



Rodolfo de Bernart

4th IASA Conference Special Issue # 3

The Application of the Dynamic-Maturational Model to Relational Family Therapy

An interview with Rodolfo de Bernart (President of IASA)

By Margherita Dilorenzo

The DMM permits the analysis of family dynamics. In particular, how can it be a guide to family therapy?

We applied it initially in the area of diagnostics. The theory of attachment seemed to offer an explanation of certain issues in the family assessment and treatment. In families with the same relational and psychopathological diagnosis, the same interventions gave completely different results. When I realized that an intervention like provocation worked in some of these similar families and not in others, I felt that another interpretation was necessary.

Being interested in attachment, I read a lot on this subject. The problem, however, was to apply these models in family therapy, given that attachment usually refers to a dyadic perspective. Applying it at a more complex level, as in couple or family therapy, was a challenge. The most interesting author to use this way of thinking was Patricia Crittenden. Her model was more systemic. Therefore, I turned in that direction, and chose to train in the model that has subsequently been called the Dynamic-Maturational Model (DMM).

I undertook training in the AAI and in the Strange Situation. I also was interested in CARE-Index. I never became a coder, as this was not what I was looking for. What I wanted was to acquire a good knowledge of the theory to work as a therapist in a different way.

This interest resulted in the discovery that the application of these assessment tools would per se re-order thoughts, as they force patients to rethink their family history and to interpret the situation in different terms. This was an aspect that led us to apply the theory of attachment much more directly in clinical practice.

How can the DMM be applied in clinical practice?

Patricia Crittenden has recently shifted her attention to the

clinical field. We need only look back at the latest research findings on attachment to verify that they lead in the same direction. Research has defined that the most important factor in psychotherapy is the quality of the therapeutic relationship, and, in particular, the capacity of the therapist to give flexible responses to the patient's requests. If we modify our intervention according to the patient's requests, be it a couple or a family, the intervention will be more effective. During a therapy, for example, the relationship may face a break-up or a reduction, due to unsuccessful interventions or for other reasons. This may lead to crises which need to be repaired.

In these cases, how can the DMM be a help?

The DMM tells us how to proceed. With avoidant patients or families (Type A), for example, being more provocative and active may sometimes be necessary, as this attitude tends to break rational and defensive attitudes and foster emotional responses. On the contrary, in preoccupied patients (Type C) a containing intervention may be more successful since the provocative one may cause negative reactions or total refusal of the treatment.

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Editorial Board: Franco Baldoni (Editor-in-Chief),
Patricia M. Crittenden, Clark Baim and Andrea Landini

The use of imagery is a key therapeutic method in relational psychotherapy, and you are a proponent and supporter of this technique. How can this technique be used in a DMM perspective?

Since I became interested in the theory of attachment it is what I have always attempted to understand, sometimes with success and other times without. For example, I tried to analyze the AAI only using video recordings, reading the non-verbal without the transcription of the text, but this attempt did not work.

“Being interested in attachment, I read a lot on this subject. The problem, however, was to apply these models in family therapy. The most interesting author to use this way of thinking was Patricia Crittenden. Her model was more systemic.”

Rodolfo de Bernart

For a long time, systemic relational therapists thought that non-verbal language was the most important information, and that the comparison of verbal and non-verbal is very important, since a patient may say one thing which is then contradicted by the non-verbal behavior. Later, more active non-verbal techniques were used in diagnosis and treatment, like “sculpture”, one of the first, or the “conjoint drawing” that has also been extensively applied in the psycho-judicial area, in order to assess situations in court. In the “collage”, to some extent a creation of mine, it is the image of the internal family that emerges. This finding indicates how the application of these techniques is able to shorten therapy times.



Images work because essentially they partly bring out the unconscious, but above all the “implicit”, as has been recently defined by Daniel Stern. This type of communication takes information from the implicit memory, is automatic, uncontrollable and, as part of the non-conscious, cannot be interpreted. In a DMM perspective, this type of implicitness can inform theory and clinical practice, for example clarifying the strategy of attachment and informing on what is safe or dangerous for that specific patient or family. At the moment, however, non-verbal language and implicit information are not sufficiently considered in clinical practice.

Rodolfo de Bernart, MD, Director of the Florence Family Therapy Institute (ITFF), has created a web of 35 institutes and schools of family therapy. In the course of his international activity he has contributed to the diffusion of psychotherapy outside Europe with the creation of the European Certificate of Psychotherapy (ECP) and the recognition of this in Russia, Asia (China) and Australia. In 2015 he succeeded Patricia Crittenden as President of IASA.



*Margherita Dilorenzo,
Psychoanalyst, Family Therapist, Director of the
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Franco Baldoni

DMM and Family Systems

DMM fits people within their own systems and subsystems, and problems are addressed by studying the functions of defensive behavior in different contexts. Understanding the self-protective strategies for dealing with danger offers a framework of individual and family development and adaptation that can function as a guide for the organization of an integrative and tailored approach to treatment.

This third DMM News dedicated to the plenary speakers at the 4th IASA International Conference presents an interview by Rodolfo de Bernart, MD, Chair of the conference, one of the most important family therapists

in Europe and current President of IASA, succeeding in 2015 Patricia Crittenden. In this interview by Margherita Dilorenzo he discusses his interest in the DMM and the utility of this model from the point of view of a systemic family therapist.

At the IASA Conference, de Bernart will present a talk titled “DMM Integrative Treatment: Bumps in the Road to Change” and will discuss this topic with Andrea Landini, who will present the problems in the light of cognitivism, providing indications for promoting a positive change and reducing the possibility of therapy failure.

At the end of this newsletter, updated information on the program of the IASA Conference in Miami and on DMM courses offered before and after the conference is provided.

I hope to meet you in Miami at the IASA Conference!

*Franco Baldoni, DMM News Editor-in Chief
(franco.baldoni@unibo.it)*

Conference Program

Plenary Speakers

Peter Fonagy, PhD (University College London, UK)

Mentalization, Reflective Functioning and Treatment.

Patricia M. Crittenden, PhD (Past President IASA, Family Relations Institute, USA)

10 Ideas for Improving Mental Health and Treatment.

Daniel L. Schacter, PhD (Harvard University, USA)

Constructive Memory and Imagining the Future.

**Rodolfo de Bernart, MD (President IASA, Institute of Family Therapy of Florence, Italy) and
Andrea Landini, MD (Family Relations Institute, Italy)**

Issues in DMM Integrative Treatment: Bumps in the Road to Change.



Research on Brain Functioning & Clinical Issues

- **Lane Strathearn, MD, PhD (USA/Australia):** Brain Reward Responses in Drug Addicted Mothers: Can Oxytocin Reverse the Trend?
- **Lucina Q. Uddin, PhD (USA):** Brain Networks for Social Processing in Autism.
- **James P. McHale, PhD (USA):** Family-Level Security in Diverse Family Systems: How a Coparenting Framework Changes Everything.
- **Sohye Kim, PhD (USA/Korea):** Mothers with Unresolved Trauma: Brain Responses to Infant Distress and Intergenerational Effects.

Clinical Practice

- **Katrina Robson (UK):** Magic dust for troubled families.
- **Michael Trout, PhD (USA):** Trauma and Loss: Developing a Coherent Narrative in Foster and Adoptive Families.
- **Judi G. Smetana, PhD (USA):** Disagreements, Disclosure and Secrecy in Adolescent-Parent Relationships.
- **Kenichi Mikami, PhD (Japan):** Using the DMM-AAI in clinical practice.

Special Events

- Meet the authors of DMM Books (English, Spanish, German, & Italian)
- The Healing Power of Individual Differences: Tribute to Ainsworth
- Giving attachment evidence to courts
- SAA Symposium: Learning about children's lives from children

- Assessment Demonstrations: Toddler CARE-Index, Transition to Adulthood Attachment Interview, Parents Interview

Register now!

www.iasa-dmm.org/index.php/iasa-conference/
Group Discount for 3 or more registering together!
Book your room at the Hyatt (at IASA's special rate!)
Join the conversation with IASA on Facebook.

DMM Pre and Post-Conference Courses

Pre-Conference courses

Nov. 5-8: **Spanish CARE-Index**

Nov. 3-7, 2015 & March 6-11, 2016:
Infant Strange Situation

Nov. 6-8, 2015: **Advanced Clinical AAI**

For more information see www.familyrelationsinstitute.org.

Post-Conference courses

Nov. 11-13, 2015: **CARE-Index Top-Up**

Nov. 12-14, 2015: **Advanced Clinical Toddler CARE-Index**

Nov. 12-17, 2015 & Feb. 5-9, 2016 &

June 1-6, 2016: **Adult Attachment Interview**

Nov. 11-13: **Spanish CARE-Index**