SPECIAL SECTION: Clinical Applications of the Adult Attachment Projective

The Adult Attachment Projective Picture System: Integrating Attachment Into Clinical Assessment

CAROL GEORGE1 AND MALCOLM WEST2

1Department of Psychology, Mills College
2Department of Psychiatry (Retired), University of Calgary, Canada

This article summarizes the development and validation of the Adult Attachment Projective System (AAP), a measure we developed from the Bowlby–Ainsworth developmental tradition to assess adult attachment status. The AAP has demonstrated excellent concurrent validity with the Adult Attachment Interview (George, Kaplan, & Main, 1984/1985/1996; Main & Goldwyn, 1985–1994; Main, Goldwyn, & Hesse, 2003), interjudge reliability, and test–retest reliability, with no effects of verbal intelligence or social desirability. The AAP coding and classification system and application in clinical and community samples are summarized. Finally, we introduce the 3 other articles that are part of this Special Section and discuss the use of the AAP in therapeutic assessment and treatment.

Attachment theory has been most characteristically the domain of developmental psychologists concerned mainly with the study of generalized normative development. Increasingly, this frame of reference is a source of considerable influence in adult clinical research and psychotherapy. Its rise in influence in clinical psychology is consonant with Bowlby’s original goal for attachment theory as a foundational construct for understanding personality functioning and psychopathology across the life span (Ainsworth, 1989; Bowlby, 1969/1982, 1988), an application that has been substantiated by 40 years of normative and clinical research (Cassidy & Shaver, 2008). Attachment theory is consonant with all assessment and treatment approaches that evaluate childhood experiences as an important contributor to adult functioning (e.g., Bakermans-Kranenburg, van IJzendoorn, & Juffer, 2005; Blatt & Levy, 2003; Buchheim & George, 2011; Buchheim, George, & Kächele, 2008; Diamond, 2004; Wallis & Steele, 2001; Zegers, Schuengel, van IJzendoorn, & Janssens, 2008).

The rapidly increasing clinical interest in attachment makes it important that we be clear about the differences between representational measures of adult attachment and attachment style. Developmental representational measures of adult attachment assess attachment status, that is, patterns of thinking and the effects of childhood attachment experiences. Attachment style is a personality measure that conceptualizes attachment as two personality dimensions, avoidance and anxiety or positive and negative self, essentially an attachment reinterpretation of Millon’s (1969) model of personality (e.g., Bartholomew & Horowitz, 1999). The content domain of attachment style assessments is limited to traits emerging from an empirical factor analysis approach rather than attachment theory. Indeed, the expansive discussion of the attachment theory underpinnings for attachment style was added retrospectively after the measures had been developed (Bartholomew & Horowitz, 1999; Hazan & Shaver, 1987). Following Bowlby (1969/1982) and Ainsworth (1964), developmental attachment assessments place an emphasis on activating attachment and “seeing attachment in action” (i.e., in attachment activating contexts). By contrast, the attachment style approach asks individuals to report generically on their feelings about self and attachment figures, but attachment is never observed in action. Further, recent attachment style theorists have extrapolated this model from being a model of romantic (i.e., sexual system) attachment to building a theory of general human bonding, including coworkers or others not specified by human biology as attachment figures, thus developing a model of human intimate relationships more general than the specific relationship Bowlby postulated was central to mental health (e.g., Coan, 2008). Theorists and researchers from these two perspectives agree that these models do not overlap, even though they both make claim to attachment theory (Crowell, Fraley, & Shaver, 2008; de Haas, Bakermans-Kranenburg, & van IJzendoorn, 1994; George & West, in press).

The Adult Attachment Projective Picture System (AAP) framework we describe here represents the developmental attachment tradition. The two main strengths of this approach are the evaluation of unconscious defensive processes and assessment of attachment disorganization and trauma (George & West, in press; Solomon & George, 2011a).

At present, the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1984/1985/1996; Main & Goldwyn, 1985–1994; Main, Goldwyn, & Hesse, 2003) is the predominant method used to assess mental representation of attachment in adults. The AAI is a semistructured interview during which the individual is asked to describe past and present relationships with parents and attachment-relevant events during...
childhood. The content of the interview is not just taken at face value, but rather subjected to a complex semantic analysis requiring several steps. Each interview is scored on several 9-point scales; five on the actual experiences with parents and nine on aspects of the adult’s “current state of mind with respect to attachment.” From these scales, each interview is judged for the overlying unresolved pattern and for one of three primary attachment patterns: secure/autonomous, dismissing/avoidant, and preoccupied/enmeshed.

The AAI is a well-established measure with considerable strengths. Its focuses on the assessment of the representational model and assumes developmental continuity of the attachment system. It is methodologically precise in the evaluation of coherency and therefore has respectable interrater reliability. Finally, its validation rests on more than 25 years of developmental and clinical research (Bakermans-Kranenburg & van IJzendoorn, 2009).

Despite the strengths of the AAI, it has substantial drawbacks. From a practical standpoint, the interview takes 1 to 2 hours to administer and its verbatim transcription and lengthy coding and classification process is time consuming, cumbersome, and costly for the result that is actually used in most applications; that is, the identification of individuals as secure or insecure or the assignment of them to one of four attachment groups. From a clinical standpoint, the AAI’s ability to assess attachment trauma is limited. The only validated assessments are for loss through death and physical abuse. The AAI rating scales and classification groups assumed to be associated with trauma were developed because of problems applying the AAI system to individuals in risk populations. These new “trauma-related” classification groups have not been subject to validity testing (George & West, in press; Hesse, 2008). Further, the administration instructions for the AAI require interviewers, rightfully, not to pursue material that individuals do not wish to discuss. We and others have found that some trauma experiences are “edited out of the AAI transcript,” so to speak, by the interviewee failing to discuss certain experiences or to truncate the discussion (George & West, in press). Finally, designating state of mind using AAI fails to provide important information about attachment defensive processes.

The AAP circumvents these practical and clinical problems. As described below, the AAP provides clinicians with a construct valid measure of adult attachment status based on the four-group classification model used by developmental researchers that, as noted earlier, is trauma sensitive (e.g., Buchheim & George, 2011; George & West, in press). From a practical standpoint, the advantages of the AAP are considerable. Administration time for the AAP is relatively short and coding by trained and reliable judges is expedited for the AAP.

This purpose of this article is to provide the essential background for readers to understand the development and use of the AAP, including a summary of the AAP classification coding system. This discussion also serves as the foundation and introduction for the three other articles that form this issue’s Special Section, “Clinical Applications of the Adult Attachment Projective.” These articles present for the first time in the clinical literature the application of the AAP to clinical cases and multimethod psychotherapeutic assessment.

THE ADULT ATTACHMENT PROJECTIVE PICTURE SYSTEM

It could be argued that a selection of Thematic Apperception Test (TAT; Murray, 1943) cards might have been used to elicit attachment-related material instead of “starting from scratch” by creating a new set of picture stimuli. This way of proceeding, however, would not have been theory-driven. Although the TAT stories are likely interesting with respect to attachment, these pictures were not derived a priori from theoretical considerations. That is, the TAT scenes were not generated by attachment theory. Separation and loss are the conceptual foundations of attachment theory. Bowlby proposed that fear of separation, loss of attachment figures, and being left alone without protection are central to human evolution (Bowlby, 1969/1982, 1973, 1980).

We were influenced by Klagsbrun and Bowlby (1976), who first applied attachment thinking about separation and loss to develop a projective test that assessed children’s representational responses to these phenomena. This approach has more recently been used to develop child assessments more consonant with contemporary attachment theory than the original Klagsbrun–Bowlby assessment (Bretherton, Ridgeway, & Cassidy, 1990; Solomon, George, & De Jong, 1995). We decided, therefore, to follow this construct-oriented approach and develop an attachment theory-based set of picture stimuli that portray important features within the definition of attachment. By using stimuli that represent the potential threat of separation, loss, and aloneness, the AAP could then be validated and used as a developmental measure of attachment in conjunction with other validated attachment assessments (Ainsworth, Blehar, Waters, & Wall, 1978; Cassidy & Marvin, 1987–1992; Main & Cassidy, 1988; Solomon et al., 1995).

The AAP picture selection process was based on three core attachment features (Bowlby, 1969/1982). The first, and perhaps most important feature, is that attachment can only be assessed when the attachment system has been activated. Therefore, in developing the picture set, theory-defined scenes that elicit attachment distress depicting the most prominent attachment activators in the Bowlby–Ainsworth approach, such as separation, solitude, fear, and death, were included. The second feature is variations in the perceived accessibility of attachment figures; some stimuli portray individuals alone and others portray individuals in attachment dyads. Perceived availability of an attachment figure is a defining feature that differentiates secure versus insecure patterns of attachment. Attachment figure availability, combined with responsive and effective care, is central to internal working models of attachment security (Ainsworth et al., 1978; Bakermans-Kranenburg & van IJzendoorn, 1997; Bakermans-Kranenburg, van IJzendoorn, & Juffer, 2003; Sroufe, Egeland, Carlson, & Collins, 2005). Attachment is at risk of becoming disorganized when children feel abandoned and appraise attachment figures as absolutely unavailable to provide protection and care (George & Solomon, 2008; Solomon & George, 2011a, 2011b). Infants and young children require attachment figures to be physically present, accessible, and responsive. By contrast, adolescents and adults predominantly use “psychological” or representational proximity instead of physical access to the attachment figure (Allen, 2008; Weiss, 1982; West & Sheldon-Keller, 1994). The third feature is the portrayal of attachment across the life span. Bowlby proposed that attachment is important across the life span, from infancy through

The task begins with a warm-up stimulus. This is a picture of two children playing ball, which is neutral with regard to attachment. The task then presents the individual with seven attachment stimuli: child at window (window)—a child looks out a window; departure—an adult man and woman stand facing each other with suitcases positioned nearby; bench—a youth sits alone on a bench; bed—a child and woman sit opposite each other on the child’s bed; ambulance—a woman and a child watch ambulance workers load a covered stretcher into an ambulance; cemetery—a man stands by a gravesite headstone; and child in corner (corner)—a child stands askance in a corner. The stimuli were drawn to contain only sufficient detail to identify attachment contexts; actions, facial expressions, postures, and background elements are ambiguous. The characters are diverse with regard to ethnicity, gender, and age. Examples are provided in Figures 1 and 2 (see George & West, in press, for the complete AAP picture stimuli set and description of stimulus development).

AAP administration takes approximately 30 minutes and is done in a private setting. The administration instructions integrate traditional elements of free response tasks with semistructured interview techniques. The individual is given the drawing to hold and asked to describe what is going on in the picture, including the background of events, characters’ thoughts or feelings, and the outcome. The responses are audiotaped for transcription and verbatim analysis; transcripts are typically two to three pages. Administrators must be trained in administration technique but do not need to be attachment experts or trained in the AAP coding and classification scheme. Coding and classification by a trained reliable judge typically takes about 1 hour.

The AAP coding and classification scheme, which is summarized in the following section, identifies the theoretically defined core attachment constructs integrated into AAP coding that were developed following the Ainsworth–Bowlby tradition. We also integrated into the AAP coding scheme salient features of other validated child and adult attachment assessments that contribute to differentiating patterns of attachment, especially parent–child interaction on reunion (Strange Situations; Ainsworth et al., 1978; Main & Cassidy, 1988; Marvin

![Figure 1](image1.png)

**Figure 1.—Adult Attachment Projective System stimulus: Bench. © George & West (in press).**

![Figure 2](image2.png)

**Figure 2.—Adult Attachment Projective System stimulus: Departure. © George & West (in press).**

& Britner, 2008) and defensive processes in child attachment-based doll play and parent’s caregiving assessments (George & Solomon, 1989, 2008; Solomon et al., 1995).

The AAP was validated in a large, racially diverse community sample that was recruited from September 2002 to August 2003 from community and college settings using newspaper and Internet advertisement. An overview of the psychometric study results are provided here. The details of this research and findings are published in George and West (in press). The results of independent studies bearing on AAP validity are also published in other journals. The main validity study included 144 participants that made up a racially diverse, educated ($M = 14.7$ years of schooling), community sample of women and men living in Canada and the United States. Participants ranged in age from 18 to 72 years old (100 women, $M$ age = 36.2; 44 men, $M$ age = 26.4). The AAP classification distribution was as follows: 25 (17%) were secure (F); 37 (26%) were classified as dismissing; 30 (21%) were preoccupied; and 52 of the 144 participants (36%) were unresolved. Age, gender, nationality, and years of education were not related to attachment group classification.

We validated the AAP following a design analogous to that used originally to validate the AAI, the international gold standard of adult attachment (Bakermans-Kranenburg & van IJzendoorn, 1993). We evaluated AAP concurrent validity

---

1Preliminary validation of the AAP, which included a portion of this sample combined with two development samples, was reported in George and West (2001).

2AAI concordance and interjudge reliability has also been established in several studies using the AAP in the German language. Reliable blind judges classified AAPs and AAIs from German transcripts and AAPs from English transcripts (see Buchheim & George, 2011). Psychometric validity data from studies independent of collaborative work with the AAP codevelopers is available in other publications (e.g., Alkins, Howes, & Hamilton, 2009; Béliveau & Moss, 2005; Benoit, Bouthillier, Moss, Rousseau, & Brunet, 2010; Van Ecke, 2006).
against the AAI, and also evaluated interjudge reliability and test–retest validity. Concurrent validity was established by comparing AAP classifications with independent blind AAI classifications. The concordance rates for four-group classification (secure, dismissing, preoccupied, unresolved) and secure–insecure groups were strong—90% and 97% classification matches respectively (all kappas and phis, p < .001; Pearson’s r = .84 and .88, respectively). Interjudge reliability was established comparing the classifications of three expert AAP judges who were blind to all information about participants, such as AAI classifications, age, and gender. All transcripts were scored by at least two judges. The concordance rates across all AAP classifications were well above accepted rates for interjudge reliability for four-group and secure–insecure classification agreement (all kappas and phis, p < .001 level; Pearson’s r = .70–.89).

Test–retest reliability was established on a random sample of participants. Our study design was to randomly contact 50% of the sample to return for testing 3 months following the original assessment. Forty eight percent of the sample participated (n = 69; 39 women, 30 men). The main reasons for withdrawal from the retest portion of the study were that a participant had moved away or did not have time to come into the laboratory.

Stability from the first testing was significant (kappa and phi, p < .001; Pearson’s r = .70, p < .001); 84% of the retest sample was classified in the same main categories.

Following the Bakermans-Kranenburg and van IJzendoorn (1993) AAI validity study, we also evaluated verbal intelligence and social desirability as related to AAP responses. Verbal intelligence and social desirability had been shown not to influence AAI responses (Bakermans-Kranenburg & van IJzendoorn, 1993), so we similarly expected that these dimensions would not influence the AAP responses. We first resolved all AAP classification disagreements through conferencing prior to evaluating these dimensions. The results showed no influence of verbal intelligence (WAIS–R) or social desirability (Balanced Inventory of Desirable Responding [BIDR]; Paulhaus, 1998) on the AAP classifications (George & West, in press). There were no statistically significant differences among attachment groups on WAIS scores on the Verbal (means ranged from 12.40–13.45) and Similarities subtests (means ranged from 11.50–13.43). There were no statistically significant differences among attachment groups on BIDR scores for impression management (IM; means ranged from 6.95–8.73), self-defense enhancement (SDE; means ranged from 2.06–3.31), or the BIDR total (means ranged from 9.19–12.40).

The AAP Coding and Classification System

Attachment, as originally defined by Ainsworth’s assessment, involves evaluating patterns of responsiveness (Ainsworth et al., 1978). Developmental attachment status, in contrast to personality attachment style (Crowell et al., 2008), cannot be assessed using a single or paired set of orthogonal dimensions. Attachment classification using the AAP is determined by evaluating patterns of responses using a set of coding dimensions that evaluate the attachment story content related to the hypothetical characters portrayed in the stimuli, defense, and self–other boundaries in narrative discourse (George & West, 2001, in press; George, West, & Pettem, 1999).

Story content. These dimensions evaluate the attachment meanings and features of self and relationships that are revealed in the response regarding the hypothetical character(s) and story (see Table 1). Agency of self and connectedness are coded for alone stories; synchrony is coded for dyadic stories.

The agency of self dimension describes the character’s ability to take steps to address the situation that confronts him or her in each picture. The development of this self-characteristic is influenced by an individual’s experiences in childhood with attachment figures (Sroufe et al., 2005) and later in life, including possibly psychotherapy or relationship with a long-term adult partner (Sroufe et al., 2005; Waters & Hamilton, 2000). We view agency as “the capacity to engage in behavior that produces change, the use of relationships to re-establish attachment equilibrium, and/or the capacity to enter and actively explore one’s own internal working model” (West & George, 2002, p. 281). Agency of self is required for the “alone” self to preserve integrity under stress (e.g., problem solving, separation, relationship repair following an argument) and also contributes to maintaining organized thought and behavior when the individual is flooded by feelings of desperation, helplessness, isolation, fear, or threat.

The AAP coding system identifies two levels of agency of self. One level, integrated agency, refers to the qualities of integrity of self that are associated with balance and confidence that underpin attachment security (Ainsworth, 1989; Bowlby, 1969/1982, 1980; George & Solomon, 2008; Solomon et al., 1995). A form of integrated agency is haven of safety.
evidenced in the AAP when the character receives sensitive care or reaches out to repair or reintegrate a relationship. Another form is internalized secure base, a new attachment concept that we developed for the AAP to capture the capacity for thoughtful self-exploration (George et al., 1999). We derived this concept from the secure base phenomenon, which Ainsworth defined as the ability to explore based on the confidence that the attachment figure is available and sensitive to the child's attachment needs (Ainsworth et al., 1978; Waters & Deane, 1985). Attachment representation affords the child psychological proximity to the attachment figure even in the parent's physical absence (Bowlby, 1969/1982). We define the concept of internalized secure base to refer to that state in which security and self-integrity are derived from the individual's internalized relationship to the attachment figure. It is evidenced in the AAP by themes that describe a character engaging with solitude to explore the thoughts and feelings in his or her internal world.

A second level of agency reflects the self's capacity to take constructive action in attachment situations, termed capacity to act. This action successfully removes the individual from threat, includes self-protective behavior, and can occur irrespective of the individual's willingness to think about the source of distress. It is evidenced in the AAP by descriptions of the character engaging in functional or problem-solving behavior.

The connectedness dimension evaluates the propensity of the individual to renew or make interpersonal connections in intimate relationships. In addition to attachment relationships, other biologically defined relationships thought to be important in human development include friendship and adult pair bonds. Indeed, Ainsworth and others suggest that these relationships are important sources of emotional support (Ainsworth, 1989; Allen, 2008; George & Solomon, 2008; Zeifman & Hazan, 2008). Connectedness is evidenced in the AAP when a character who is alone demonstrates the desire and capacity to seek attachment figures, friends, or adult partners. Characters are not connected when they are blocked from individuals in these relationships, or when they only seek the help or company of strangers. Relationships with others are sometimes absent in responses, suggesting representations of self as alone and lacking the capacity or desire to seek out others.

Synchrony evaluates whether or not the attachment—caregiving relationships portrayed in the dyadic stimuli are viewed as a "goal-corrected partnership." Following Bowlby's (1969/1982) discussion of the goal-corrected partnership, synchrony is evidenced in dyads by descriptions of reciprocal interaction and demonstrates a commitment to the attachment—caregiving relationship (see also Marvin & Britner, 2008). The most integrated form of synchrony is descriptions of reciprocal interaction that indicate the characters' mutual enjoyment of being together or the attachment figure's sensitivity to the other character's distress and vulnerability. Functional synchrony will keep attachment distress at bay, even when complete relationship reciprocity is not desirable or possible (e.g., the adult explains the situation to the child; a teacher intervenes on the child's behalf). Functional synchrony sometimes entails the attachment figure responding to the situation but not to the individual's attachment need (e.g., mother turns on the night light but does not respond directly to the child's cue for a goodnight hug).

Defensive processes. In Loss, Bowlby (1980) discussed at length his view of defense, representation, affect regulation, and the relation between defensive processes and psychiatric symptoms. His unique approach was to consider defensive processes, a core psychoanalytic concept, from an information processing perspective. He viewed defense as a set of automatic, unconscious,4 attentional processes that select, exclude, and transform behavior, thought, and emotions to shift attention away from attachment distress and prevent psychological breakdown (see also Hesse & Main, 2006). Bowlby (1980) delineated three forms of defensive exclusion: deactivation, cognitive disconnection, and segregated systems. Although the importance of defense is acknowledged in the field of attachment (e.g., Bretherton, 2005; Bretherton & Munholland, 2008; Cassidy & Kobak, 1988), George and Solomon are the only researchers who have operationally defined and validated Bowlby's approach to make it accessible for assessment (George & Solomon, 1989, 2008; Solomon et al., 1995). Further, they have shown that identifying an individual's primary defensive strategy is a key step to attachment classification; identifying patterns of defensive strategies provides important insight into differences between attachment classification groups and the unique characteristics of individuals placed in the same group. Following this work, we developed a set of defining criteria for identifying Bowlby's three forms of defensive processes in the AAP. This approach to assessing attachment is unique and the AAP is the only attachment assessment that provides descriptions of the defenses of adult attachment "in action." Evidence of defense is coded from the words and images produced in the story narrative (see Table 1).

Deactivating defensive processes are defined as attempts to shift attention away from attachment events, individuals, or feelings. Deactivation works to depress and prevent the individual from becoming conscious of attendant attachment distress. Deactivation is coded for story themes that emphasize the importance of rules, social scripts, power, achievement, authority, distance, or romance (diversion of the attachment system to the sexual system). If distress does enter consciousness and characters are described as distressed or in need of care, deactivating defenses produce evaluations of individuals as not deserving care and attachment needs as rejected or neutralized.

Cognitive disconnection processes literally disconnect the elements of attachment from their source, thus undermining consistency and the capability of holding in one's mind a unitary view of events, emotions, and the individuals associated with them. The result is confusion and representational shifts and

---

4Bowby (1980) defined the term unconscious as processes occurring out of conscious awareness drawing from theory and research defining the mid-20th-century cognitive revolution in psychology. Bowlby's goal was to describe patterns of unconscious processes that filtered or excluded certain experiences and affects that were directly related to an individual's experience with attachment figures. These processes became the attachment approach to defense. Unlike the cognitive information processing models from which he drew, however, Bowlby's view emphasized efferent (Bowlby, 1973, 1980). Bowlby's approach to the unconscious is only one of the attachment theory postulates derived from redefining psychoanalytic concepts based on empirical research in cognitive and developmental psychology and ethnology. Other examples include his reformulation of the child's internal world as a "cognitive-affective" internal working model and his reformulation of the foundation of mother–baby relationships based on Darwinian evolutionary theory and nonhuman primate research.
oscillations evidenced in the AAP by uncertainty of thought. For example, the individual is unable to make decisions about characters or events, sometimes to the point of being inextricably caught between opposing themes (e.g., it is nighttime or daytime; the girl is happy or sad). Disconnection is also associated with story elements of anger and frustration that are dealt with by withdrawal, withholding, or attempts to gloss over attachment difficulties in hopes that they will simply go away.

George and Solomon viewed deactivation and cognitive disconnection as normative forms of defense (George & Solomon, 2008; Solomon et al., 1995). What is meant by “normative” is that these processes successfully divert attention from or splinter attachment events, memories, and feelings sufficiently to keep attachment organized. These forms are the primary defensive strategies associated with organized attachment classifications (i.e., secure, dismissing, or preoccupied). Normative defenses help prevent individuals from becoming flooded and immobilized by levels of fear or threat that disorganize attachment (Lyons-Ruth & Jacobvitz, 2008; Main & Hesse, 1990; Main & Solomon, 1990; Solomon & George, 2011a; Solomon et al., 1995).

Disorganized attachment is associated with Bowlby’s (1980) third form of defense, segregated systems (George & Solomon, 2008; George et al., 1999; Solomon et al., 1995). The segregated system is defined as an intensified defensive process that locks away the painful “package” of memories and affects associated with a particular threatening attachment relationship from conscious awareness (in information processing terms, working memory). Analogous to the psychoanalytic concept of repression, viewing defense from an information processing perspective provides a new level of mechanism clarity. Segregated systems are thought to provide a greater protective shield than the normative exclusion processes of deactivation and cognitive disconnection. Bowlby proposed that activation of these segregated models resulted in such an intensity of emotion that thought and behavior become disorganized and chaotic. When segregated system defense that has been heavily relied on begins to fail, we can anticipate the breakthrough of traumatic or frightening material described later.

Bowlby’s approach in defining segregated systems helps us understand more clearly the juxtaposition of signs and symptoms of rigid control, frozen constriction, frightened hypervigilance, oversensitivity, and dysregulation, and the psychiatric symptoms of individuals who are classified in the child disorganized/controlling and adult unresolved attachment groups, especially when their experiences encompass severe abuse or terror (e.g., Carlson, 1998; Hesse & Main, 2006; Liotti, 2004; Solomon & George, 2011a).

The first step in coding segregated systems in the AAP is to mark the transcript for evidence of segregated systems. The next step is to evaluate whether or not the segregated material is reorganized or contained in the individual’s story response. In the instance of failure of segregated system defense and the failure to contain the breakthrough, the individual is designated as unresolved, the AAP group that is analogous to the AAI unresolved attachment group (Hesse, 2008). Evidence of segregated systems in the AAP includes any feature of the individual’s response that connotes helplessness, fear, being out of control, being isolated, being unprotected, or being abandoned. Some indexes of segregated systems have an eerie quality, a feature that parallels the attachment research links to dissociative symptoms. Other indexes include individuals describing their own traumatic stories, a discourse dimension that is similar to the lapses in monitoring associated with AAI lack of resolution (Hesse, 2008). Sometimes individuals freeze while taking the task, handing the stimulus picture back to the administrator or saying in no uncertain terms that they can’t provide a response to that stimulus. This response, termed constriction, was first identified in children’s doll play and is indicative of dysregulated attachment (Solomon et al., 1995). The responses are next evaluated with regard to whether or not the individual is able to contain or reorganize representational dysregulation, called “resolution” following the nomenclature in the field. This reorganization occurs when there is evidence of agency of self or functional assistance from others. The failure to reorganize or contain segregated systems indicates that attachment remains dysregulated and the classification is designated unresolved.

**Discourse: Self–other boundaries.** The responses are also evaluated for the individual’s ability to maintain self–other boundaries while responding to the AAP stimuli. The task is defined as telling a story about hypothetical characters and events. Although we know that one’s representation of attachment is built on real experience, the AAP is not an autobiographical interview. The “invasion” of material about one’s own experience, therefore, demonstrates a failure to maintain the boundaries between self and other during the task. We call this discourse intrusion personal experience, and make a designation in coding for each story in which “personal experience” material is included in the response. This material contributes important information in determining whether or not the individual’s attachment distress is unresolved; descriptions of one’s own frightening or traumatic experiences that are not contained or reintegrated during the response are indicative of an unresolved attachment.

**Classification.** Attachment classification group is assigned on the basis of an analysis of the coding patterns across the entire set of seven attachment stories. The classification assignment is determined using the hierarchically integrated series of decision points illustrated in Figure 3. Each decision point is defined in relation to the overall patterning of coding dimensions for the alone and dyadic pictures.

**Unresolved Attachment:** The characteristic quality of unresolved attachment is the individual’s inability to contain and reorganize stories that contain segregated systems markers. What this means is that unresolved individuals are, even momentarily, flooded by their attachment fears and they cannot recover. The story content and underlying defensive processes might be similar to any of the other attachment groups.

**Secure Attachment:** What characterizes individuals who are secure in the AAP is their ability and willingness to think about attachment distress or reach out to attachment figures for assistance and comfort. In response to the alone stimuli, secure individuals demonstrate the ability to think (i.e., internalized secure base) when they are alone, which then results in the characters taking constructive action (e.g., the girl on the bench thinks about why she was fighting with her parents and goes home to talk to them). Secure individuals also demonstrate a view that attachment relationships involve a goal-corrected partnership in
response to the dyadic stimuli. This can be described as sensitivity to distress that results in comfort or mutual enjoyment. Secure transcripts are not "perfect." Integration and mutuality are rarely demonstrated in every story. Rather, the judge sees from the pattern of story responses that the person genuinely values and represents the capacity for integration of self and relationships above all other qualities of the response. What is also visible is that secure individuals use defensive processes to help integrate attachment feelings and events, not to exclude and transform them into something else. Secure individuals rarely show blurring of personal experience and hypothetical story boundaries in their responses. This seems only to occur when secure individuals are highly distressed.

**Dismissing Attachment:** Dismissing attachment is defined by the predominance of deactivating defensive processes that maintain distance in relationships. Stories often shift attention away from distress to a focus only on achievement and exploration. When distress is evident, dismissing individuals tend to describe feelings of negative evaluation, such as being punished, and rejection that keep characters at a distance. The stories of some dismissing individuals suggest that they are quite savvy about how to describe what looks on the surface as thinking, but the focus is typically superficial or focused on the self and not on the attachment relationship. Other dismissing individuals simply solve problems by action (agency = capacity to act) and not necessarily thinking about them (i.e., no internalized secure base). Attachment figures are portrayed either as providing functional care (e.g., goes to school to talk to the boy’s teacher instead of comforting the boy) or as authoritarian (e.g., tells the child the rules to be followed). As such, connectedness and synchrony codes typically reflect functional interactions as well. Blurring personal experience with the hypothetical story is unusual, demonstrating how in most dismissing individuals deactivation keeps strict self–other boundaries in relationships.

**Preoccupied Attachment:** Preoccupied attachment is defined by the predominance of cognitive disconnection defensive processes that confuse and obscure attachment relationships. Preoccupied attachment typically focuses on emotions related to problems rather than the problems themselves. Stories attempt to shift attention away from distress by making the situation or outcome overly cheery (i.e., glossing) so as to prevent having to face negative affect. Preoccupied individuals are more often, though, confused about attachment events, feelings, and those involved, and their responses have several undecided themes, story endings, and sometimes many different complete stories. Preoccupied individuals are often sentimental without perspective and focus on what was rather than what is (e.g., the man at the cemetery remembers his many happy years before his wife died). Agency in the alone stories is rare—the characters might engage in minimal agency that does not get them very far (e.g., the girl on the bench gets up but this action does not take her away from the source of her problems, the bench itself). Characters in the alone responses often remain alone, not making connections with anyone. As with dismissing attachment, attachment figures might be portrayed as providing functional care (e.g., the mother in the bed cannot figure out what the boy wants, but finally gives him a hug). Attachment figures might also be portrayed as not responding at all (e.g., the boy on the bed wants a hug and his mother leaves the room, never acknowledging the child’s signal). Blurring personal experience with the hypothetical story is quite common in preoccupied responses, demonstrating how difficult it is for preoccupied individuals to maintain self–other boundaries in relationships.

**Training to Administer and Use the AAP**

Ethical use of the AAP requires training in administration and coding. Following the standard of all attachment assessments, individuals are considered reliable judges in the AAP when they have reached 80% concurrence on standard reliability sets. Training begins with an 8-day workshop that first provides a foundation in attachment theory and subsequently builds on this foundation to teach AAP coding and classification. Trainees are provided with practice cases and reliability cases as part of the training. Reliability is established as 80% on a minimum of 30 cases. Another alternative in using the AAP is to be trained in administration and have reliable judges code and classify the cases. Administration training is done by providing feedback on practice case administration. Information about reliable judges available for coding is provided as part of the administration training process.

**Other Work Using the AAP**

AAP validity and interrater reliability with English and with non-English-speaking participants have been demonstrated by independent investigators (e.g., Béliveau & Moss, 2005; Buchheim et al., 2006; Webster & Hackett, 2007; Webster & Knotek, 2007). The AAP has been used in basic research and hypothesis testing, establishing predictive validity in studying mothers’ adult attachment status in relation to caregiving and their children’s adjustment and developmental risk, mothers of children diagnosed with Attention Deficit Hyperactivity Disorder, the attachment underpinning related to immigration, and the developmental correlates of unresolved attachment in adolescent maltreatment (Aikins et al., 2009; Béliveau &

---

**Figure 3.—Adult Attachment Projective System classification rules.**

<table>
<thead>
<tr>
<th>Start</th>
<th>Unintegrated or uncontained segregated systems marker(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>Evidence of integrated attachment. Integrated agency, Connectedness Synchrony Scores (and, if present, segregated systems markers are integrated or contained)</td>
</tr>
<tr>
<td>No</td>
<td>Deactivation markers in 3 or more stories (and, if present, segregated systems markers are reintegrated or contained)</td>
</tr>
<tr>
<td>No</td>
<td>Cognitive disconnection markers (and, if present, segregated systems markers are reintegrated or contained)</td>
</tr>
<tr>
<td>Yes</td>
<td>Secure</td>
</tr>
<tr>
<td>Yes</td>
<td>Dismissing</td>
</tr>
<tr>
<td>Yes</td>
<td>Preoccupied</td>
</tr>
</tbody>
</table>
Moss; Kissgen et al., 2009; Van Ecke, 2005, 2006; Webster & Hackett, 2007; Webster, Hackett, & Joubert, 2009; Webster & Knotek, 2007). Clinical studies have used the AAP to examine posttraumatic stress disorder symptoms following trauma, depression, and emotional development in psychiatric patients, and as part of a parent evaluation battery in custody evaluation (Benoit et al., 2010; Buchheim & George, 2011; Buchheim, George, Liebl, Moser, & Benecke, 2007; Isaacs, George, & Marvin, 2009; Subic-Wrana, Beetz, Langenbach, Paulussen, & Beutel, 2007; West & George, 2002). The AAP has also been shown to be useful in studying the neurobiological and emotional expression correlates of attachment in nonclinical and clinical samples (Buchheim & Benecke, 2007; Buchheim, Erk, et al., 2008; Buchheim et al., 2006; Buchheim et al., 2009; Buchheim et al., 2007; Friedrich, Lakatos, & Spangler, 2010).

There are a number of reasons to enlist the AAP in clinical practice. First, it is economical. Second, because it is not an autobiographical interview, the AAP lends itself especially well to a range of populations in which the discussion of attachment using an interview format might be difficult or threatening (e.g., Szajneg & George, 2011). Third, the AAP is easily integrated with other assessments, including interviews that tap autobiographical experience such as the AAI. In this regard, we typically combine the AAP with the AAI and a trauma interview (Blake et al., 1996) in our work. The trauma interview increases our comprehension of real-life trauma situations and often completes such gaps in the AAI. The AAP and AAI can be administered by the same person because there is no overlap in their content or format. We examined AAP and AAI for administration order effects in our validity study and found none. As well, colleagues using the AAP in therapeutic assessment often combine it with the Early Memories Procedure (Bruhn, 1992). Fourth, the AAP is amenable to repeated administration to identify and elaborate indications of a client’s gains or setbacks in the course and outcome of therapy. Finally, the AAP can be used with clients to help sharpen the agenda of therapy and facilitate the organization of the therapeutic process (see Finn, 2011/this issue).

The three other articles that are part of this Special Section introduce the reader to the use of the AAP in specific assessment and therapy situations. Each article provides verbatim AAP responses and extensive interpretation of those responses using the AAP coding system. The collection begins with an article by Webster and Joubert (2011/this issue) on the use of the AAP as a significant aid in planning intervention for a maltreated teen in foster care. Maltreatment and foster care are attachment traumas (George & West, in press); these experiences threaten safety and the attachment bond itself. Their article shows through total AAP analysis how disruptive behavior is articulated in attachment terms. Specifically, the pattern of this adolescent’s representation of agency of self, synchrony, and connectedness, together with her defensive operations, identify and define the underpinnings of her behavior problems. This case also demonstrates how attachment information in a test battery (e.g., standardized cognitive and behavioral assessment and the Rorschach) is integrated with recommendations of other professionals (e.g., court-appointed representative, therapist, teacher).

Contrary to what might be expected for most foster and maltreatment cases, this adolescent was judged secure on the AAP as indicated by her strong capacity to think about attachment, a strength not detected by other professionals. The authors offer a clear analysis of what it means to be secure in the context of disruptive behavior or psychopathology.

In the second article, Finn (2011/this issue) describes the use of the AAP in the course of long-term psychotherapy with a middle-aged man to enhance his commitment to therapy. Finn addresses the processes associated with his client’s dismissing attachment. In particular, he describes how the deactivating defense of dismissing attachment interfered with his client’s capacity to complete the process of mourning and reorganize his sense of self in relation to childhood problems with his parents. A unique aspect of Finn’s article is his description of how the AAP was used in the feedback step that is core to the therapeutic assessment model (Finn, 2007). Working with the first author, Finn wrote his client a two-part letter. The first part described in a client-friendly way the etiology and meaning of dismissing attachment. The second part discussed the personal meaning of his client’s pattern of dismissing attachment. This letter sensitively, yet firmly, captured his client’s problems and was an important catalyst in helping him continue in therapy and make genuine changes in his life.

The final article in the collection by Lis, Mazzeschi, Di Riso, and Saluni (2011/this issue) describes the inclusion of the AAP in a multimethod assessment of a severely anorexic adolescent girl and shows how attachment assessment strengthens the incremental validity in an assessment battery (see also Isaacs et al., 2009). In particular, Lis and colleagues discuss their client’s unresolved classification and describe how the AAP combined with other assessments to delineate thinking about a range of treatment options.

These articles describe only a few of the ways in which attachment can be used in clinical settings. Attachment assessment is not a measure of the veracity of the details of a client’s actual attachment past. The AAP assesses current views of self, attachment figures, and expectations about the productiveness of attachment relationships, elucidating how current experience activates attachment accomplishment, disappointment, and trauma from the past (George & West, in press; West & Sheldon-Keller, 1994). It is this current state of mind regarding attachment that 25 years of research has demonstrated to be an important predictor for psychiatric and relationship health (Cassidy & Shaver, 2008).

ACKNOWLEDGMENTS

This study was supported by grants from the Social Science and Humanities Research Council of Canada, the Barrett Foundation, and a faculty development grant from Mills College.

REFERENCES


