The Adult Attachment Interview (AAI)

The Adult Attachment Interview is a procedure for assessing adults' strategies for identifying, preventing, and protecting the self from perceived dangers, particularly dangers tied to intimate relationships.

A 18 DAY TRAINING LED BY
Andrea Landini & Clark Baim

1-8 April 2019
Brighton
Unit 6, the Old Sweet Factory, 80 Stoneham Road, Hove, BN3 5HE

£900 +VAT (£800 +VAT until 15 February 2019)

The instructor, Andrea Landini, M.D. Dr. Landini is an experienced child and adolescent psychiatrist with a strong background in the DMM, cognitive psychotherapy, and family therapy. He is well published and co-authored Assessing Adult Attachment and Attachment and Family Therapy.

Enrollment is not guaranteed until payment is made. Payment must be complete before the course is begun. All payments are non-refundable.
Overview

The Adult Attachment Interview (AAI) is a clinical and research tool that offers reliable and valid assessment of adult attachment. It provides information on (1) an adult’s self-protective strategy, i.e., the way the speaker uses information to organise their behaviour when they feel endangered or believe their children to be endangered, (2) a possible set of unresolved traumatic experiences that distort the person’s behaviour without their being aware of it, (3) an over-riding distortion of the strategy such as depression, (4) a pattern of information processing, (5) an interpreted developmental history of the speaker, and, (6) the Level of Parental Reasoning (LPR, Crittenden, Lang, Claussen, & Partridge, 2000), i.e., how the parent thinks about making caregiving decisions for their children. The course offered is based on an expansion of the Bowlby-Ainsworth theory (Crittenden, 1995) and an extension of the Main and Goldwyn procedure (Main & Goldwyn, in press) as applied to the Adult Attachment Interview (George, Kaplan, & Main, 1986, 1996).

The Dynamic Maturational Model (DMM) approach to the Adult Attachment Interview (AAI) is both a useful research tool and also a potential guide for professionals working with psychopathology. Trainees will learn not only new ways to conceptualise disturbed development, but also ways to identify in adults' distortions of the mental processing of information, particularly information relevant to disorders of feelings, thought, and behaviour. The techniques for interpreting speech can be useful even if the professional does not formally use the interview itself in practice. For those interested in research applications, the 18-day training is usually sufficient to establish reliability on the major classifications and subclassifications.

The Dynamic-Maturational Model (DMM) method (Crittenden, 1999) for analysing Adult Attachment Interviews differs from the Main and Goldwyn method in several ways:

1. Intent: The intent of the Dynamic-Maturational method is to describe the self-protective strategies and patterns of mental processing of speakers; the intent of the Main and Goldwyn method is to predict infants’ patterns of attachment.

2. Outcome classifications: The set of outcome classifications is larger in the Dynamic-Maturational method and better suited to differentiating among individuals with psychological disorder than the set of classifications used by the Main and Goldwyn method.

3. Treatment of non-Ainsworth classifications: The Dynamic-Maturational method uses 6 compulsive Type A sub-patterns (A3-8) and 6 obsessive Type C sub-patterns (C3-8), plus a full array of combinations of these. In the Main and Goldwyn method, most non-normative individuals fall in three classifications (E3, U/E3, and “Cannot Classify”).
4. Patterns vs ratings: The Dynamic-Maturational method depends upon patterns within and among memory systems, whereas the Main and Goldwyn system depends upon ratings of constructs.

5. Functions vs defined meanings: The Dynamic-Maturational method uses the function of discourse markers to define meaning, whereas the Main and Goldwyn method assigns meanings to discourse markers.

6. Memory systems: The Dynamic-Maturational method systematically assesses 5 memory systems (procedural, imaged, semantic, episodic, and working) alongside connotative language, whereas the Main and Goldwyn method considers 3 (semantic, episodic, and working).

7. Modifiers: In the Dynamic-Maturational method, there are four modifiers (depressed, disorientated, reorganising, and unresolved with regard to trauma or loss), with 8 different forms of lack of resolution of trauma or loss (dismissed, displaced, vicarious, blocked, preoccupied, anticipated, imagined, and hinted); the Main and Goldwyn method has only preoccupied lack of resolution of loss or trauma.

8. Validity: Validity for the Main and Goldwyn method is primarily based on normative samples and prediction from mothers to infants, whereas the validity of the Dynamic-Maturational method is primarily based on clinical samples and differentiation among disorders.

The basic training addresses the patterns found in normative and out-patient treatment populations. It involves 18 days of full-time effort coding transcripts. The first 6 days cover most of the Ainsworth-based patterns that form the basis for the Main and Goldwyn system. The second 6 days cover most of the patterns in the dynamic-maturational approach, i.e., A3-6 and C3-6. The third 6 days cover the A/C and AC combinations and some of the modifiers of patterns, e.g., preoccupied and dismissed lack of resolution of trauma and loss, depression, and reorganisation.

Following the basic course members may take a fourth 6-day unit that covers very complex patterning, e.g., A7-8, C7-8, other forms of lack of resolution, disorientation, intrusions of forbidden negative affect, and expressed somatic symptoms. These constructs are relevant to the eating and personality disorders, psychoses, serious (forensic) cases of child protection, some parents of children with psychiatric or psychological disorders, and criminal behaviour.

**Health Warning**

The AAI offers a unique opportunity to further professional development but it is also very demanding. Achieving reliability for clinical use will take about a year and for coding/research about two years. You need to allow 4 to 6 hours a week for practice outside of the taught weeks.
Mandatory Course Requirements

It is essential that trainees attend all 18 days of the course. This can be in person in Brighton or virtually via web conference. This option will require self discipline! There will be homework transcripts following the 3 teaching weeks. A reliability test will follow on from completion of the final set of practice transcripts. Not completing the practice transcripts is likely to seriously impede the level of reliability that can be achieved. The Family Relations Institute issues participants with a reliability certificate stating the percent agreement with the standard. This reliability can be reported. Evidence of reliability should be requested if the participant will code data for others.

Competence in interviewing is also assessed and therefore course participants are required to submit 3 Adult Attachment Interviews for feedback (two normative, 1 clinical). Feedback will be given after each interview and a certificate issued if interviewing skills are judged to be satisfactory.

Required reading for the course


Course timings

With the exception of Days 1 & 6, each training day will begin at 12.30pm and end between 5-6pm (UK time). You will be required to read and classify a transcript before the training starts on Days 2-5 of each week. Consequently, participants should be entirely free of other obligations during the training (for attendance in person and online). The course will begin at 1pm on Day 1 and run from 9-1pm on day 6 to allow for people to travel if coming to Brighton.

Includes

All teaching, weekly feedback on practice AAI s and registration with Dr Crittenden for the reliability test. Crittenden’s Attachment and Psychopathology (A&P) course is a prerequisite to the AAI course. Course dates can be found here.