Conference and Meeting:

Attachment at the interface of research and practice – Looking ahead

22\textsuperscript{nd} and 23\textsuperscript{rd} September 2016

Stockholm, Sweden

Dept. of Psychology, Stockholm University, Frescati Hagväg 8

Organizers:

Pehr Granqvist; Stockholm University, Sweden
Elia Psouni; Lund University, Sweden
Elin Alfredsson; University of Goteborg, Sweden
Plenary speaker: Carlo Schuengel

Carlo Schuengel and his research group of Clinical Child and Family Studies at the Vrije Universiteit Amsterdam focus on the linkage between parent-child relationships and the development of mental health, including the role that interventions may play. Insight is drawn from a pregnancy cohort study with over 2,000 families that have been followed for 6 years, yielding insight in the transition to parenthood, parental self-regulation, and transmission of attachment. Special attention goes to subsamples exposed to traumatic experiences, including genetic and epigenetic data collection. Insight is also drawn from the Attachment Transmission Synthesis Collaboration which is coordinated by his group, and brings together primary research data from 30 years’ worth of attachment transmission research from around the world. Furthermore, disordered attachment is a focus in observational, diagnostic, and intervention studies, including children in foster care and home-reared children, and children with intellectual disabilities. Supporting parents to build secure attachment relationships is the subject of several intervention trials as well as proof of concept studies including ICT-supports.

Carlo Schuengel’s presentation will discuss clinical interventions, but also the impact of parents’ access to practical programs, tools, devices that parents may use to improve the quality of attachment relationships within the family.

Invited speaker: Robbie Duschinsky

Robbie Duschinsky is Lecturer in Social Sciences in the School of Clinical Medicine, University of Cambridge, where he leads the Applied Social Sciences Group within the Primary Care Unit. He is also Director of Studies and a Fellow at Sidney Sussex College, Cambridge. His research has primarily focused on children, families and theories of human behaviour, integrating approaches from psychology, sociology, history and philosophy. He holds an Investigator Award from the Welcome Trust for research on debates around infant disorganized attachment and their implications for clinicians. As well as historical and philosophical study of the infant attachment classifications and their meaning, he is also engaged in developmental research on infant emotion regulation, stress behaviours and health. He is an affiliated researcher with the Department of Psychology, Stockholm University, working with Pehr Granqvist on the implications of attachment theory for social work practice with children.
Program

22nd September 2016

Venue: Dept. of Psychology, SU, Frescati Hagväg 8 / U34

12:00-13:00  Arrival, Lunch (only for paying participants)

13:00-13:15  Welcome and Information
             Elia Psouni & Pehr Granqvist

13:15-14:45  Attachment and emotion biases and reactions: Presentations on ongoing attachment-related work in the Nordic Countries
             Chair: Pehr Granqvist

14:45-15:15  Networking, mingling and Coffee

15:15-16:45  Attachment and Child Interventions: Presentations on ongoing attachment-related work in the Nordic Countries
             Chair: Elia Psouni

16:45-17:00  Short break

17:00-18:00  Invited presentation and discussion: Robbie Duschinsky
             "Infant Disorganized Attachment: Debates, Clarifications and Changing Perspectives"
             Chair: Pehr Granqvist

18:00-19:00  Posters and appetizers

19:30 ...  Dinner (for those who wish to join, at your own expense😊)

Let us know LATEST 8 Sept, by e-mail to pehr.granqvist@psychology.su.se
23rd September 2016

Venue: Dept. of Psychology, SU, Frescati Hagväg 8 / U34

08:30-09:30  NAN annual meeting
09:30-10:45  Plenary talk and discussion: Carlo Schuengel

“How can attachment research inform self-management of parents at risk, or parents of children at risk?”

Chair: Elia Psouni

Venue: Dept. of Psychology, SU, Frescati Hagväg 8 / U34

10:45-11:15  Networking, mingling and Coffee
11:15-12:45  Caregiving and attachment with risk populations: Presentations on ongoing attachment-related work in the Nordic Countries

Chair: Catarina Furmark

12:45-13:00  Closing of the Meeting
13:00-14:00  Lunch (for those who wish to join, at your own expense 😊)
SESSION 1: Attachment and emotion biases and reactions

1.1 Attachment status at 12 months is predicted by infants’ attention allocation to facial expressions of emotions at 10 months

Mari Fransson, Gustaf Gredebäck, Ben Kenward, Marcus Lindskog, Linda Forssman & Carin Marciszko

Uppsala Child and Baby Lab, Department of Psychology, Uppsala University

There is a scarcity of studies investigating socio-emotional precursor to mother-infant attachment during the first year of life. In the present study, we investigated whether individual differences in 10-month-olds’ attention to happy and fearful facial expressions could predict differences in their attachment status at 12 months of age. Participants were fifty infants from the ongoing longitudinal BASIC-Child project. The infants’ attention to happy and fearful emotional expressions was measured by an eye-tracking task (see Figure 1). Mother-infant attachment was assessed with the Strange Situation Procedure (SSP; Ainsworth et al., 1978). Our results showed that organized-insecure attachment (B vs. AC) was predicted by enhanced attention to fearful (vs. neutral) facial expressions at 10 months (t(44) = 2.19, p = .034), whereas disorganized attachment (D vs. ABC) was predicted by less attention to happy (vs. neutral) faces at 10 months (t(44)= 2.84, p = .007). Hence, individual differences in attachment status can be traced in infants’ attention to happy and fearful faces already at 10 months, and the secure-insecurity and organized-disorganized dimensions seem to relate to distinguished emotional processing trajectories.

Figure 1. Eye-tracking task measuring visual attention to happy and fearful facial expressions at 10 months of age. On each trial the infants were presented with an image containing two neutral faces and one happy (left) or fearful (right) face (6 trials each) for 5 s. Dependent measure was the proportion of looking time to the emotional face compared to the total looking time to all three faces.
1.2
Diminished Ability to Identify Facial Emotional Expressions in Children with Disorganized Attachment Representations

Tommie Forslund\textsuperscript{a}, Ben Kenward\textsuperscript{b}, Pehr Granqvist\textsuperscript{c}, Gustaf Gredebäck\textsuperscript{a}, and Karin C. Brocki\textsuperscript{a}

\textsuperscript{a}Uppsala University, Department of Psychology, Sweden
\textsuperscript{b}Oxford Brookes University, Department of Psychology, UK
\textsuperscript{c}Stockholm University, Department of Psychology, Sweden

\textbf{Introduction:} Children´s ability to identify facial emotional expressions has long been suggested to be experience-dependent, with parental caregiving as an important factor. More research is however needed, and there is a need to identify psychological mechanisms behind aberrant caregiving experiences and deviations in emotion identification. This study examined whether disorganization of the attachment system may constitute such a psychological mechanism.

\textbf{Methods:} Typically developing children ($N = 105$, 49.5 % boys) aged 6 - 7 years ($M = 6$ years 8 months, $SD = 1.8$ months) completed an attachment representation task and an emotion identification task, and parents rated children´s negative emotionality.

\textbf{Results:} Disorganized children showed a generally diminished ability to identify facial emotional expressions, but no response biases. Disorganized attachment was also related to higher levels of negative emotionality, but discrimination of emotional expressions did not moderate or mediate this relation.

\textbf{Conclusion:} Our novel findings relate disorganized attachment to deviations in emotion identification, and therefore suggest that disorganization of the attachment system may constitute a psychological mechanism linking aberrant caregiving experiences to deviations in children´s ability to identify facial emotional expressions.
1.3
Partner’s body odor lowers stress discomfort

Amy R. Gordon¹, Pehr Granqvist², Karolina Vestbrant², Lillian Döllinger², Mats J. Olsson¹, & Johan N. Lundström¹,³,⁴

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Using a novel “olfaction meets attachment” design, we tested whether a romantic partner’s body odor attenuates adults’ stress-responses and whether this effect is qualified by adult attachment security. Participating women (N=34) provided body odor samples and ratings of adult attachment. In a blocked design, their partner’s body odor, their own body odor, the odor of a clean t-shirt, and the familiar rose odor were presented while participants were exposed to weak electric shocks. Skin conductance (SC) was assessed continuously and subjective discomfort was assessed before and after each block. As predicted, there was a main effect of odor on subjective discomfort (p<.001); the partner’s odor, relative to other odors, significantly lowered discomfort (ps<.02). Also, highly secure participants displayed attenuated SC specifically when exposed to partner odor (p<.03). We conclude that partner odor is a scent of security, especially for relatively secure adults.

Funding support: The Knut and Alice Wallenberg Foundation (KAW 2012.0141), awarded to JNL, and by the Swedish Foundation for Humanities and Social Sciences (P12–1017) to MJO.
1.4 Assessing the impact of attachment on emotion recognition: accuracy scores and types of confusion.

Isabelle Letellier, Lillian Döllinger, Lennart Högman, Emma Neal, Petri Laukka, Tanja Bänziger, Irena Makower, Håkan Fischer, Stephan Hau

Department of Psychology, Stockholm University, Sweden

Emotion recognition accuracy tends to be considered as part of emotional intelligence, and thereby as essential for relationship management. From this perspective, it is puzzling to see that some findings reveal similar – or better – accuracy scores for individuals with high levels of anxiety as compared to more securely attached individuals (Fraley et al., 2006; Steelea et al., 2008). The aim of the present study is to investigate how attachment categories and dimensions impact the accuracy scores and the types of confusion. To our knowledge, the latter has not yet been investigated despite the fact that confusions can be of similar – if not higher – relevance than accuracy for relationship management.

219 psychology students completed The Experience in Close Relationship Scale and a computerized emotion recognition test (Emotion Recognition Assessment in Multiple modalities, ERAM). We present how attachment impacts accuracy both for each modality (audio, video, combined) and for each emotion, as well as the types of confusion that under/overestimate, or reverse emotion valences. These results are discussed to understand to what extent attachment induces biases in emotion recognition, in the light of attachment theory and recent findings on emotion recognition.
Session 2: Attachment and clinical interventions

2.1 Attached to emotions? The interrelationship between attachment, emotion recognition, empathy and therapeutic orientation

Emma Neal

Department of Psychology, Stockholm University, Sweden

Previous research has established the impact of attachment on emotional information processing in general as well as within therapeutic contexts. Yet little is known regarding the influence of therapist’s attachment organization. This study used the ECR-R questionnaire to identify attachment organizations in a sample of 170 psychology and psychotherapy students, and to examine whether attachment would predict their emotion recognition abilities and empathetic aptitude, as well as choice of therapeutic orientation among clinical psychology students. Participants completed two platform based emotion recognition tests and empathy was assessed through the IRI-questionnaire. While hierarchical regressions revealed that emotion recognition was not predicted by any attachment organization, results from logistic regressions demonstrated that clinical psychology students with high levels of attachment anxiety were less prone to choose a cognitive orientation. It was concluded that this might be due to differing appraisal of intra-psychological and emotional processing, suggesting that dimensional attachment organization might prove to possess predictability as to which therapeutic orientation is found attractive. In addition, results indicate that emotional empathy as measured by IRI - Personal Distress was negatively related to high levels of attachment avoidance, which is in line with attachment theory as well as with prior research.
2.2
Copenhagen Infant Mental Health Project (CIMHP): Updates from an ongoing project

Væver, M.S., Smith-Nielsen, J., Lønfeldt, N.N, von Wowern, R., Wendelboe, K.

UCPH Babylab, Department of Psychology, University of Copenhagen, Copenhagen, Denmark

Infant mental health is a significant public health issue as early adversity and childhood stress have life-long consequences for the affected children. There is a lack of knowledge on best practice in screening for and preventing adverse infant mental health risks and development of attachment insecurity and disorganization.

The overall aim of CIMHP is to test the feasibility of an infant mental health screening and indicated prevention system and its capacity to (1) detect children at risk of longer term mental health adversities and (2) alter these risks in the general population in a cost effective way. Mothers and infants in Copenhagen area are screened using two standardized screening instruments: 1) Alarm Distress Baby Scale and 2) Edinburg Postnatal Depression Scale. Eligible parents (N=314) enter into a randomized controlled trial to test the efficacy of an attachment-based intervention program, Circle of Security-Parenting, compared to Care As Usual in preventing mental health adversities and enhancing parental sensitivity and attachment security.

The presentation will focus on the overall research design of CIMHP and present preliminary results on feasibility and acceptability among professionals for implementing universal screening for infant mental risks in primary care.
2.3
The Efficacy of Circle of Security – Parenting (COS-P) for middle class women in Denmark: A pilot randomised controlled study

Karin Haugaard

Centre of Developmental and Applied Psychological Science, Aalborg University, Denmark

Background: Stress and feelings of pressure from the demand of being a perfect mother is an increasing problem among high educated middle class mothers in the Nordic countries, (Gunnarsdottir, Petzold, & Povlsen, 2014, p. 144) and studies show that the parents’ stress feeling, trouble, and anxiety about their children can be connected with negative parent-child relation and child behaviour in preschool (Anthony & Anthony, 2005; Carter & Porges, 2011). Parental stress has been suggested to have a deep impact on social cognition and to turn down parents’ mentalizing ability (Carter & Porges, 2011; Nolte et al., 2013).

Method: In this study we used a randomized controlled design to investigate the impact of 28 middle class mothers in the attachment based parent intervention program, Circle of Security Parenting (COS-P), on their ability to enhance their parental mentalizing. The mothers were randomly assigned to an 8-week COS-P or Care As Usual (CAU), and comparison of the mentalisation was measured at pre- and post-test using the Parental Embodied Mentalising (PEM) coding scheme.

Results: T-test was conducted to compare levels of mentalisation within the COS-P and CAU group at pre-test and post-test. Results relieved that the groups did not differ from the pre-test. The post-test results from the analysis revealed that the mothers in the COS-P group showed significantly higher levels of PEM compared to the CAU group.
2.4
Secure attachment to therapist, alliance, and outcome in psychoanalytic psychotherapy with young adults

Peter Lilliengren\textsuperscript{1)}, Fredrik Falkenström\textsuperscript{2)}, Rolf Sandell\textsuperscript{3)}, Pia Risholm Mothander\textsuperscript{1)}, Andrzej Werbart\textsuperscript{1)}

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An attachment-informed perspective on adult psychotherapy suggests that the development of a secure attachment to the therapist promotes therapeutic changes, possibly beyond the influence of the therapeutic alliance. In this study, we used a novel approach to assess attachment to therapist from patient narratives (Patient Attachment to Therapist Rating Scale; PAT-RS) to investigate the relationships between secure attachment to therapist, patient-rated alliance, and outcome in a sample of 70 young adults treated with psychoanalytic psychotherapy. A series of linear mixed-effects models, controlling for length of therapy and therapist effects, indicated that secure attachment to therapist at termination was associated with improvement in symptoms, global functioning and interpersonal problems. After controlling for the alliance, these relationships were maintained in terms of symptoms and global functioning. Further, for the follow-up period, secure attachment to therapist predicted continued improvement in global functioning whereas the alliance predicted deterioration when both variables were modeled together. While limited by the correlational design, this study suggests that the development of a secure attachment to therapist is associated with treatment gains as well as predictive of post-treatment improvement in functioning.
Session 3: Caregiving and attachment, at-risk populations

3.1
Attachment representations and autonomic regulation in maltreating mothers

Sophie Reijman, Lenneke R. A. Alink, Laura H. C. G. Compier-de Block, Claudia D. Werner, Athanasios Maras, Corine Rijnberk, Marian J. Bakermans-Kranenburg, & Marinus H. van IJzendoorn

Centre for Child and Family Studies, Leiden University

The association between adults’ state of mind toward attachment and their parenting behavior has been well established, but evidence for the role of unresolved/disoriented attachment in child maltreatment perpetration has been inconclusive. In this study we used the Adult Attachment Interview to measure attachment representation in a sample of 38 mothers with substantiated abuse and/or neglect and 35 non-maltreating mothers. More maltreating than non-maltreating mothers had an unresolved/disoriented attachment classification. Coherence of mind was significantly lower in the maltreating group. In addition, we measured mothers’ skin conductance and vagal responses to an attachment-based comfort paradigm. The comfort paradigm consists of video clips in which an animated “caregiver” ellipse and a smaller animated “child” ellipse are separated, and two subsequent caregiving outcomes: a responsive one in which the “caregiver” returns to the “child”, and an unresponsive one in which the “caregiver” abandons the “child”. State of mind toward attachment was related to autonomic regulation during the comfort paradigm: An unresolved/disoriented classification and higher unresolved score, as well as a non-autonomous classification and low coherence of mind score, were associated with a skin conductance decrease during the responsive caregiving clip. The potential utility of attachment-based interventions for maltreating mothers will be discussed.
3.2 Fathers’ Parenting Expectations and Experiences and Their Longitudinal Links to Postnatal Depressive Symptomatology

Marlis Wullenkord & Elia Psouni

Department of Psychology, Lund University, Sweden

Despite increasing focus on their role as parent, fathers have been ignored in research concerning the transition to parenthood. Especially in the face of changing societal norms, it becomes important to understand men’s transition to fatherhood and how its psychological parameters may be related to his and other family members’ well-being. There is evidence that some psychological parameters of this transition may be associated with depressive symptoms in the months following delivery of the child but the role of the father’s own expectations is still unclear. In the present longitudinal study we assessed expectant fathers’ parenting expectations (anticipated parenting satisfaction and parenting representations) in the third trimester of pregnancy (T1) and their actual parenting experiences (experienced parenting satisfaction, self-image as father, and parental stress and burden) 3 months after the birth of the child, and studied associations with marital satisfaction throughout the transitioning period and with the development of depressive symptoms. Results suggest a moderate association between marital satisfaction and anticipated parenting satisfaction during the last trimester of pregnancy. This association was strengthened postnatally, particularly in first-time fathers. Three months postnatally, lower satisfaction with actual parenting experiences and lower marital satisfaction were associated with higher depressive symptoms. First-time fathers whose initial parenting expectations were not met reported more depressive symptoms and decline in marital satisfaction. These changes were not observed in multiparous fathers. Despite difficulties in deciding about the causal direction in some of these relationships, results highlight the importance of psychological features of the transition to parenting for preventive work concerning perinatal paternal depression, particularly in first-time fathers.
3.3 Depressed Mothers’ Parental Caregiving Representations: Different between women who seek and women who do not seek help

Elia Psouni, Sara Aldén, Linnea Andersson & Emily Cacciola

Department of Psychology, Lund University, Sweden

Aims: Although when untreated, postpartum depression (PPD) puts at risk both maternal health and child development, held back by shame, guilt, stigma of mental disease and social ideas concerning expectations regarding motherhood, many women conceal their suffering. The present study examined attachment scripts, parental caregiving representations, and links to severity of depression comparing mothers with PPD who had concealed their suffering and not sought professional help (n= 25) and mothers who had sought professional help (n = 20).

Methods: All mothers (N = 45) had screening scores indicating major depression on the Edinburgh Postnatal Depression Scale (EPDS: Cox et al., 1987, score-range 12-24). Data was collected through narrative-based assessment of attachment scripts (ASA: Waters & Rodrigues-Doolabh, 2004) and the Parental Caregiving Attachment Interview (P-CAI: Psouni & Bengtsson, 2001; 2011), which evaluates representations of caregiving from an attachment theoretical perspective. Caregiving representations include perceptions of the child, of oneself and one’s partner as parents, and states of mind regarding own and partner’s relationship to the child. ASA-narratives were scored by 2 reliable coders (intrarater reliability = .89). Classifications of P-CAI transcripts by 3 coders converged (93%) with sub-scale intra-class correlations ranging between .85 and .92.

Results and Conclusion: 69% of mothers did not demonstrate secure-base scripts (ASA) and their caregiving representations were most commonly classified as insecure. Also 7 (out of 17) depressed mothers with secure caregiving representations conveyed insecure attachment scripts. These mothers were receiving professional help for their depression. No other difference was found between the caregiving representations of mothers who had sought help for their PPD and mothers who had not. Most burdening depressive symptoms were reported by women whose caregiving representations were classified as disorganized or preoccupied. Severity of depressive symptoms was associated with involving caregiving behaviors, preoccupying feelings of guilt and of being rejected by the child, and derogation of the father’s relationship to the child. Surprisingly, securely attached depressed mothers expressed more devaluation of their partners' relationship with the child, indicating a potential impact of relationship difficulties on the mothers’ depression. Our findings highlight the importance of addressing the couple as entity in the context of PPD.
3.4
Externalizing behavior problems among children of mothers with mild intellectual disabilities: Links with maternal sensitivity and maternal experiences of maltreatment

Pehr Granqvist§ Tommie Forslund† Mari Fransson‡ Lydia Springer‡, and Lene Lindberg*

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‡ SUF Resource Center, Uppsala County Council, Uppsala, Sweden;

Aims: We tested whether children raised by mothers with intellectual disability (ID) display more externalizing behavior problems than children of socioeconomically matched mothers without ID. Another aim was to study which factors that are associated with behavior problems among children of mothers with ID. Thus, we explored the predictive roles of key maternal variables (sensitivity, experiences of maltreatment/trauma, intelligence) as well as child attachment (insecurity and disorganization).

Method: Participants were 23 mothers diagnosed with mild ID and their children, and 25 comparison mothers/children. Mean child age was 77 mos; 58% boys. Maternal experiences of maltreatment/trauma and child attachment were assessed with semi-structured interviews, maternal sensitivity with structured behavior observations, maternal intelligence with WAIS-III (blocks subtest), and child behavior problems with a mother-rated questionnaire.

Results: Children raised by mothers with ID displayed significantly higher externalizing behavior problems than children in the comparison group ($d = .89$). In the ID group, maternal experiences of maltreatment/trauma ($r = .43$) and maternal sensitivity ($r = -.67$) were the only factors significantly associated with child behavior problems. Finally, the relation between maternal ID status and child behavior problems disappeared ($partial r = .06$) when we controlled for group differences in maternal sensitivity.

Conclusions: Research and clinical practice must take into account the deleterious impact of a history of maltreatment/trauma on ID mothers’ capacity to give sensitive care and on their children’s behavioral development.
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