Clinical Case Formulation
Varieties of Approaches

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Clinical Case Formulation is an impressive collection of case studies gathered in a volume coordinated and edited by Peter Sturmey. The book provides an overview of the general features of case formulation and how it can drive treatment. Featuring clinical cases from a variety of populations and focusing on a range of different problems, the volume covers all the major theoretical perspectives in clinical practice - behavioral, cognitive behavioral, psychodynamic, medical and eclectic.

Each chapter describes a case, presenting two contrasting formulations and a commentary from a different perspective. These examples not only provide the reader with clear models of case formulations, they also highlight the different constructs and world views that characterize alternative theoretical approaches to case formulation.

Research in the area has not been extensive and appears that developers of case formulation models tend not to view them as psychometric instruments subject to the same statistical criteria that other psychometric tools are held to.

The current status of case formulation is a relatively new phenomenon. The behavioral and humanistic traditions have historically not considered formulation to be a core concept in therapy (Eells, 2007). Within the humanistic tradition, Rogers cautioned that “psychological diagnosis” is not necessary and may harm the
psychotherapeutic process by positioning the therapist in the expert position. In contrast, many methods presented in this book emphasize establishing a collaborative therapist-client relationship.

The few volumes available on case formulation are cognitive and cognitive-behavioral approaches to formulation, although this literature does address all major theoretical approaches (psychoanalytic, eclectic, cognitive, cognitive-behavioral perspectives). Most of these volumes present only the theoretical perspective, several books present case formulations from different perspectives, but no books directly contrast different approaches to case formulation.

This volume addresses this particular gap and this exactly what sets it apart from the current literature on case formulation.

Part II presents Sally, a case of depression, from two different perspectives: cognitive and behavioral. Both formulations contain richness in understanding how Sally feels, both assess the client history, recommend a treatment plan, assess progress and treatment plan modifications. But most importantly, both pay attention to Sally as an individual and her needs in the therapeutic process.

Zeppi is a case of psychosis, formulated from a psychiatric perspective and also a behavior analytical view. The story of Zeppi, described by D.A. Casey and D.A. Wilder describes a fairly typical case of psychotic behavior, as it may be encountered on a common psychiatric ward. Casey provides a standard psychiatric formulation using the DSM system and offering additional insights into schizophrenia; Wilder, on the other hand, offers a more speculative behavioral analysis of the functions of Zeppi’s behaviors offering paths of treatment and intervention.

Third case analyzed in the volume is Antoinette’s, a client of 17 years with an eating disorder. Two ways to conceptualize Antoinette’s problems are presented in this chapter, outlined by Weerasekera as a multiperspective approach (MPA) and by Lappalainen and colleagues as a functional analytic clinical case model (FACCM). Both offered a framework within the practitioner can understand and help treat Antoinette’s eating disorder. Similarities and differences are discussed by Mira Cooper who also offers a philosophical stance, trying to integrate them as to offer a successful outcome to the patient.

A case of problematic behavior of an older adult, Mrs. Lewis, is discussed and analyzed in the following chapter. There are two formulations made on this theme: a cognitive analytic formulation (M. Dunn) and a psychodynamic formulation (M. S.
Barrett). The commentators, Howells and Jones, admit that providing a commentary could be dangerous from at least one reason: the potential idiosyncratic definition formulated by the commentators may be rejected by the original formulators. Nevertheless, they engage themselves in a thorough analysis, assuming however that all frameworks might reflect a fundamental misunderstanding of the claim to truth being made.

The list of case formulation is completed by a case of anger in a person with intellectual disabilities. N. Beail and T. Jackson provide a psychodynamic formulation of the case of Mr. B, 32 years old and single, never married and living with his mother. A cognitive-behavioral formulation of the same case is offered by P. Willner. Similarities and differences of the two approaches are many and they are beautifully highlighted by the commentator, R. Didden: “Each formulation provides a more or less coherent account for Mr. B’s anger problems and aggression. While the model proposed by Willner is comprehensive, it contains variables that are not causally related to one another, therefore this inference of causation is circular.” According to Didden, the evidence base for cognitive-behavior therapies such as anger management is growing and this approach has been effective in the treatment of anger and aggression.

In the last chapter of the volume, Tracey D. Eells introduces us in contemporary themes in case formulations. She provides the reader with a few suggestions for future work in this area: the need for more research, the prerequisite to increase the standards for the content of a case formulation, a set of empirically supported principles, more effort in developing quantitative methods, the emergence of a new integrative model of case formulation and last, but not least, taking into consideration the cultural embeddedness of the patient.

This complex volume, superbly edited by Peter Sturmey, meets an important need for structure of students and practitioners in the field of clinical work, from all psychotherapeutic directions. Most important though, it also focuses on the client, whose life is elegantly scrutinized and skillfully examined using the lenses of most important psychotherapeutic approaches, trying to provide him with the best treatment option. Flexibility both in theoretical and practical aspects of case formulation was essential in accomplishing this immense effort of integration that eventually led to publishing the current book by Wiley and Sons.