

**Disturbances of Attachment Interview--Revised
(Version 7/17/17)**

Anna Smyke, Ph.D.
Charles H. Zeanah, M.D.

Section of Child and Adolescent Psychiatry
Tulane University School of Medicine

Correspondence: Charles H. Zeanah, M.D.
Department of Psychiatry and Behavioral Sciences
Tulane University School of Medicine
1430 Tulane Avenue #8055
New Orleans, LA 70112
Phone: (504) 988-5402
Fax: (504) 988-4264
Email: czeanah@tulane.edu

Introduction

This is a semi-structured interview designed to be administered by clinicians to caregivers who know the child and the child's behavior well. If possible, it should be administered to the child's primary caregiver. Specific probes are designed to elicit more information; they are not intended to be exhaustive. Clinicians should probe until they feel confident about how to rate each item. The scoring is completed at the close of the interview based upon responses provided. Familiarity with the behavioral phenotypes will be quite helpful in probing for sufficient data to complete the ratings.

To assess presence of attachment disturbances that were present but no longer are, the interview questions may be asked about when the child was first placed with the current caregiver, as well as now to get an assessment of now and when the child first came to be cared for by the interviewee.

The interview may be administered to young children between the (developmental) ages of 10 and 60 months.

Introduction to interviewee

We're talking with parents/caregivers about their children and some of the things they do, so we can understand children better. This interview takes about 20 minutes, sometimes a little more, sometimes a little less. Can you tell me how old [child] is?

Part 1

For each set of probes, select the rating that is the best match for the child's typical behavior. The probes are intended to be illustrative rather than comprehensive. The idea is to probe sufficiently so that the rating becomes clear.

1) Does s/he have one or more special adult(s) that s/he prefers over others? Who is it? How does s/he show that s/he prefers that person(s)? Could you give me a specific example? Are there any other adults that are special, like this? Whom does s/he prefer most of all? We are trying to figure out whether or not s/he has a "go to" person when s/he really needs someone?

0 Clearly differentiates among adults and demonstrates a preferred caregiver

1 Sometimes or somewhat indicates a preferred caregiver

2 Rarely or minimally demonstrates a preferred caregiver

N.B., Familiarity is not equivalent to preference

2) When s/he falls down and hurts himself/herself what does s/he do? Does s/he sit where s/he is and wait for you or another caregiver to come to him/her, or does s/he come over and indicate that s/he is hurt? Does s/he seem to anticipate that you or some other caregiver will come to him/her when she is distressed? Does she ever go to people that

she doesn't know well for comfort? Does she ever go to someone unfamiliar for comfort even when someone familiar is available?

- 0** Clearly seeks comfort preferentially from one or more preferred caregivers. Comfort seeking may range from approaching with arms extended, signaling pick-me-up, to appealing to parent for comfort by looking without approaching.
- 1** Sometimes or somewhat seeks comfort preferentially from one or more preferred caregivers but is inconsistent about either seeking comfort or is sometimes seeks comfort from relative strangers.
- 2** Rarely or minimally seeks comfort preferentially from a preferred caregiver; the child may cry or not cry at all when hurt or distressed, but s/he generally does not seek comfort for the distress.

3) When s/he does come to you (or when you go to him/her) does s/he accept being comforted or does s/he not respond to comforting?

- 0** Clearly responds to comfort from caregivers when hurt, frightened, or distressed
- 1** Sometimes or somewhat responds to comfort from caregivers when hurt, frightened, or distressed
- 2** Rarely or minimally responds to comfort from caregivers when hurt, frightened, or distressed

4) Does s/he show a definite interest in interacting with/engaging with other people? Is this true all of the time or just some of the time? Does the child show any withdrawn behavior, or frightened behavior or uninterested behavior that suggests s/he is not interested in engaging with people much of the time?

- 0** Clearly is interested in interacting with/engaging with other people.
- 1** Somewhat or sometimes is interested in interacting with/engaging with other people.
- 2** Rarely or never is interested in interacting with/engaging with other people.

5) Does s/he enjoy engaging in social or verbal back and forth with you, let's say, talking with you, or showing you that s/he's excited about something? Does s/he take turns talking or gesturing with you? Does s/he respond to your attempts to engage her/him? Does s/he initiate socially with you?

- 0** Clearly responds reciprocally with familiar caregivers
- 1** Sometimes or somewhat responds reciprocally with familiar caregivers

2 Rarely or minimally responds reciprocally with familiar caregivers

6) How are his/her moods? Is s/he generally happy, or more irritable or sad or serious? Would you say s/he is like that most of the time or some of the time? How often is s/he irritable, sad, or serious? Does s/he snap out of a bad mood relatively easily? How often?

0 Clearly regulates emotions well with ample positive affect and developmentally expectable levels of irritability and/or sadness.

1 Sometimes or somewhat has difficulty regulating emotions with less positive affect and more irritability and/or sadness than is expected developmentally.

2 Rarely or minimally regulates emotions well; instead, has little positive affect and definitely elevated levels of irritability and/or sadness.

7) Do any of the behaviors we have previously discussed significantly affect the young child's functioning in one or more of the following ways?

- a. Cause distress to the infant/young child (please give an example)
- b. Interfere with the child's relationships (please give an example)
- c. Limit the child's participation in developmentally expected activities or routines (please give an example)
- d. Limit the family's participation in everyday activities or routines (please give an example)
- e. Limit the child's ability to learn and develop new skills, or interfere with developmental progress (please give an example).

Part 2

Now I am going to ask you some more questions about [child]'s typical behavior, this time about how s/he acts around unfamiliar adults.

8) When you are in a place that is not familiar for [child], what does s/he do? Does s/he check back with you or does s/he just go off without checking back? Does s/he tend to wander off without any particular purpose? If s/he finds him/herself separated from you does s/he get upset or does it seem to not really bother him/her?

0 Clearly checks back with caregiver after venturing away, especially in unfamiliar settings.

1 Sometimes or somewhat checks back with caregiver after venturing away, especially in unfamiliar settings.

2 Rarely or minimally checks back with caregiver after venturing away, especially in unfamiliar settings.

9a) *How does s/he behave around adults that s/he doesn't know? Does s/he tend to be friendly or does s/he usually stand back and observe or not approach? Does s/he tend to be sort of shy around strangers or does s/he go right up to people s/he doesn't know? (Why do you think s/he does this?) Does s/he cry or cling to you or does she just seem wary/cautious? Does s/he do this all the time or some of the time? Is his/her reaction sort of mixed so that at some times s/he is friendly but other times she might cry or s/he is friendly with some unfamiliar adults but not with others? Could you give me a specific example of a time when s/he was around an adult that s/he didn't know? If shy, does s/he seem to be shy at first and then tend to warm up or does s/he stay shy? Has she been consistently shy over time or has that been variable?*

- 0 Clearly exhibits reticence with unfamiliar adults.
- 1 Sometimes or somewhat exhibits reticence with unfamiliar adults.
- 2 Rarely or minimally exhibits reticence with unfamiliar adults.

9b) *Does s/he approach unfamiliar adults and get too close physically? Touch others familiarly even though s/he does not know them? Is this a pattern of behavior that occurs consistently?*

- 0 Rarely or minimally exhibits overly close physical approach to unfamiliar adults.
- 1 Sometimes or somewhat exhibits overly close physical approach to unfamiliar adults.
- 2 Clearly exhibits overly close physical approach to unfamiliar adults.

9c) *If the child is verbal, does s/he ask overly familiar or intrusive questions of unfamiliar adults? Does this seem more than is typical of children this age? Is this a pattern of behavior that occurs consistently?*

N.B. If child is not sufficiently verbal, do not rate this response.

- 0 Rarely or minimally directs verbally intrusive questions to unfamiliar adults.
- 1 Sometimes or somewhat directs verbally intrusive questions to unfamiliar adults.
- 2 Clearly directs verbally intrusive questions to unfamiliar adults.

10) *Do you think s/he would be willing to go off with a stranger? Why do you think so? Could you give me a specific example? Do you think s/he would do this some of the time or most of the time? Has this way of interacting with strangers changed? Was s/he more/less willing at an earlier age to go off with someone s/he didn't know?*

- 0 Clearly is not willing to go off readily with relative strangers.

1 Sometimes or somewhat is willing to go off readily with relative strangers.

2 Willing to go off readily with relative strangers.

11) *Do any of the behaviors we have previously discussed about approaching and interacting with strangers or wandering away significantly affect the young child's functioning in one or more of the following ways?*

- a. Cause distress to the infant/young child (please give an example)
- b. Interfere with the child's relationships (please give an example)
- c. Limit the child's participation in developmentally expected activities or routines (please give an example)
- d. Limit the family's participation in everyday activities or routines (please give an example)
- e. Limit the child's ability to learn and develop new skills, or interfere with developmental progress (please give an example).

Part 3

Now, I'd like to ask a few more questions about some of [the child's] specific behaviors.

12) *Is s/he one to get him/herself in risky situations? Could you give me a specific example? Is s/he one to run out into traffic or maybe pull stuff off of the stove? Does s/he seem to try to provoke you with his/her dangerous behavior? Does s/he do this with everyone or does s/he do this mostly around one particular person? Why do you think s/he does it?*

0 Clearly does not engage in a pattern of self-endangering behavior that is more pronounced in the presence of one particular caregiver.

1 Sometimes or somewhat engages in a pattern of self-endangering behavior that is more pronounced with one particular caregiver.

2 Definitely engages in a pattern of self-endangering behavior that is more pronounced with one particular caregiver.

N.B. This is not intended to capture risk-taking behavior that occurs in multiple settings and relationships but rather risk taking behavior that is provocative, and directed primarily towards one particular caregiver.

13) *Does s/he tend to cling to you or stay very close to/right up under you? When does this seem to happen? Does it seem to happen if there is an adult around who she doesn't know? Or does it tend to happen at other times, too? Could you give me a specific example? Is this more than you would expect from a child at this age?*

- 0** Clearly does not engage in a pattern of excessive clinging to a particular caregiver in unfamiliar settings or with unfamiliar people.
- 1** Sometimes or somewhat engages in a pattern of excessive clinging to a particular caregiver in unfamiliar settings or with unfamiliar people.
- 2** Definitely engages in a pattern of excessive clinging to a particular caregiver in unfamiliar settings or with unfamiliar people.

14) How does s/he respond to you (or other caregiver) when you are angry? Does s/he tend to watch you or other caregivers closely a lot of the time, like watching to see what your or their moods are? Does s/he ever seem to be a bit afraid of you (or other caregivers)? Does s/he ever obey immediately and compliantly, in a sort of automatic or frightened way, when given instructions? Does this seem to be an excessive response by the child? Is it with just one person or with more than one that the child responds this way? Can you give an example?

- 0** Clearly does not engage in a pattern of fearful, inhibited, and hypervigilant behavior in response to any particular caregiver.
- 1** Sometimes or somewhat engages in a pattern of fearful, inhibited, and hypervigilant behavior with any particular caregiver.
- 2** Definitely engages in a pattern of fearful, inhibited, and hypervigilant behavior with any particular caregiver.

15) Some children watch and monitor their parents (caregivers) moods very carefully. Does s/he seem to know when you or other caregivers are sad or mad or upset? What will s/he do? Could you give me a specific example? Does s/he ever seem worried about you (or other caregivers) or worried for you (or other caregivers)? Could you give me an example? Does s/he seem almost preoccupied by how you (or other caregivers) are doing? Why do you think s/he does this? Do you ever think that it may be a bit too much for a child his/her age?

- 0** Clearly does not engage in a pattern of controlling or role inappropriate behavior suggesting excessive preoccupation with caregiver's emotional well-being.
- 1** Sometimes or somewhat engages in a pattern of controlling or role inappropriate behavior suggesting excessive preoccupation with caregiver's emotional well-being.
- 2** Definitely engages in a pattern of controlling or role inappropriate behavior suggesting excessive preoccupation with caregiver's emotional well-being.

16) *Do any of the behaviors we just discussed about {the child's} reactions or responses to specific adults affect the young child's functioning in one or more of the following ways?*

- a. Cause distress to the infant/young child (please give an example)
- b. Interfere with the child's relationships (please give an example)
- c. Limit the child's participation in developmentally expected activities or routines (please give an example)
- d. Limit the family's participation in everyday activities or routines (please give an example)
- e. Limit the child's ability to learn and develop new skills, or interfere with developmental progress (please give an example).

Part 4

Just one more question.

17) *Does the child make any unusual movements, like repetitive hand, facial or other gestures that seem not to serve any purpose? Sort of like habits? These might involve hand waving or flapping, head banging or head nodding, twirling fingers. Sometimes these movements may be*

- 0 Unusual movements are never or rarely present.
- 1 Unusual movements are sometimes present.
- 2 Unusual movements are often present.