

The DMM as a Comprehensive Theory of Adaptation

A bio-psycho-social model of distress and adaptation

Theories in the DMM

Bowlby

- Evolutionary biology
- Ethology
- General systems theory
- Psychoanalytic theory
- Information processing

Ainsworth

- Empirical evidence
- ABC Strategies
- Strange Situation
- Developmental pathways

After Bowlby

- Piaget
- Behavioral learning theory
- Cognitive neuroscience
- Vygotsky
- Social ecology
- Chaos (complexity) theory
- Gestalt theory
- Genetics & epigenetics
- Person-centered therapy
- Family systems theory
- Epidemiology, etc.

The DMM is a bio-psycho-social model of adaptation.

DMM Attachment is a theory about protection from danger

- Danger experienced by one's parents
- Danger experienced by the self
- Danger to one's children
- The DMM focuses on functional formulation of knowledge of danger for treatment

Psychological & behavioral organization

- Protect the self
- Select a reproductive partner
- Protect one's progeny to their reproductive maturity
- Safety & sex: That's all there is!

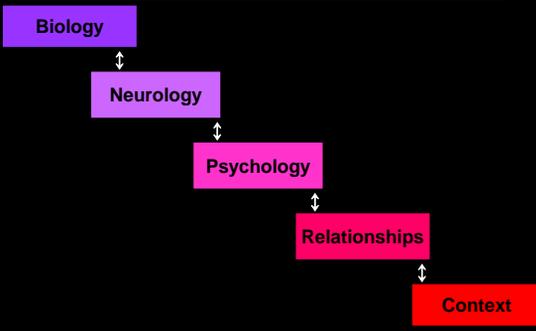
Strengths approach

- Flexibility of development & functioning is our species major strength.
- Flexibility permits adaptation to many niches.
- Plasticity permits individuals to adapt to changing circumstances.
- Individual differences are an advantage to a population of humans.

Three systemic processes

- Adaptation
- Maladaptation (Szasz, Eysenck)
 - Is suffering
 - S-P strategies used beyond developmental appropriateness
 - Used in inappropriate context
 - Preclude other functions
 - Unpleasant side-effects
- Intervention

Potential levels for intervention:



Parallel Arousal Systems

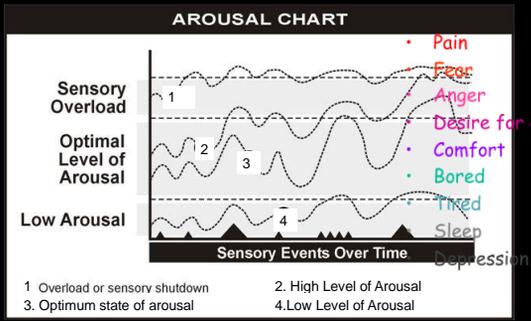
Arousal

- Pain
- Fear
- Anger
- Desire for comfort
- Comfort
- Bored
- Tired
- Sleep
- Depression

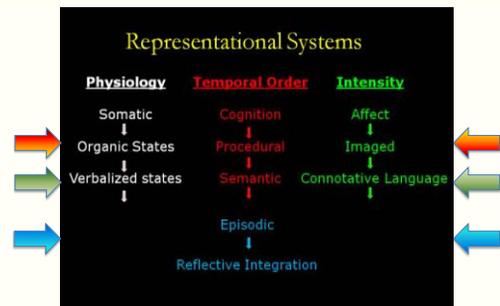
Sexual Arousal

- Sexual pain
- Sexualized terror
- Sexual aggression/submission
- Romanticism
- Affection
- Satisfaction
- Afterglow
- Sleep
- Numbness

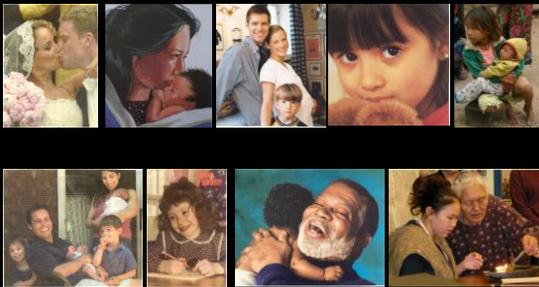
How does the brain adapt to fit the demands of the environment?



Multiple Dispositional Representations

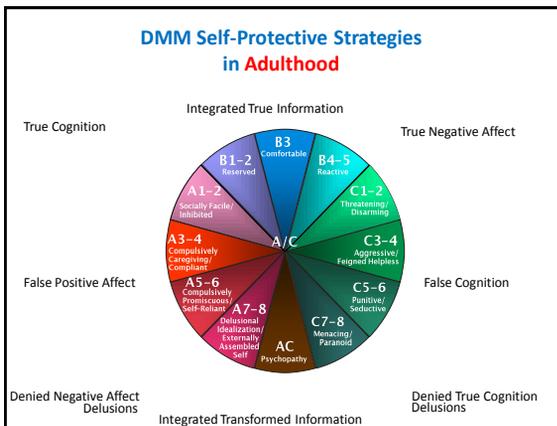
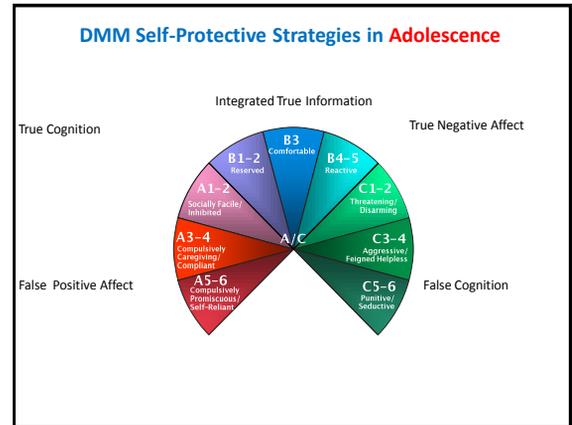
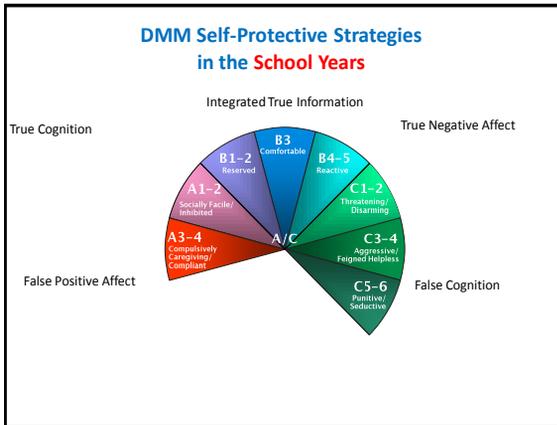
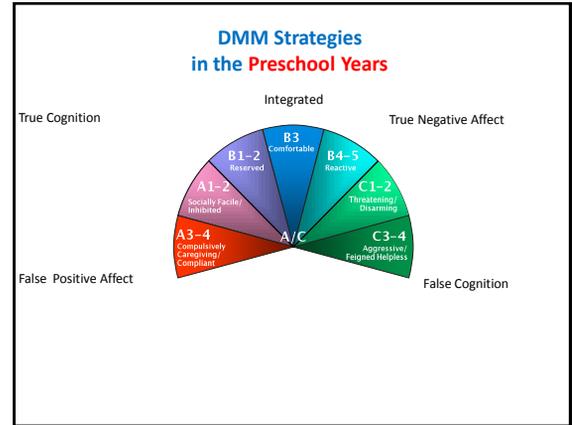
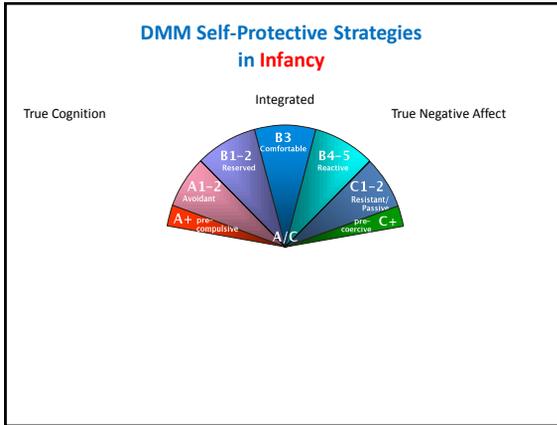


Life cycle development



Transformations of information

- ❑ Truly predictive
- ❑ Erroneous prediction
- ❑ Omitted from prediction
- ❑ Distorted for prediction
- ❑ Falsified for prediction
- ❑ Denied prediction
- ❑ Delusion prediction



DMM Assessments

- CARE-Index: Infancy
- CARE-Index: Toddlerhood
- Strange Situation: Infancy
- PAA: 2-5 years
- SAA: 6-13 years
- TAAI: 16-25 years
- AAI: adulthood
- Parents' Interview

Systemic formulation

- ❑ Family formulation, within cultural context
- ❑ Functional explanations around protection & reproduction
- ❑ Relational understanding of disorder (set aside notion of individual illness)
- ❑ Replace it with interpersonal adaptation to threat: known but intolerable, unknowable, unspeakable, and uncontrollable.

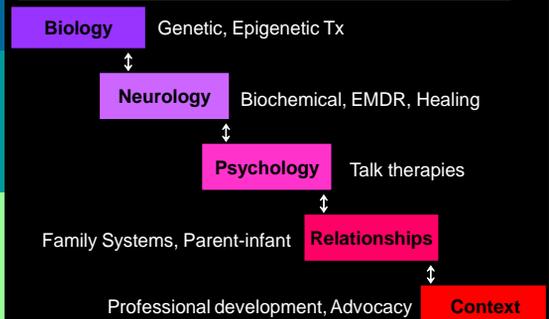
Novel hypotheses & treatment implications

- ❑ Post-natal depression & psychosis
- ❑ Eating disorders
- ❑ Autism
- ❑ ADHD
- ❑ Asthma
- ❑ Pervasive developmental disorder
- ❑ Child sexual abuse & sexual offending

Reallocation of resources

- ❑ Epidemiological prevention
- ❑ Modify service structures & providers, avoiding over-use of services
- ❑ Use therapists as transitional attachment figures
- ❑ Select therapeutic tools from full array
- ❑ Act in the zone of proximal development for family members
- ❑ Focus on 'critical cause' (Crittenden & Ainsworth, 1989)

An array of treatments



IASA Family Attachment Protocol

- ❑ Blind, reliable assessment
- ❑ Valid assessments
- ❑ Transparent assessments (visible to court)
- ❑ Integrated with reports by other professionals
- ❑ Family Functional Formulation
- ❑ Evidence-based recommendations

Attachment, adaptation, & hope

- ❑ Reframe disorder as suffering that comes from exposure to danger or unsuccessful reproduction
- ❑ Recognize the strength it takes to develop strategies to survive these conditions
- ❑ Respect the value of the strategies used to protect the self, one's partner, and one's children from adversity
- ❑ Capture the power of using our minds in relationships to find new ways of adapting to the present.
- ❑ Golden rule of treatment: Do unto patients and clients as you would have them do unto others.