ATTACHMENT THEORY IN CLINICAL PRACTICE WITH ADULTS

721-001, Winter 2019
Tuesday, 2 - 5 pm, Room 3752
3 Credits
Julie Ribaudo, LMSW, ACSW, IMH-E®-IV
Clinical Associate Professor
(She, her, hers)

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Office Phone #936-4949
Office #2710

Office Hours:

- Tuesday 12:15 to 1:30
- Some Wednesdays 12:30 – 1:45
- Others by appointment (This is the easiest option; I am quite willing to meet with you!)

Course Texts
  Available on e-links through UM:

OPTIONAL:

Course Statement

Course Description
Understanding the implications of childhood relationships on adult functioning can provide a powerful framework for creating goals and intervention in adult psychotherapy. Using attachment theory as the foundation, this course will address relationship-based intervention with adults. Students will learn the
role of attachment in the development and maintenance of strategies that adults use to manage needs for autonomy and connection, in social, family and romantic relationships.

Course Objectives and Competencies

By the end of the course, students will understand:

- The theoretical construct of attachment patterns and styles of attachment
- The clinical utility of attachment theory
- An understanding of the cultural norms in development of attachment
- The clinical correlates of adolescent and adult attachment organization
- Attachment-related defensive processes
- The neurobiology of attachment
- How to use an understanding of the dynamics of attachment to inform clinical thinking and intervention with diverse populations
- The role of transference and countertransference
- Conscious use of self in mentalization-based practice
- The limitations and gaps in attachment research

Competency 2: Engage diversity and difference in practice
- Recognize and communicate understanding of the importance of difference in shaping life experiences
- Gain sufficient self-awareness manage the influence of personal biases and values in working with diverse groups

Competency 4: Engage in Practice-informed Research and Research-informed Practice
- Apply critical thinking to inform and communicate professional judgments
- Distinguish, appraise and integrate multiple sources of knowledge, including research-based knowledge and practice wisdom
- Demonstrate effective oral and written communication
- Analyze models of assessment, prevention, and intervention

Competencies 6, 7, 8: Engage with, Assess and Intervene with Individuals, Families, Groups, Organizations and Communities
- Apply knowledge of human behavior and the social environment, person-in-environment, and other multidisciplinary theoretical frameworks to engage with clients and constituencies; and
- Use empathy, reflection, and interpersonal skills to effectively engage diverse clients and constituencies.
- Collect, organize and interpret client data
- Select appropriate intervention strategies

Course Design
Designed as an integrative seminar, this course will involve extensive participation on the part of the students. To promote clinical skills including critical thinking, emotional attunement and thoughtfully derived interventions, this course will employ a variety of pedagogical strategies, including experiential
exercises, small and large group discussion, didactic lectures, videos, role plays, fishbowl supervisions, and reflective writings.

**Relationship of the Course to Ethics and Values**
Social work ethics and values will be addressed within the course as they pertain to issues related to working with clients in a relationally-based intervention. Awareness of transference, countertransference, and the necessity of reflective supervision will be highlighted as ways to maintain appropriate boundaries and to prevent compassion fatigue.
We will look at how attachment is understood across cultures and the role of cultural humility in exploring the attachment-related needs and behaviors of clients.

**Course Requirements**

**Course Text**

**OPTIONAL:**

Additional Weekly Readings will be available in Canvas
We will discuss readings at the beginning of each class. Your thoughtful contributions to the discussion will be part of your participation grade. It is expected that you will have read and carefully considered the implications of the material provided in the readings.

**Course Assignments**

1. Completion of Five Assignments
   a. Complete the Experience of Close Relationships – Revised (ECR-R) before class begins. No paper is associated with this but you will need to have completed it in order to reflect upon it in the final paper.
   b. Attachment Goes to the Movies (20 points) – in the first class, you will sign up for a week to submit (4 to 6 double spaced pages)
   c. Discussion Response (5 points) – must post one reply to one other Attachment Goes to the Movies post by last class
   d. Mid-term Paper (40 points) – Due February 17 by midnight (5 to 7 double spaced pages)
   e. Final Paper (15 points) – Due April 7 by midnight (~4 to 6 double-spaced pages)
Assignment Descriptions:

Attachment goes to the Movies (20 points) – Sign up for a due date (all are due by March 31 at midnight). By your assigned date, you must post (in the discussion tab and in the assignment tab) a detailed account of your understanding of a movie or TV character(s).

- Choose a character/scene (can be an interaction between two or three people) from a movie or TV show (you might have to give some background to set the context). Describe the show/scene fully so the rest of us can get a sense of what is occurring, unless you are posting a clip of it – in that case just give the context.
- Write about the scene/person in attachment terms. What nonverbal cues do you notice? What emotion regulation or cognitive tendencies do you see? Is there a clear attachment style? If not, do you have any guesses? Do you notice any defensive strategies? (You may need to read ahead to Week 8 reading by Mikulincer, et al. to answer this).
- Describe what you would want to explore if the character were your client. What vulnerabilities do you imagine would be especially salient.
- What specific attachment-related therapeutic stance would you want to adopt, and how would you do so, specifically (i.e., it is not enough to say you would want to be a safe base – what exactly, given the possible attachment template, would the client need to experience with you).
- What, if any, barriers due to differing or similar identities (race, class, culture, gender and gender identification, religion, sexual orientation) might exist in developing or sustaining a therapeutic relationship with the character?
- These are only some of the questions you can ponder and respond to – feel free to also elaborate other reactions/ideas/connections.

NOTE: You must reference the readings to describe your conceptualization and beginning treatment approach.

Each of you must also respond to at least one post, noting your reaction to the clip/post – for instance, did it raise further questions or help you understand a concept? Post both in the discussion tab and in assignments (5 points). The highest points will be given to responses that are clearly well thought out and further the discussion or raise a nuanced clinical idea.

Mid-term Paper (40 points) – Due February 24 by midnight – 5 to 7 double-spaced pages

Using a compilation of the readings so far, provide a detailed example of how you can apply what you are reading to your clinical work. Be specific. For example, how are you listening for attachment themes? Have you thought about any of your clients differently and if so, how? How is Attachment Theory informing your interventions? What has been difficult? Use the chapters to help elaborate your points and use specific examples from your work. You should be able to write at least three pages about application of attachment theory to your work.

Finally, end with connecting what you are learning about yourself in relation to attachment theory and the way in which you think your own relational style may be impacting your clinical work. Again, be specific. For example, if you assume you have a relatively autonomous state of mind regarding attachment, how do you think that plays out in your work? What benefits, specifically, may it afford you? What might be something of a limitation, if any, of having an autonomous state of mind (or any other state of mind)?
I grade papers based on evidence of understanding of markers of attachment-related behavior, and ability to construct a strong therapeutic hypothesis and frame for intervention, as well as evidence of beginning level of understanding of transference and countertransference, including how your own attachment history may impact your work with clients.

- Excellent papers (A papers) will show strong writing, strong clinical thinking and marked evidence of having read and integrated course materials.
- ‘B’ papers will show understanding of same concepts and at least some level of clinical thinking.
- Students’ whose papers that do not show such evidence will be asked to meet with me and to re-write their paper. ONLY Papers under a B- will be accepted for revision and the revised grade can only be as high as the lowest passing grade in the class.

Papers are expected on time. If you have an unavoidable emergency, let me know. In all cases, I will deduct 2 points if turned in with 5 days. Paper submitted more than five days late will not receive any feedback and will be subject to a deduction of 5 points. I will not accept any papers more than 10 days late.

Final Paper (15 points) - Due April 7 by midnight

The final paper is a place for you to pull your thoughts together regarding concepts and application of attachment theory to your clinical work. I will be looking for evidence that you have “digested” and incorporated the concepts you discuss, not just a recap of the concepts. For example, if a core concept for you is becoming a safe base for clients, what actions have you taken to become that?

A general outline of the paper:
A. Where were you when you first started this course?
Some things you can consider: why did you take it, what did you anticipate, what did you know/not know about attachment already, what did you think you knew but perhaps really didn’t. How did the ECR-R inform or add to your understanding of your style of relating? Did it, and if so how, challenge your understanding of your relationships with others?

B. Where are you now?
What have been your key take aways? What have you applied? What remains to be experimented with? What have you learned about yourself and about your role as a therapist/interventionist? Did you re-take the ECR-R? If so, what did you find? (This is not exhaustive nor limiting- just some prompts).

C. Where does this course leave you moving forward? What questions remain? Is there anything specific you would like feedback or comments from me about?

D. Any other miscellaneous aspects you wish to address.

I would prefer 2 pages of honest reflection than 5 pages of BS - write what feels important to you!
Due to the proximity of end of term, papers can only be given a two-day extension for an emergency, and 2 points will be deducted.

Attendance and class participation
Attend each session (20 points); absences will lower your grade since:
a. Some material considered essential to the objectives of the course will only be presented in class;
b. The application of key concepts and student co-learning requires participation in class discussions and exercises
c. Predictability, reliability and consistency are core to any strong relationship... “being there” is incredibly important to clients, so it is important in this class
d. Attendance means participating and attending to others. Using computers or mobile devices to text, shop, Facebook, etc. will significantly reduce your attendance points. Unless you have a family emergency, (and please speak to me about it ahead of time) please put your phones away. If you use your computer to take notes, I expect that you will have all forms of websites, emails, Instagram, Twitter, etc., off during class. If I notice that you are doing something other than taking notes, I will deduct 1 point from your attendance grade.
e. I will look for evidence that you have done the reading during class discussions. Students who have clearly read and contribute to the course discussions by asking salient questions or making astute observations will be afforded the highest participation grades.

**COURSE AGENDA 2019**

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<thead>
<tr>
<th>Class # &amp; Date</th>
<th>Topic</th>
<th>Readings</th>
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<tbody>
<tr>
<td>1. Jan.15</td>
<td>Intros Class Orientation Development of Attachment</td>
<td>Complete the Experience of Close Relationships-Revised Questionnaire <a href="http://www.web-research-design.net/cgi-bin/crq/crq.pl">http://www.web-research-design.net/cgi-bin/crq/crq.pl</a> Wallin • Chapter 1 (optional)</td>
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<td>3. Jan. 29</td>
<td>Patterns of Attachment Disorganized Pattern</td>
<td>Howe • Chapters 6, 8, 10, 12</td>
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<td>Date</td>
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<td>Reading Material</td>
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<td>4. Feb. 5</td>
<td>How Attachment Shapes the Self</td>
<td>Wallin • Chapters 6, 7</td>
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<td>Howe • Chapter 14</td>
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<td>5. Feb. 12</td>
<td>Adult Patterns of Attachment</td>
<td>Howe • Chapters 7, 9, 11, 13</td>
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## Assessment and Clinical Conceptualization

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<tr>
<th>Class # &amp; Date</th>
<th>Topic</th>
<th>Readings</th>
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| 6. Feb. 19    | Representations Metacognition Mentalization | Wallin  
• Chapter 1, 3, 4  
Canvas  
| 7. Feb. 26    | Neurobiology of Attachment Fear Regulation and Trauma | Wallin  
• Chapter 5  
Canvas  
| 8. March 12   | Affect Regulation Parallel Process Defensive Processes | Wallin  
• Ch. 8 – Nonverbal Experience and the “Unthought Known” – Accessing the Emotional Core of the Self  
Canvas  
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<th>Topic</th>
<th>Readings</th>
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<tr>
<td>9. March 19</td>
<td>Neurobiology of Psychotherapy, Therapeutic Tenets, Mentalization and Attachment</td>
<td>Wallin</td>
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<td>- Chapter 9</td>
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<td>Canvas</td>
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<td>10. March 26 – Guest Lecture – Jared Konecny</td>
<td>Intersubjectivity Diversity in Practice</td>
<td>Wallin</td>
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<td>- Ch. 10</td>
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<td>- Greene &amp; Britton (2015). Predicting Adult LGBTQ Happiness: Impact of</td>
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<td>Date</td>
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<td>11. April 2</td>
<td>Attachment Patterns in Psychotherapy Transference and Countertransference</td>
<td>Wallin • Chap. 11-14 (sounds like a lot but 60 pages).</td>
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Additional School and University policies, information and resources are available here: [https://ssw.umich.edu/standard-policies-information-resources](https://ssw.umich.edu/standard-policies-information-resources). They include:

- Safety and emergency preparedness
- Mental health and well-being
- Teaching evaluations
- Proper use of names and pronouns
- Accommodations for students with disabilities
- Religious/spiritual observances
- Military deployment
- Writing skills and expectations
- Academic integrity and plagiarism