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Carol J. Ries
Minnesota State University Mankato

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Understanding the Role of Attachments and Schemas: A Model for Working with Sex Offenders

Carol J. Ries
Minnesota State University, Mankato

Practicum Agency: Minnesota Sex Offender Program (MSOP)



Purpose

The purpose of this project is to research, develop, present, and evaluate a training module to increase knowledge of the role of attachments and schemas in working with sex offenders and to provide a model for working with sex offenders.

Research Questions

1. To what extent will a training module on the role of attachments and schemas increase attendees' understanding of these topics?
2. Will a training module increase the likelihood that attendees will apply this knowledge of attachments and schemas in their work with clients?

Methodology

Based on the results from a systematic literature review, a PowerPoint training module was created for practitioners at MSOP. The training module was presented on June 27, 2011 to 15 MSOP employees, including clinical supervisors, clinicians, and a vocational rehabilitation counselor.

A post-test survey design was used for this research project. The survey consisted of eight items, including six items utilizing a Likert Scale of 1 (low) to 5 (high) and two open-ended responses. This survey evaluated the anticipated outcomes of the training module. IRB approval was obtained. Attendees received the self-administered evaluation survey and the informed consent form at the beginning of the training module. Implied consent was obtained if participants voluntarily returned a completed evaluation survey. There was a 100% response rate (n=15).

Literature Review

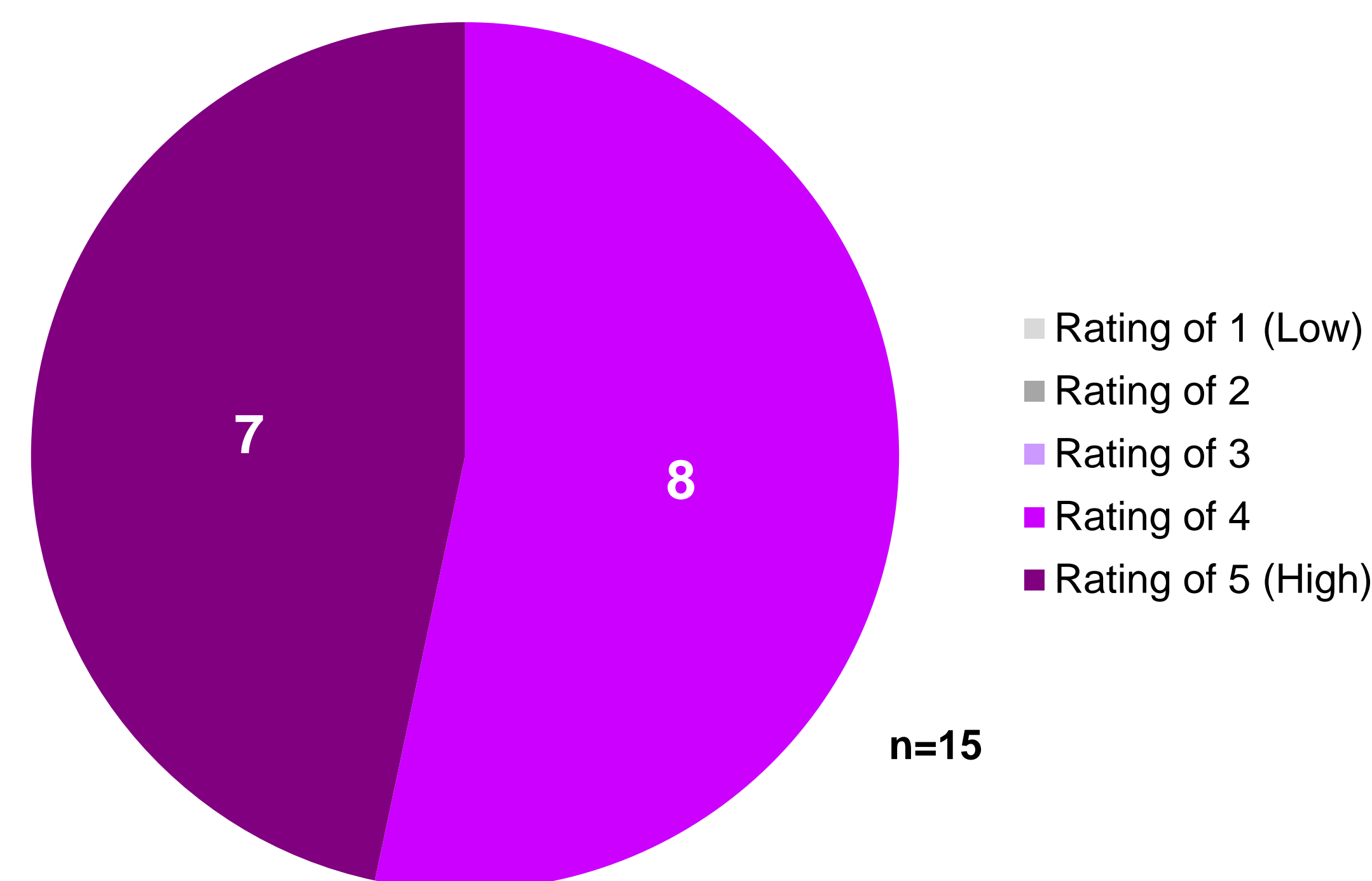
A systematic literature review was conducted to identify the most important and relevant information regarding attachment, schemas, and sex offenders for a training module.

Key findings of this review include:

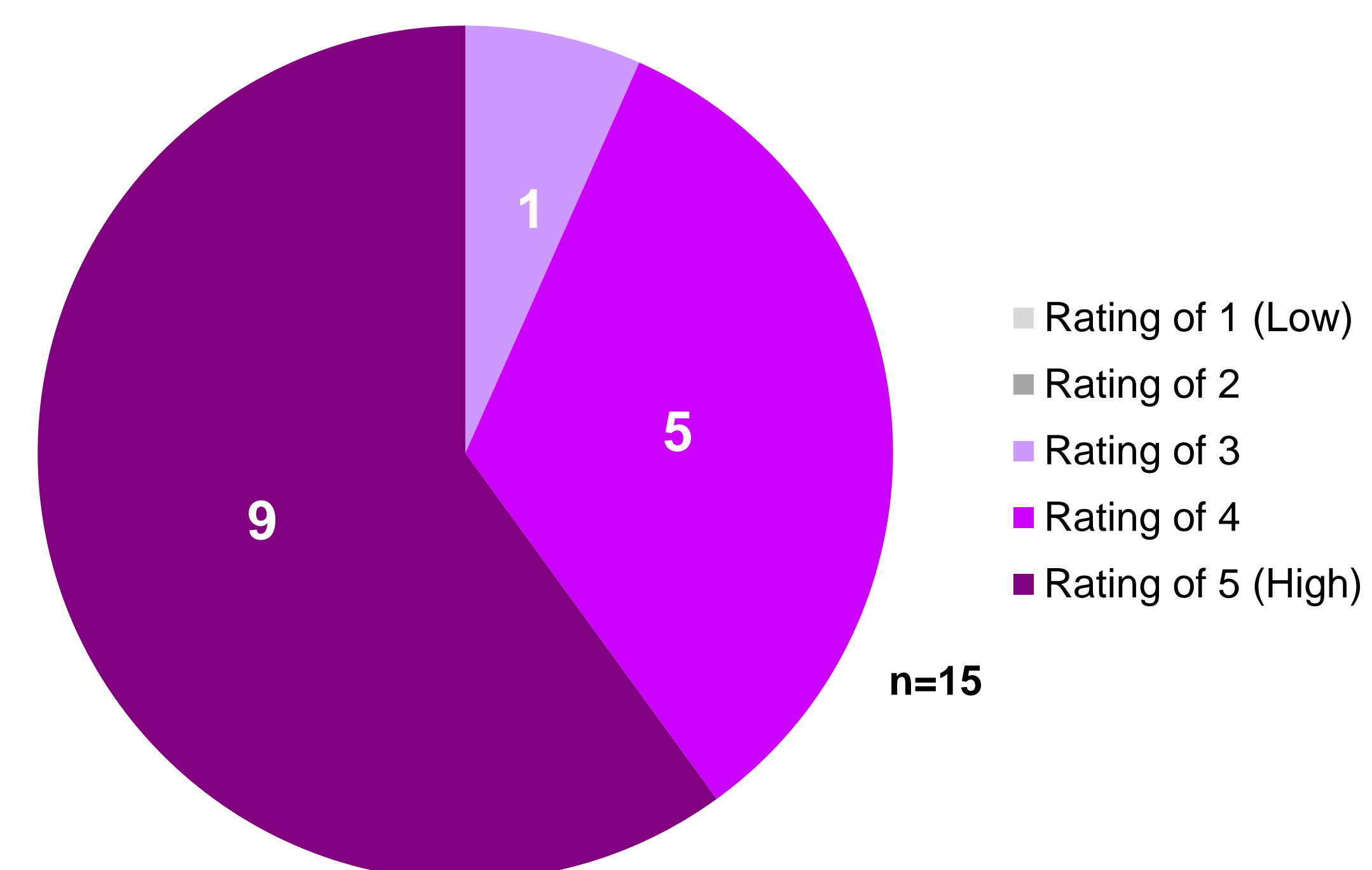
- Attachment style and schemas are important components of sex offending etiology.
- Sex offenders experience intimacy deficits, loneliness, and poor attachment styles.
- Problematic attachment styles have a role in pedophilic behavior development.
- An individual who is distressed will use a coping strategy that is consistent with his attachment style.

Results

Increased Understanding of Role of Attachments and Schemas as Result of Training Module (Likert Scale of 1-5)



Likelihood of Applying Knowledge of Attachments and Schemas in Work with Clients (Likert Scale of 1-5)



Discussion

Results showed that the training module increased attendees' understanding of the role of attachments and schemas with a mean score of 4.47. Attendees indicated a high likelihood that they would apply this knowledge in their work with clients with a mean rating of 4.53. The training module provided useful information, was practical for attendees' needs at MSOP, was well organized, and received a high overall appraisal, as evidenced by mean scores of 4.8, 4.8, 5.0, and 4.87, respectively.

Qualitative feedback on these surveys highlights the need for future training to utilize clinical examples, provide intervention and assessment information, make a connection between attachment and diagnoses in the Diagnostic and Statistical Manual, and provide time for a discussion of specific clients at MSOP related to attachment style.

Conclusions & Recommendations

It is recommended that a follow-up meeting with attendees be scheduled for the purpose of synthesizing information presented in the training module and discussing how current treatment assessments and interventions may be enhanced by incorporating attachment style and related schemas. These factors should be considered during weekly case consultations in order to provide additional information that may positively impact interventions. The training module should be offered on a regular basis to ensure that all clinicians are familiar with the concepts of attachment, schemas, and how they impact the therapeutic relationship and, ultimately, treatment interventions for clients.

On the basis of a literature review, key recommendations for working with sex offenders are:

1. Include a measure of attachment in clinical assessment of clients and as a regular component of treatment planning.
2. Help sex offenders to understand their own attachment style.
3. Be aware of client attachment style to decrease the likelihood of unintentional perpetuation of unhealthy attachment dynamics.
4. Clinicians should be aware of their own attachment styles.
5. Develop evaluation(s) to ensure effectiveness of interventions based on attachment and schemas.
6. Expand training regarding attachment and schemas to all MSOP staff.

References

References are available from the author upon request.