

The Preschool Assessment of Attachment

The PAA assesses a child's self-protective strategy in a specific attachment relationship, indicating (1) whether the child identifies the parent as a source of danger or protection or both and (2) what strategy he or she uses for self-protection. Based on published studies (see below), the PAA is currently the best assessment of attachment in 2-5 year old children with evidence that it differentiates maltreated and emotionally troubled children as well as children of troubled mothers from more normally developing children.

The DMM is particularly sensitive to nuances of attachment behavior in high risk contexts. Consequently, as the risk increases, there is a corresponding decrease in the number of children classified as securely attached. This reduces the proportion of 'false secures' found with other methods of assessing attachment.

The PAA uses the modified Strange Situation Procedure that accommodates children's ability to walk, talk, and open doors. In the PAA, the parent/caretaker and the child are in an unfamiliar setting suited for videotaping. The dyad is taken through eight 3-minute episodes which gradually increase the amount of stress, thus eliciting the child's attachment strategy, culminating in a 3-minute period when the child is left entirely alone. The behavior of the child in threatening moments (separations from the attachment figure) and in moments when support is available (the primary attachment figure or a surrogate attachment figure) reveals the child's self-protective strategy.

Like all assessments of attachment, the PAA must be classified 'blindly', but interpreted clinically in the light of the history and assessments of the attachment figure. Securely attached children both manage their own feelings well and also call for and/or welcome the parent back upon reunion. Anxiously attached children either (1) ignore the parents' departure and return or (2) make excessive demands upon the parent during departure and reunion. Children at risk can also show (3) extreme forms of the patterns, (4) combinations of the two patterns or (5) appear depressed and helpless in the face of danger. Children who have experienced out-of-home placement often show especially cautious strategies as though afraid seek closeness or display desire for comfort.

The results of the PAA are specific to the attachment figure in the procedure and children often have different strategies with different parents. The significant advantage of the PAA is that it is most robust assessment of attachment at 2-5 years, but because it requires a laboratory setting with three people (the stranger, the camera person and a manager), it cannot be used for screening (as can the CARE-Index). The primary limitation of the PAA is that it gives little understanding of the adult's behavior.

A PAA yields the following types of information:

1. The child's attachment strategy with this particular adult.
2. The possibility of an overriding distortion of the strategy or an indication that the strategy is not functioning effectively for the child such as unresolved trauma, loss or depression in the child.

A PAA cannot determine whether a child is attached, nor how 'strong' the attachment is.

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