

**THE UNIVERSITY OF TEXAS AT AUSTIN
STEVE HICKS SCHOOL OF SOCIAL WORK**

Course Number: SW 393R22	Instructor: Arlene Montgomery, Ph.D. LCSW-S
Unique Number: 88265	E-mail: marksak@utexas.edu
Semester: Summer 2025	Phone: Home (512) 480-8086
Class Time: T/TH 1:30-4:00 pm	Office Hours: By appointment virtual
Meeting Place: GDC 5.304	

NEUROBIOLOGY AND SOCIAL WORK PRACTICE

I. Standardized Course Description

This course will cover selected findings from recent neurobiological research as it elaborates understanding of relationship dynamics with individuals, couples, families, and groups. Although this research is usually found outside the usual discourse of the social and psychological sciences, a body of scientific work useful to social service providers will be reviewed. The support that recent scientific findings provide for aspects of psychological treatment theories and differential diagnosis will be reviewed. This course will focus on using multiple perspectives in the advanced application of neurobiology research to inform clinical intervention, with emphasis placed at the micro and mezzo levels of practice. The framework of the course is based on social work values and the ethical decision-making process, as illuminated by the NASW Code of Ethics. A bio-psycho-social and cultural emphasis will be applied to the various problem areas and disorders covered.

II. Standardized Course Objectives

Upon completion of this course, students will demonstrate the ability to:

1. Understand how recent scientific findings guide and inform social service interventions;
2. Critically compare and analyze therapeutic and social service implications of recent scientific findings related to the impact of the relationship experiences on/in the human brain;
3. Evaluate, select, and design a social service intervention which takes into account both the appropriate psychological theory and the scientific research which supports the use of that particular theory
4. Adapt social service intervention methods to activities/programs which are designed to sensitively differentiate the needs of the client/client system as influenced by age, gender, sexual orientation, race, class, ethnic/cultural

background, socioeconomic status, physical challenge, and other individual differences.

III. Teaching Methods

This course is designed to include a variety of teaching methodologies to achieve the expectation of student mastery of the skills involved in the examination of social work practice theory as it is supported by selected scientific findings. Readings, discussion, lecture, experiential, videos, case examples, and individual and group presentations are designed to enhance the learning experience.

IV. Required Texts & Material, Recommended Texts, and Course Materials

Required Texts:

Schore, A.N. (2012). *The science of the art of psychotherapy*. New York: W.W. Norton & Co.

Montgomery, A. (2013). *Neurobiology essentials for clinicians: What every therapist needs to know*. New York: W.W. Norton & Co.

Required materials

(from Moskowitz, M., Monk, C., Kaye, C., & Ellerman, S.J.(Eds.)(1997). *The neurological and developmental basis for psychotherapeutic intervention*. The contribution of self-and mutual regulation to the therapeutic action: A Case Illustration. Northvale, New Jersey: Jason Aronson, Inc.). {Note: required chapter in Canvas files under "Case of Karen"}

Schore, A.N. (2003). *Affect regulation and the repair of the self*. NY: Norton, pp.279-281.

Montgomery, A. (2019). Attachment and neurobiology. *Encyclopedia of Social Work, on-line*. {Note: in Canvas files}

Suggested Texts:

Cassidy, J. & Shaver, P., (Eds.). (2008). *Handbook of attachment: Theory, research, and clinical applications*. NY: The Guilford Press.
(Second edition: available in paperback)

Applegate, J. & Shapiro, J. (2005) *Neurobiology for clinical social work: Theory and practice*. NY: Norton.

Cozolino, L. (2002) *The neuroscience of psychotherapy: Building and rebuilding the human brain*. NY: Norton.

- Badenoch, B. (2008) *Being a brain-wise therapist: A practical guide to interpersonal neurobiology*. NY: Norton.
- Bennett, S. & Nelson, J. (Eds.). (2010). *Adult attachment in clinical social work. Practice, research, and policy*. NY: Springer.
- Farmer, R.C. (2009). *Neuroscience and social work practice: The missing link*. Thousand oaks, CA: SAGE.
- Mikulincer, M. & Shaver, P. (2007). *Adult attachment: Structure, dynamics, and change*. NY: The Guilford Press.
- Nelson, J. (2005). *Seeing through tears: Crying and attachment*. New York: Routledge.
- Nelson, J. (in press). *What made Freud laugh: An attachment perspective on laughter*. NY: Routledge.
- Palombo, J. (2017). *The neuropsychodynamics of self-deficits: Searching for complementarity*. NY: Routledge.
- Rothschild. (2023). *Help for the helper: Preventing compassion fatigue and vicarious trauma in an ever-changing world*. NY: Norton.
- Schore, A. (2003a). *Affect dysregulation and disorders of the self*. NY: Norton
- Schore, A. (2003b). *Affect regulation and repair of the self*. NY: Norton
- Schore, A.N. (2019). *The development of the unconscious mind*. NY: Norton.
- Schore, A.N. (2019). *Right brain psychotherapy*. NY: Norton.
- Siegel, D.N. (2015). *Brainstorm: The power and purpose of the teenage brain*. NY: Penguin.
- Wallin, D. (2007). *Attachment in psychotherapy*. NY: The Guilford Press.

V. Course Requirements/Assignments

Evaluation based on:
 Reading assignment completion
 Class participation.
 Class attendance
 Successful completion of assignments.

Paper #1 = 30% (due via email **Thursday, July 3 at midnight**)
 Paper #2 = 25% (due via email midnight, Tuesday, July 29)

Text summary and presentation=12.5%
 Article summary and presentation=12.5%
 Group presentation=11%
 Weekly summaries = 8%
 Attendance= 1%

Student-generated handouts:

Text Summary (12.5% of final grade)

Each student will be required to prepare a written summary of the major points of a portion of chapters from the texts and provide copies (via email) for fellow classmates and the instructor the day before the presentation.

In addition to summarizing the text/articles, **each student** should choose at least 3 points they consider most important, emphasize them in some way in the summaries, and be prepared to particularly highlight those points in the class discussion.

Presentation to class

Choose at least two points from your text material and find film example(s) to illustrate it to the class. Post the link to the class no later than the night before the presentation. The class is expected to view the link before the class.

Additionally, each student will **create an exercise** for the class to illustrate one of the main “take-home messages” from the material presented. For example, a role play, a reading of the text from a case in the Montgomery text, or other creative ways to teach certain aspects of the material.

Define and give example of a neurobiological concept.

Additionally, **each student's** text summary should address in writing the following as it is related to the material summarized:(3%)

a. See Appendix (pp.279-281 in Schore, text, Affect Regulation and the Repair of the Self, 2003 for principles of Regulation Theory. re-state a principle of Regulation Theory (located in Canvas) which most closely relates to section of text summarized and apply to example from film of student's choosing

ii. speculate on how information in section of text summarized affects or is affected by **one** of the following characteristics: age, class, culture, ethnicity, country of origin, language(s), educational attainment, religious background, sexual orientation, physical or mental challenge, economic oppression, social oppression.

Note: although the above commentary should be on the summary, **this material will not be reviewed during the presentation. However, it can be used by all students when writing the papers.**

Article summaries (12.5% of final grade)

Each student will summarize major points from an article on the syllabus and provide copies of their notes to fellow classmates and the instructor the day before the assignment is due.

Presentation to class

Choose at least two points from your article material and find film example(s) to illustrate it to the class.

Additionally, each student will **create an exercise** for the class to illustrate one of the main “take-home messages” from the material presented. For example, a role play, a reading of the text from a case in the Montgomery text, or other creative ways to teach certain aspects of the material.

The notes should include the following critical thought:

(b.) 1 speculation regarding relevant scientific findings that (i.) supports and (ii.) calls into question the scientific basis of selected principles of the treatment theory in the article summarized. The scientific findings can be from any of the material in the textbooks or in classmates summaries (reference this). When the article is discussed in class, the student is expected to actively support the discussion.

Note: although the above commentary should be on the summary, **this material will not be reviewed during the presentation.**

For the text and article summaries, create a 6 question “quizlette” for the class to answer at the end of the presentation.

Group Presentation (11%)

The group does the following:

- chooses one of the following developmental stages/steps (give brief history on theory’s author & describe developmental stages/steps; & speculate on the underlying neurobiological processes of each stage/step:

Piaget stages of development

Kohut’s stages of narcissistic development (Self Psychology)}

Mahler’s stages of development (used by Otto Kernberg’s development of borderline functioning in his Object Relations Theory)

Kohlberg's stages of moral development
 Freud's stages of development
 Eric Erickson's stages of development
 Maslow's hierarchy of needs
 Carol Gilligan stages of moral development for females

{for an example, see Montgomery handout on Bowlby's stages of grief and speculation of underlying neurobiological processes}

- create an exercise for the class to apply the speculations to case material from Montgomery text (small group working together or, if virtual, break-out room group work)
- include cultural considerations

Summaries = 8%: on Sunday **noon following** the week's studies, briefly mention 5 concepts or issues that increased your learning; any material read, presented, or from class discussion can be your focus; presenters for that week do not turn in summaries for their material

Paper #1 (30% of final grade):

The focus of the assignment is the application of selected neurobiological concepts as related to treatment considerations as well as to evaluate, select, and design a social service/therapeutic intervention.

The 10 (or so) page paper (excluding bibliography) will be informed by any material assigned. Additionally, 1 reference should be from the list of suggested texts found at beginning of syllabus; 1 reference from the recommended reading list found at the end of the syllabus; 1 reference from the articles reviewed by students, and also reference your own presentation material (**3 points**).

The material will be the case of Karen (located in Canvas). The paper should include the following:

1. **(8 points)** Make a diagnosis of the client, using DSM 5-TR format. including codes, T,Z,V codes, as appropriate.

List the criteria met by Karen's symptoms (give examples) and list 5 of the defenses that help establish your diagnosis.

For each criteria met and 3 of the defenses employed by Karen, Define them give examples & speculate on the neuroscience supporting them.

Choose one defense and give examples of coping style inferred cognition, and diagnostic language.

Describe **both** the behaviors of the speculated attachment category of childhood and adulthood and the neuroscience that accounts for the

behaviors.

Discuss briefly the attachment category most similar to the diagnosis/diagnoses with examples of how it is similar to the diagnosis and to the linking neuroscience.

Choose a case from Montgomery text and discuss & give examples of 3 symptoms, defenses or issues (or some combination) that are similar to Karen's.

2. Give an example of the client's stressful symptom, memory, wish, experience, **and/or** defensive maneuver and describe principles and/or techniques, and/or strategies using Regulation Theory (specify which Principle) could be clinically useful in addressing same and explain why the principle would be useful. Mention 2 neurobiological findings that support the use of this principle/technique to treat Karen. (Schor's Regulation principle located in Canvas)(**3 points**)
3. Evaluate the above technique's potential positive and negative effect on the treatment issue. For the negative impact aspect of using this technique, design and evaluate an appropriate clinical intervention from any other theory that would correct the negative impact. Briefly describe and give citation for theory. (**3 points**)
4. Using the dyadic experience between Karen and her therapist, find an example of at least 5 of the steps of projective identification.

Definition & neurobiology of projective identification (include the defenses that are involved in projective identification and their definitions, examples, & neurobiology, as well) and Schore's step-by-step description of projective identification, see p. 262 of Montgomery text (and the neurobiology of each step, to be in class discussion); how is this related to transference/counter/transference, neurobiologically? Additionally, choose a case from Montgomery text and speculate on the client's projected material toward the therapist.

(8 points)

5. Give 1 example of the psychological defense of dissociation that was erected in the face of therapist intervention (describe intervention and behaviors that suggest dissociation occurred), which could include therapist error; define & describe the neurobiological underpinnings of the dissociative experience. From the Montgomery text, from one of the cases, choose an example of a dissociative moment or experience of the client. Speculate on the traumatic reminder that prompted the dissociation.

(2 points)

6. Describe an ethical conflict and quote the ethical guideline from NASW

Code of Ethics that could be a result of the interface between the particulars of the client (Karen) and something about you, the student, such as ethnicity, religion, family issue, age, gender, sexual orientation, race, class, cultural background, language, socioeconomic status, physical challenge, and/or other individual differences; speculate on how the interplay you describe between you and Karen could be explained neurobiologically. Note: a clinical conflict is not necessarily an ethical conflict, though it could be. Additionally, choose a case from the Montgomery text with whom you may have a strong reaction (counter-transference) that involves something about you, as well. Briefly describe your speculation. **(3 points)**

Paper #2: (25% of final grade)

Application of Attachment Theory, Research and the Neurobiology of Attachment to a Fictional Character

The clinical data is taken from the “case material” on Suzanne, the character in *Postcards from the Edge*. This examination is intended to represent a working draft of a clinical assessment of the forces that have had an effect on the client’s presenting problem. Charts or other schematics to present material are acceptable. **For questions 5-13**, use an article from the Reference List at end of syllabus, the text material, article that you presented, **and/or** any material presented by fellow classmates. **(1.5 points)**

Draft of assessment interviews with client: (#1-4 = **.25 point**)

1. Social Work Setting:
2. Referral Source:
3. Presenting Problem:
4. Identifying data: Create a description of Suzanne from the following list of qualities, characteristics and stressors: age, gender, culture, ethnicity, country of origin, language, educational attainment, religious background, sexual orientation, physical or mental challenge, economic oppression, and social oppression. Additionally, describe her general physical and mental health, previous treatment (if relevant), employment situation, living situation, relevant relationship issues, and other important issues.
5. **(.25 point)** Mention any one of the above descriptors (question #4) which may have an effect on the diagnosis and give neurobiological explanation for why this might be so.
6. **(5 points)** Make a diagnosis listing criteria met with examples and at least 3 defenses with definitions & examples and the neurobiological description which is the mechanism for the criteria and defenses.
7. **(5 points)** What may be the neurobiological significance of the diagnosis as it relates to the attachment category? Speculate on the childhood and the adult attachment category with examples of behavior(s) and note the relationship to the Autonomic Nervous System.

8. **(2 points)** Give an example of your own right brain reaction to an example of any material on this case and explain it from any neurobiological perspective as referenced from any principle of Regulation Theory; include countertransference challenges as they relate to the therapist's attachment history and style and strategies.

9. **(8 points)** For projective identification, take the step-by-step approach as found in Ch. 8 Montgomery, p. 262 (2013) using the argument on the stairs with mother. Describe the neurobiological mechanism behind each step with examples from scene.

10. **(2 points)** RE: 2nd kissing scene

a. From the encounter between Suzanne and Jack), speculate on the adult attachment category of both people, with some detail.

b. Give a neurobiological explanation for the biology of affect regulation that is implicit in their attachment category.

c. What disowned part of a conflict/ambivalence might each one be likely to project onto the other?

d. Why would each one tend to keep the other side of the conflict/ambivalence (make your best clinical speculation)?

11. **(.25 point)** Give a neurobiological explanation for the exchange between Suzanne and Doris when Suzanne comes in late one night. Give some dialogue, such as, "Do you mind if I drink?...Do you mind if I drop acid? Or "I hardly think that my drinking can be compared with your drug taking" in order to illustrate the neurobiology implicit in the encounter.

12. **(.25 point)** From the Evelyn Ames conversation, "I'm in it for the endorphin rush..." Describe and explain Suzanne's reaction (from neurobiological perspective) at any point in the conversation.

13. **(.5 point)** Using the neurobiological information regarding the shame experience, explain Jack and Suzannes' reactions during their argument (e.g., "You know what this is, it's a jealous tantrum...." Or any other interactions or dialogue within that argument).

VI. GRADING SCALE

94.0 and Above A

90.0 to 93.999 A

87.0 to 89.999 B+

84.0 to 86.999 B

80.0 to 83.999 B

77.0 to 79.999 C+

74.0 to 76.999 C

70.0 to 73.999 C

67.0 to 69.999 D+

64.0 to 66.999 D

60.0 to 63.999 D
Below 60.0 F

VII. Class Policies on attendance, participation, and due dates for assignments

Students are expected to attend class regularly and to participate in the class discussions by contributing meaningful questions and discourse with fellow students and the instructor. Readings are expected to be completed prior to class. Role will be taken; leaving class should be explained as soon as possible to the instructor. Leaving will be considered an unexcused absence unless arrangements have been made with the instructor for the absence to be excused. Points will be deducted from the final grade for unexcused absences. The student is allowed one unexcused absence without penalty. Students will not be permitted to make up work missed during unexcused absences. Late assignments will not be accepted without penalty; some exceptions may be made by the instructor. Failure to attend class regularly and demonstrate through class discussion that one has read the assigned material will be considered in assigning the final grade.

VIII. University Policies

Grading Scale

[No A+]		87.0 to 89.999		77.0 to 79.999	C+	67.0 to 69.999	D+
94.0 and Above	A		B	74.0 to 76.999	C*	64.0 to 66.999	D
90.0 to 93.999	A-	+		70.0 to 73.999	C-	60.0 to 63.999	D-
		84.0 to 86.999	B	<i>*minimum to pass course</i>		Below 60.0	F
		80.0 to 83.999					
			B				
		-					

Attendance and Academic Behavior. At the University of Texas at Austin, regular attendance at all class meetings is expected. Instructors are responsible for implementing an attendance policy and must notify students of any special attendance requirements. See more information at <https://catalog.utexas.edu/general-information/academic-policies-and-procedures/attendance/>. Furthermore, students are expected to abide by the Standards for Social Work Education (available at <https://socialwork.utexas.edu/student-resources/bsw/policies-and-procedures/>). The student shows potential for responsible and accountable behavior by being punctual and dependable, prioritizing responsibilities, attending class regularly, observing deadlines, completing assignments on time, and keeping appointments or making appropriate arrangements.

Religious Holy Days. A student who misses classes or other required activities, including examinations, for the observance of a religious holy day should inform the instructor as far in advance of the absence as possible so that arrangements can be made to complete an assignment within a reasonable period after the absence. A reasonable accommodation does not include substantial modification to academic standards, or adjustments of requirements essential to any program of instruction. Students and instructors who have questions or concerns about academic accommodations for religious observance or

religious beliefs may contact the Center for Access and Restorative Engagement at <https://community.utexas.edu/care/>. The University does not maintain a list of religious holy days.

The University of Texas Honor Code. The core values of The University of Texas at Austin are learning, discovery, freedom, leadership, individual opportunity, and responsibility. Each member of the university is expected to uphold these values through integrity, honesty, trust, fairness, and respect toward peers and community.

Policy on Academic Integrity. Students who violate University rules on academic dishonesty are subject to disciplinary penalties, including the possibility of failure in the course and / or dismissal from the University. Since such dishonesty harms the individual, all students, and the integrity of the University, policies on academic dishonesty will be strictly enforced. For further information, please visit the Student Conduct and Academic Integrity website at: <http://deanofstudents.utexas.edu/conduct>.

Use of Course Materials. The materials used in this course, including, but not limited to exams, quizzes, and homework assignments, are copyright protected works. Any unauthorized duplication of the course materials is a violation of federal law and may result in disciplinary action being taken against the student. Additionally, the sharing of course materials without the specific, express approval of the professor may be a violation of the University's Student Honor Code and an act of academic dishonesty, which could result in further disciplinary action. This sharing includes, among other things, uploading class materials to websites for the purpose of distributing those materials to other current or future students.

University Electronic Mail Student Notification. Electronic mail (email), like postal mail, is a mechanism for official University communication to students. The University will exercise the right to send email communications to all students, and the University will expect that email communications will be received and read in a timely manner. Students can find UT Austin's policies and instructions for updating their e-mail address at <https://it.utexas.edu/policies/university-electronic-mail-student-notification-policy>.

Steve Hicks School of Social Work Policies

Professional Conduct and Civility in the Classroom. The professor expects students to act as professionals in class. This means students should arrive on time for class, be prepared to participate in the class discussion, and show respect for one another's opinions. A course brings together a group of diverse individuals with various backgrounds. Students are influenced and shaped by such factors as race, ethnicity, gender, sex, physical abilities, religious and political beliefs, national origins, and sexual orientations, among others. We expect to learn from each other in an atmosphere of positive engagement and mutual respect. This atmosphere includes working intentionally to recognize and dismantle racism, sexism, heterosexism, and ableism in the classroom. Social Work also deals with complex and controversial issues. These issues may be

challenging and uncomfortable, and it would be impossible to offer a substantive classroom experience that did not include potentially difficult conversations relating to challenging issues. In this environment, we will be exposed to diverse ideas and opinions, and sometimes we will not agree with the ideas expressed by others. Nevertheless, the professor requires that students engage one another with civility, respect, and professionalism.

Classroom Confidentiality. Information shared in class about agencies, clients, and personal matters is considered confidential per the NASW Code of Ethics on educational supervision and is protected by regulations of the Family Educational Rights and Privacy Act (FERPA) as well. As such, sharing this information with individuals outside of the educational context is not permitted. Violations of confidentiality could result in actions taken according to the policies and procedure for review of academic performance located in sections 3.0, 3.1, and 3.2 of the Standards for Social Work Education.

Unanticipated Distress. Students may experience unexpected and/or distressing reactions to course readings, videos, conversations, and assignments. If so, students are encouraged to inform the professor. The professor can be responsive and supportive regarding students' participation in course assignments and activities, but students are responsible for communicating clearly what kind of support is desired. If counseling is needed, students may contact a service provider of their choosing, including the UT Counseling and Mental Health Center at 512-471-3515 or online at <https://cmhc.utexas.edu/>.

Policy on Social Media and Professional Communication. Public social networks are not private. Even when open only to approved or invited members, users cannot be certain that privacy will exist among the general membership of sites. If social work students choose to participate in such forums, please assume that anything posted can be seen, read, and critiqued. What is said, posted, linked to, commented on, uploaded, subscribed to, etc., can be accessed and archived, posing potential harm to professional reputations and prospective careers.

Social work students who use social media (e.g. Facebook, Twitter, Instagram) and other forms of electronic communication (e.g. blogs) must be mindful of how their communication may be perceived by clients, colleagues, faculty, and others. Social work students are expected to make every effort to minimize material which could be considered inappropriate for a professional social worker in training. Because of this, social work students are advised to manage security settings at their most private levels and avoid posting information/photos or using any language that could jeopardize their professional image.

Students are asked to consider the amount of personal information posted on these sites and are obliged to block any client access to involvement in the students' social networks. Client material should not be referred to in any form of electronic media, including *any* information that might lead to the identification of a client or compromise client confidentiality in *any* way. Additionally, students must critically evaluate any material that is posted regarding community agencies and professional relationships, as

certain material could violate the standards set by the School of Social Work, the Texas Code of Conduct for Social Workers, and/or the NASW Code of Ethics.

Social work students should consider that they will be representing professional social work practice as well as The University of Texas at Austin School of Social Work program while in the classroom, the university community, and the broader area communities.

Resources, Prevention of Discrimination, and Safety

Disability Accommodation Statement. If you are a student with a disability, or think you may have a disability, and need accommodations please contact Disability and Access (D&A). You may refer to D&A's website for contact and more information: <https://community.utexas.edu/disability/>. If you are already registered with D&A, please deliver your Accommodation Letter to me as early as possible in the semester so we can discuss your approved accommodations and how they apply in my class.

Behavior Concerns and Covid-19 Advice Line (BCCAL). If students have concerns about their behavioral health, or if they are concerned about the behavioral health of someone else, students may use the Behavior Concerns and COVID-19 Advice Line to discuss by phone their concerns. This service is provided through a partnership between the Office of the Dean of Students, the Counseling and Mental Health Center (CMHC), the Employee Assistance Program (EAP), and The University of Texas Police Department (UTPD). Call 512-232-5050 or visit <https://safety.utexas.edu/behavior-concerns-advice-line>. The Behavior Concerns and COVID-19 Advice Line has been expanded to support The University of Texas at Austin community during the COVID-19 pandemic. By calling 512-232-5050 - Option 2 for COVID-19, students, faculty and staff can be assisted in English and Spanish with COVID-19 support.

Covid-19 Related Information. The University's policies and practices related to the pandemic may be accessed at: <https://protect.utexas.edu/>

Title IX Reporting. In accordance with Title IX of the Education Amendments of 1972, the University of Texas at Austin is committed to maintaining a learning environment that is free from discriminatory conduct on the basis of sex <https://titleix.utexas.edu/>. Faculty, field instructors, staff, and/or teaching assistants in their supervisory roles are mandated reporters of incidents of sex discrimination, sexual harassment, sexual violence, stalking, dating violence, or any other forms of sexual misconduct. Students who report such incidents will be informed of University resources. Incidents will be reported to the University's Title IX Coordinator. Further information, including student resources related to Title IX, may also be found at <https://titleix.utexas.edu/>.

Title IX Accommodations for Those Pregnant, Nursing and Parenting. Pregnant, nursing and parenting students, faculty, and staff are eligible for accommodations through the Title IX Office that support equal access to education and work and prevent discrimination. Students may reach out to the Title IX Office for help with

accommodations to make up missed classes, complete missed coursework, keep them safe in the classroom, apply for leaves of absence, receive priority registration and other related support. Faculty and staff, including undergraduate students who work on campus and graduate student employees, may reach out for assistance with job or schedule restructuring and obtaining modified or additional work equipment. Visit the [Title IX pregnancy and parenting resource page](#) for more information or contact the [Title IX Support and Resources team](#) connect with a Case Manager.

Campus Carry Policy. The University’s policy on campus carry may be found here: <https://campuscarry.utexas.edu>.

Safety. As part of professional social work education, students may have assignments that involve working in agency settings and/or the community. As such, these assignments may present some risks. Sound choices and caution may lower risks inherent to the profession. It is the student's responsibility to be aware of and adhere to policies and practices related to agency and/or community safety. Students should notify the professor regarding any safety concerns.

Emergency Evacuation Policy. Occupants of buildings on the UT Austin campus are required to evacuate and assemble outside when a fire alarm is activated or an announcement is made. Please be aware of the following policies regarding evacuation:

- Familiarize yourself with all exit doors in the classroom and the building. Remember that the nearest exit door may not be the one you used when entering the building.
- If you require assistance to evacuate, inform the professor in writing during the first week of class.
- In the event of an evacuation, follow the professor’s instructions.
- Do not re-enter a building unless you are given instructions by the Austin Fire Department, the UT Austin Police Department, or the Fire Prevention Services office.

IX. COURSE SCHEDULE

	Topic: Required readings; to be presented	Assignment Due: Additional presentation material(article/chapt)	Readings: (recommended/ optional)
June 5 Class #1	Introduction to course For next class, read case of Karen(in Canvas)		
June10 Class #2	Attachment: Montgomery, A. (2013). Chapter 1,	<i>Sable, P. (2012). ...pet connection)</i> <i>Cassidy, J. (1999) ...the nature of the child's ties....</i>	

	<p>Affect Regulation and the Autonomic Nervous System, 3-27.</p> <p>Schore, A.N. {Mon(2012). Chapter 6 Attachment, affect regulation, and the developing right brain: Linking developmental neuroscience to pediatrics.</p>	<p><i>Karen, R. (1990)....attachment....</i></p> <p><i>Nelson, J. & Bennett, S. (2008) ...introduction, special issue on attachment</i></p> <p><i>Bowlby, J. (1960)...grief and mourning in early childhood</i></p>	
<p>June 12 Class #3</p>	<p>Neurobiology of fear and trauma:</p> <p>Schore, A. N. (2012)Chapter 3. Right brain affect regulation: An essential mechanism of development, trauma, dissociation,....</p> <p>Montgomery, A. (2013). Chapter 2, Defense Mechanisms and the Limbic System</p>	<p><i>Siegel, D. (2003). Brain symmetry, neural integration....</i></p> <p><i>Basham, ...homecoming as a safe haven or the new front: attachment & detachment in military couples</i></p> <p><i>Nelson, J. (in press) ..forming the internal working models of attachment...</i></p>	<p>Assessment tool: In Scarf, M. (1995). Intimate worlds, life inside the family. NY: Random House, from Chapter 2: The Beavers Scale of Family Health and Competence: Levels 1-5)</p>

	Group presentation: Piaget		
Class #4 June17	<p>Coping with fear and trauma Montgomery, A. (2013). Ch. 3, Threat Management)</p> <p>Schore, A.N. (2012). Chapter 2. Relational trauma and the developing right brain: An interface of Psychoanalytic Self Psychology and Neuroscience. (52-70)</p> <p>Schore, A.. (2012). Chapter 8 Attachment trauma and the developing right brain: Origins of pathological dissociation (259-320).</p> <p>Group presentation: Kohut</p>		<p>Greenberg, G. (July 2001).</p> <p>Aisenberg, E. (2008).</p>

<p>June 19 Class #5</p>	<p>Montgomery, A. (2013). Chapter 8, Integrating Selected Neurobiological Concepts into the Supervisory Process, pp. 244-277.</p> <p>Work on Karen paper together;</p>	<p><i>van Ijzendoorn, M. & Sagi, A. (1999) ...cross-cultural patterns of attachment</i></p> <p>Kaslow: Chapter 10 Cultural issues in Relational Diagnosis: Hispanics in the United States</p> <p>Kaslow: Chapter 11 Cultural Considerations in Diagnosis,</p> <p><i>Wallin, D. (2007). The unresolved patient...</i></p>	<p>Vaillant (1974) chart</p> <p>Defensive Functioning Scale (807-810); Glossary (811-813); GARF Scale (814); SOFAS Scale (817) in DSM-IV-TR</p>
<p>June 24 Class #6</p>	<p>Clinical work with relational templates resulting in coping with fear and trauma</p> <p>Schore, AN. (2012). Chapter 5 Therapeutic enactments: Working in right brain</p>	<p><i>How Power Affects the Brain</i></p>	

	windows of affect tolerance (152-222).		
	Group presentation: Mahler		
June 26 Class # 7	Neuroception and attachment-informed interventions Montgomery, A. (2013). Chapter 4, Therapeutic Engagement Issues and the Vagal System, 65-113. Group Presentation: Kohlberg	<i>Beebe, B. (2003) Brief Mother-Infant Treatment....</i> <i>Berlin, L., Zeanah, C., & Lieberman, (2008). Prevention and intervention programs supporting attachment.....</i>	
July 1 Class #8	Early dysregulation and resulting attachment injuries Schoore, A.N., (2003a). Parent-infant communications and the neurobiology of emotional development. <i>Affect dysregulation and</i>	<i>Lyons-Ruth, K. (2008)....attachment disorganization</i> } <i>Mikulincer, M. & Shaver, P. (2007)...individual difference in attachment-system,</i> <i>Solomon, J. & George, C. (2008)....measurement of</i>	

	<p><i>disorders of the self.</i> attachment in children... New York: W.W. Norton & Co. Chapter 4 (75-86).</p> <p><u>Group Presentation:</u> <u>Gilligan</u></p>	<p><i>The neurobiology of feeling safe</i> <i>Robertson on attachment</i> <i>Panksepp, J. (2013). How primary-process emotional systems guide child development: Ancestral regulators of hu</i></p>	
<p>July 3 Class # 9</p>	<p>Attachment styles as templates for disordered personality functioning</p> <p>Montgomery, A. (2013). Chapter 5, Personality Disorders as Affect Management Strategies, 114-192</p> <p>Ch. 9. Schore, 2012, Borderline Personality Disorder</p>	<p>Wallin, D. The dismissing patient. In: <i>Attachment in Psychotherapy</i>, New York: The Guilford Press, 211-223.</p> <p>Wallin, D. (2007).</p> <p>Wallin, D. <i>The preoccupied patient.</i> In: <i>Attachment in Psychotherapy</i>, New York: The Guilford Press, 224-241.</p> <p>Bennett, S. & Nelson, J. (Eds.) (2010). <i>Blieberg (2001)..treating personality disorder in children and adolescents</i></p> <p>Wallin, D. (2007) <i>Attachment in psychotherapy. (84-98).</i></p>	<p><i>Suggest review for class: DSM 5-TR</i></p> <p><i>Personality Disorders</i> <i>Alternative DSM-5-TR model for Personality Disorders</i></p>
<p>July 8 Class #10</p>		<p>Traumatic Antecedents of Borderline Personality Disorder. In <i>Psychological trauma</i> (pp. 111-126) Bessel A. van der Kolk. (in Canvas)</p>	

July 10 Class#11	<p>Developmental issues in assessing attachment styles</p> <p>Montgomery, A. (2013). <i>adolescence</i>. Chapter 6.</p> <p>Schore, 2012...how elephants....</p>	<p><i>Sagi, A, van I Jzendoorn, M., Aviezer, O. Donnell, F., & Mayselless, O.. (1994) ...sleeping outside the home in a Kibbutz)..</i></p> <p><i>van Ijzendoorn, M. & Sagi, A. (2008) ...attachment in the Kibbutz....</i></p>	
July 15 Class # 12	<p>Group Presentation: Maslow</p> <p>Schore, J. R. & Schore, A.N. (2008). The central role of affect regulation in attachment</p> <p>Compare and contrast cultural sculpting of attachment</p>	<p>van der Kolk, B. A. (1987)...psychological consequences of overwhelming life experiences....</p> <p><i>Takahashi, K. (1990).</i></p> <p><i>Tronick, E. (2007) Multiple</i></p>	

	<p>Schore, A.N.(2012). Bowlby's environment of evolutionary adaptedness: Current decrement in U.S. Culture (339-382).</p> <p>Cozolino, 2016, chapter 8, core shame....</p> <p>Group Presentation: Erickson</p>	<p><i>caretaking in the context of human evolution:</i> Tronick, E. (2007) The Manta pouch:</p> <p>Tronick, E. (2007) Mother-infant interaction among the Gusii of Kenya.)</p>	
<p>July 17 Class #13</p>	<p>Assessing "normative"</p> <p><i>Wallin, Assessing the patient's state of mind with respect to attachment. In: Attachment in Psychotherapy, 206-210.</i></p> <p><i>Text material, in Canvas</i></p> <p>...</p> <p>Group Presentation: Gilligan</p>	<p>Nelson, J. (2005). ...crying in the clinical hour</p> <p>Scheper-Hughes, N. (1992)death without weeping</p> <p>Schoch, R. (1992). <i>Q & A on death without weeping article(Scheper-Hughes)</i></p>	<p>Suggested review for class from DSM 5-TR:</p> <p><i>Depressive Disorders, ; Anxiety Disorders, ; Dissociative Disorders; Trauma-and Stressor-Related Disorders; Somatic Symptom and Related Disorders; Sleep-Wake Disorders,</i></p>
<p>Class #14 July 22</p>	<p>Therapeutic change & neurobiology of attachment and regulation issues</p> <p>Schore, A.N. (2012). Chapter 4 The right brain</p>	<p>Nelson J. (in press).<i>laughter in the clinical hour...</i></p>	

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