and her partner reported that her preferences were consistent with the characteristics of an ISFJ (**Introverted-Sensing-Feeling-Judging**) personality type. She obtained a score of 14 on the Screening Checklist for Depression (SC/D). This was in the **Moderate Range of Depression**. Since she had bad moods occasionally, **wheat products** were selected for removal from her diet for a week.

Her ISFJ personality type suggested that she was a quiet person who needed time alone and who valued accuracy, step-by-step procedures, harmony and task completion. Her partner was an ENTJ who enjoyed interacting, debating and valued task completion. However, he was sometimes impatient with Judith's methodical approach. He worked from home and was often very eager to talk to Judith upon her arrival home from work. She was quite often tired at this point and did not enjoy all the chatter. However, she realized that her husband had been alone all day and probably needed a little company.

Session 2: Intervention Strategies based on the Evaluation

Food Sensitivities: Judith removed wheat products from her diet for a week. When she and her partner returned for the second session, Judith's score on the

SC/D had moved from 14 to 10. This was in the Mild Range of Depression. She reported feeling much better, more energetic and less irritable.

Personality Preferences: She had learned good communication techniques from her previous counseling experiences. She knew how to give I-messages (e.g., I feel frustrated when you interrupt me) and she had been encouraged to express her feelings this way whenever she felt frustrated or angry. She had not done this in the past because she felt that her anger was often unreasonable. In addition, she tried to avoid conflict if at all possible.

After exploring how she was "wired" differently from her partner, several intervention strategies were suggested. As an Introvert, she now understood that she needed to have time alone everyday. It was decided that for the first ½ hr. upon her arrival home, she would be left alone. Understanding how difficult it was for Judith to express any frustration, her partner decided that he would just listen to any of her feelings without trying to defend himself. Since she was less often in a "bad mood", Judith felt that she was more justified in expressing her feelings (i.e., "I feel frustrated when I need to clean up after you.")

Session 3: Follow-Up – 3 weeks later

At the follow-up session, Judith reported feeling much happier and still more energetic. She loved having time alone when she came home from work. She found that she was much more interested in what her partner had to say after this "breather". When she had reintroduced wheat into her diet, her bad moods and fatigue had returned, so she was happy to find alternative grains such as rye and oats. Since she now scored 2 on the SC/D this confirmed her feeling that she was no longer depressed. She and her partner had found ways to take advantage of each of their strengths and were now very much enjoying this time of their life.

Aaron – a wild, enthusiastic 3rd child

Aaron was the third child in a family of three boys. He had been a "fireball" since he entered the world. Aaron's mother had resigned herself to the weekly calls from his teacher complaining about his incomplete homework and disruptive behavior both in class and on the playground. By the time he was in Grade 4, Aaron was spending a good deal of time each school day in the hallway and was beginning to talk about being able to leave school as soon as he was old enough to do so.

Session 1: Basic Empowerment Plus® Evaluation

During his **Empowerment Plus®** evaluation, Aaron scored very high on the Screening Checklist for Attentional concerns (SC). At this point, the cause of his **attentional concerns** was not known. However, his parents and teacher filled out the Levine Information Processing Questionnaire to discover how Aaron's attention was affecting his information processing and what strategies might help to improve his attention. It was also determined that Aaron fit the classic pattern for someone with a VSLD (**Visual-Spatial Learning Discrepancy**). His parents felt that he had the characteristics of an ENTP (**Extraverted-Intuiting-Thinking-Perceiving**) personality type. Since he was prone to frequent colds, **milk products** were selected for removal from his diet for a week.

Understanding his personality type (ENTP - Extraverted-Intuiting-Thinking-Perceiving) helped his parents and teacher to know that they needed to give him lots of opportunities to share his ideas with others. He also needed help with proofreading and time management strategies (i.e., "work before play").

Session 2: Intervention Strategies based on the Evaluation:

Food Sensitivities: Within a week of removing milk products from his diet, Aaron stopped sniffing and sneezing. The colour in his cheeks was better and he seemed a little calmer, but he still had difficulties focusing and doing his written work. The parents were advised to consider a Calcium/Magnesium/Vitamin D supplement and to take him for allergy treatments to a local N.A.E.T. practitioner (www.naet.com).

Learning Discrepancies: Because Aaron continued to fit the classic pattern for someone with a Visual-Spatial LD, his parents were encouraged to talk to his teacher and see if he could use a laptop for his written assignments.

Attentional Challenges: Even though he felt better and was calmer off milk products, Aaron still had more than 5 checkmarks in the Pretty Much to Very Much columns of the Screening Checklist for Attentional Concerns. After reviewing the results of a detailed questionnaire designed to assess Aaron's developmental history, his home environment and to rule out any other possible causes of his attentional concerns, it was decided that Aaron met the diagnostic criteria for AD/HD: Combined Type. His parents wanted to investigate the effectiveness of some natural interventions before trying medication. They chose Eflex Focus, a supplement containing Essential Fatty Acids. Since it can take about three months to evaluate the effectiveness of this supplement for a

particular individual, a 3 week follow-up session was felt to be too soon. Therefore, one was scheduled 6 weeks later.

Session 3: Follow-Up – 6 weeks later

The parents reported that as soon as Aaron was allowed to do his written work on the computer, he began to complete his homework. After several weeks, his grades improved and he seemed to feel much better about himself. They felt that he was getting closer to achieving to his potential.

After a month on the supplement Efalex Focus, Aaron started asking for his “focus pill”. His mother felt that it was helping him to settle down even more, but he still had difficulty with his daily routines. Therefore, ***Riding the Wave*** was recommended as a behavior management program designed to teach self-control.

Several appointments were scheduled for Aaron’s parents to learn this method. Within 10 days of implementing the rule “work before play”, with the appropriate short term, positive or negative consequences, Aaron started doing his homework without the reminders. As the parents applied a few more ***Riding the Wave*** rules in some other areas, Aaron began getting ready for school in time and even doing his chores! Life was so much easier for this enthusiastic little boy and his family.

Summary: As has been illustrated above, the **Empowerment Plus®** method of service investigates the presence of classic patterns in the areas of learning discrepancies, personality preferences and food sensitivities. The first week of a Basic Empowerment Plus® Evaluation is used to assess the effect of possible food sensitivities on functioning. Then, whatever challenges still remain are treated with a few important intervention strategies. Significant gains often result. Interested individuals are invited to participate in the Self-Managed Journey on www.empowermentplus.org. This is a good way for clients as well as practitioners to understand how the Empowerment Plus® method works and to determine its applicability in one’s personal or professional life.