

Measuring Attachment and Reflective Functioning in Early Adolescence: An Introduction to the Friends and Family Interview

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Abstract. Internal working models (IWMs; Bowlby, 1969/1982) develop before language and are, initially at least, pre-symbolic, nonverbal notions. With reflective functioning (RF; Fonagy, Steele, Steele, Moran, & Higgitt, 1991) we have the possibility to refashion IWMs based on language, but linguistic skills only develop between 18-24 months, and then steadily over time. Reliable instruments are available to assess these constructs in infancy and adulthood: The Strange Situation observational measure (Ainsworth, Blehar, Waters, & Wall, 1978) reveals the infant's IWMs of his caregivers, while the Adult Attachment Interview (AAI; Main, Hesse, & Goldwyn, 2008; George, Kaplan, & Main, 1985) exposes the adult speaker's capacity for RF. This paper addresses the middle ground of early adolescent children who are not yet mature enough to respond to a full AAI, but are too old to expect that an observational attachment measure would reveal much about their inner thoughts, feelings, and beliefs about attachment. We outline an interview protocol designed for 9 to 16-year old children, asking about self, friends, teachers, and family, with the aim of elucidating both IWMs, regarding earlier experience, and the extent of RF concerning past and present experiences. The protocol is the Friends and Family Interview (FFI; Steele & Steele, 2005), which has a multidimensional scoring system to be elaborated with verbatim examples of response from both low-risk community samples, and higher-risk samples of youth.

Keywords: attachment measures, reflective functioning, early adolescence

When measuring attachment across the lifespan, different methods are required to match the increasingly sophisticated cognitive and affective systems that emerge and mature over the course of development. In the early years of life, primacy is placed on assessing the largely pre-symbolic, pre-verbal internal working models (IWMs; Bowlby, 1969/1982) through behavioral observation. As linguistic skills come online and the child can begin to think about thinking, reflective functioning (RF; Fonagy, Steele, Steele, Moran, & Higgitt, 1991) becomes an important concept that can help to moderate or refashion the child's early-established IWMs. At present, researchers and clinicians interested in attachment phenomena have reli-

able and popular measures at their disposal for working with infants and adults: The Strange Situation observational measure (Ainsworth, Blehar, Waters, & Wall, 1978) reveals the infant's IWMs of his or her caregivers, while the Adult Attachment Interview (AAI; George, Kaplan, & Main, 1985) exposes the adult speaker's capacity for RF.

This paper addresses the middle ground of assessing early adolescent children who are not yet mature enough to respond to a full AAI, but are too old to expect that an observational measure would reveal much about their inner thoughts, feelings, and beliefs about attachment. First, we review the theoretical and empirical literature around IWMs and RF, constructs central to understanding any attachment instrument. We then provide a comprehensive overview of our measure, the Friends and Family Interview (FFI; Steele & Steele, 2005), which has a multi-dimensional scoring system to be elaborated with verbatim examples of response from both low-risk community samples, and higher-risk samples of youth.

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Internal Working Models

Beginning in infancy, observation can be used in controlled conditions—as in the Strange Situation—to assess behaviors such as the child’s exploration of the environment, proximity-seeking of caregiver, and ability to be soothed. These concrete variables are considered to be derivatives of the infant’s IWMs, the subjective representations that form in the infant according to how caregivers respond to his or her needs. The IWM serves as a template for future relationships; it determines in large part what the child expects from ambiguous interpersonal experiences. IWMs are considered to stabilize as early as 12 months of age (Main, Kaplan, & Cassidy, 1985), and though they are not wholly fixed, they are also not easily changed (Bowlby, 1973; Bretherton, 1985). Previous studies have shown that even when initially deprived children go on to develop healthier IWMs based on new relational experiences—such as in adoption cases—these representations do not eradicate the older, problematic IWMs (Hodges, Steele, Hillman, Henderson, & Neil, 2000; Steele, Hodges, Kaniuk, Hillman, & Henderson, 2003; Steele et al., 2008). Rather, the old and new coexist in the child’s mind and continue to influence his or her expectations and behavior to greater or lesser degrees (Main, 1991).

Infants and children who have “secure” IWMs are able to conceptualize caregivers as both a *secure base* and a *safe haven*: their models stem from early objective experiences of being able to confidently explore the environment in the presence of caregivers, and also from finding the caregivers to be available and sensitive when a threat is perceived (i.e., when the attachment system is activated). Secure IWMs are a significant protective factor during the challenges of normal development (De Wolff & van IJzendoorn, 1997), while infants who develop “insecure” IWMs are less protected from developmental challenges, and can experience adjustment problems (Easterbrooks & Abeles, 2000).

Children whose early lives are marked by especially unpredictable and frightening caregiver behavior develop IWMs that are fragmented, chaotic, and disorganized. These children are often the victims of maltreatment, and they are at risk for long-term pathological outcomes, including affect dysregulation, dissociation, and violence in intimate adult relationships (Carlson, 1998; Hesse & Main, 2000; van IJzendoorn, Schuengel, & Bakermans-Kranenburg, 1999; West & George, 1999).

However, solely considering IWMs as a predictor of normal or pathological development paints an incomplete picture, particularly as the child grows older. Though disorganized IWMs are a strong indicator of poor psychosocial outcome, Fonagy and colleagues point out that insecure IWMs are commonly found in community and clinical populations alike (Fonagy et al., 2003). This is why as the child develops, increasing emphasis is placed on RF in addition to IWMs when assessing attachment.

Reflective Functioning

RF is a collective term for the psychological processes that allow children to “mind-read”—that is, appreciate the existence and nature of other people’s mental states, as well as their own (Fonagy & Target, 1997). This appreciation makes behavior “*meaningful* and predictable,” (p. 679, original emphasis) and facilitates the development of more complex internal representations of self and other than are possible in infancy and early childhood. The abilities to hold ambiguous or mixed feelings about important interpersonal relationships, speculate on the motivations of self and others, and consider intrapsychic and interpersonal changes over time are all examples of the advanced modes of thinking inherent in the development of RF.

Unlike IWMs, RF does not develop and solidify early, but emerges over time according to normative developmental milestones and the particular characteristics and circumstances of the child (Fonagy & Target, 1996). Around age 3, a normal child can readily distinguish internal experience from the outside world, which facilitates an ability to shift knowingly between modes of fantasy and reality, such as in games of pretend. By age 4, a “theory of mind” typically becomes evident, wherein the child demonstrates a cognitive appreciation that his or her perspective is distinct from the perspectives of others. Behaviors of self and others begin to “make sense” as the child sees that they are dictated by mental states. At this stage, however, the child still views these states as concrete and absolute. It is not until the fifth year that the normal child comes to understand mental states as *representations*, including the important appreciation that they “may be fallible and change, because they are based on but one of a range of possible perspectives” (Fonagy & Target, 1996, p. 221). This marks the beginning of a more nuanced, flexible, and abstracted stance on the behavior and thoughts of self and others that continues to grow and inform over the course of normal development.

A dearth of RF in childhood—in which limited distinction is established between the objective and subjective, and the behaviors of self and others remain unpredictable—has been theorized to relate to poor social-emotional outcomes, including borderline pathology (Fonagy, 1995; Fonagy et al., 2003). Alternatively, RF has been proposed as a protective factor against developmental problems and psychopathology in children from abusive or deprived backgrounds, who would be expected to have developed insecure or disorganized IWMs in the first year of life (Fonagy et al., 1994, 1995; Fonagy & Target, 1998; Main, 1991). For this reason in particular it is important to have methods of measuring both IWMs and RF within the developing child.

The Friends and Family Interview

The FFI was first developed and tested by Miriam and Howard Steele in the context of the 11-year follow-up of the London Parent-Child Project (Steele &

Steele, 2005). That work showed that reliable ratings of coherence (a construct detailed below) in 11-year-olds' narratives about themselves, their siblings, parents, best friend, and favorite teacher were linked backward in time to their attachment status as infants with mother and father, and to parents' AAI responses. These links held even after taking into account verbal IQ of children and their parents.

The FFI is deemed appropriate for children aged 9-16 years, a historically difficult age range in which to reliably measure attachment (Ainsworth, 1985). Though the AAI—typically considered the “gold standard” narrative attachment interview for adults—has been validated with adolescent samples in the past (e.g., Allen, McElhaney, Kuperminc, & Jodl, 2004), it has also produced inconsistent results (Kiang & Furman, 2007). Given the AAI's emphasis on “looking back” at the respondent's first 12 years of life, it leaves something to be desired when assessing attachment in early adolescence. The FFI is theoretically guided by the AAI, but scaled to the developmental abilities of its intended age group. The FFI also features explicit questions on sibling, peer, and teacher relationships, which are incredibly salient to the young adolescent, but understandably absent from the AAI protocol.

Overview

The FFI begins with the interviewer stating that our strongest feelings and wishes tend to arise in the context of our closest relationships. For example, there are things about our relationships (to parents or siblings, best friends, and perhaps teachers) that we want to stay the same, and things we would like to see change. Following this introduction, the FFI proceeds with some basic information gathering. The child is asked to describe with whom he lives, and whether there are other family or friends that live elsewhere with whom he is especially close. The interviewer then inquires over the child's favorite hobbies, and attempts to elicit specific examples concerning these activities. This phase is intended to help establish a rapport between the interviewer and the child, as well as acculturate the child to the format of the interview, which frequently demands general statements to be elaborated with relevant examples. As such, the first few minutes of the interview contribute relatively little to the coding process.

The substantive portion of the FFI begins when the child is asked to reflect on himself, first by considering what he likes best and least about himself (accompanied by specific examples), and then by answering the important question, “What do you do when you are upset?” This question is borrowed directly from the AAI, and the child's response is highly revealing as to whether or not he feels there is a safe haven and secure base in his life. The FFI then proceeds to inquire about the child's important relationships in turn. Most and least favorite qualities in his relationship with teachers, friends, parents, and

siblings are elicited, and discussion of each relationship concludes with the question, “What do you think X thinks about you?”. In this way, respondents are prompted to show the extent to which they can reflect on relationships ongoing among family and friends.

The child is next asked to think back to his earliest memory of separation from caregivers, first in terms of his own behavior, thoughts, and feelings, and then in terms of how he imagines his caregivers might have felt at the time. Inquiry then shifts toward the child's impressions of how his caregivers relate to one another, including questions about whether they argue, what about, and how the child perceives and reacts to such moments of conflict.

Lastly, the child is asked to think into the past and future in considering himself and his relationship with his caregivers. He is asked how things have changed in the last five years, and how he believes things might change in the following five years. The FFI concludes with a few debriefing questions, intended to clarify how the child experienced the interview itself, as well as to offer some “cool down” time in the event of a challenging or stressful interview.

Collected interviews are recorded, transcribed, and then independently rated according to a standardized coding manual (Steele, Steele, & Kriss, 2009). Like in the AAI, FFI raters assign broad attachment classifications to an entire interview—namely, *secure* or *insecure* (with subtypes *dismissive*, *preoccupied*, or *other*), with an additional specifier if a child appears *disorganized/disoriented* in his or her narrative. The coding process also yields dimensional scores across numerous domains. In the present paper, we focus on three important constructs, describing in detail how coherence of narrative, IWMs, and RF are coded in the FFI.

Coherence in the FFI

A central concept in narrative assessments of attachment, particularly the FFI and AAI, is *coherence*. Primacy is placed on the process of language; as Oppenheim and Waters (1995) point out, *what* is said is usually less informative than *how* the content is communicated when seeking to reveal largely unconscious attachment representations. This is particularly salient when considering the variability in how activation of the attachment system manifests depending on the level at which IWMs are abstracted (Main et al., 1985). As individuals move from behavioral to representational levels of abstraction, there is a complex shift in their strategies for coping with the pressures of internal and external realities. Developmentally, early adolescents are between infant and adult levels of abstraction, and may offer mixed presentations of behavioral and somatic versus cognitive and affective expressions of how they have internalized their IWMs. For instance, a child being administered the FFI describes how she frequently fights with her sister, but these supposedly heated bouts are referred to with a cool detachment. How do we understand

such an incongruity? Should we prize the description of aggression and inability to be consoled (behavior associated with an insecure-preoccupied stance in infants), or the palpable sense of distance between the speaker and her experience (indicative of an insecure-dismissive position in adults)?

In making inferences regarding the child's internal representations, *content of speech is interpreted in the context of the here-and-now process of the interview*. Coherence of speech (as well as nonverbal behaviors) informs our understanding of what the child describes. Therefore, in the above example, we would be inclined to consider the child's fighting as a context-specific manifestation of her overall dismissive orientation, rather than evidence of preoccupation.

Coherence in the FFI is rated according to Grice's (1975) maxims: *truth*, the degree to which convincing evidence is provided to support the appraisal of self and others; *economy*, the degree to which the "right amount" of information is given, neither too much nor too little; *relation*, the degree to which given examples are relevant; and *manner*, the degree to which an age-appropriate level of attention, politeness, and interest is maintained. Interruptions in the flow speech, unelaborated examples, unmonitored rants, excessive use of filler words, guardedness, dissociation, and so on, are all considered in assigning Likert-type numerical scores to these dimensions.

Coherence is a global construct and may be considered to reflect the individual's overall organization across levels of representation. In other words, an especially coherent or incoherent narrative does not stand in for "secure" or "insecure" IWMs, or high or low RF, but rather suggests a certain constellation of these and other factors. The more specific scales elaborated below, when taken in consideration with the global coherence ratings, provide a detailed picture of the child's psychic reality.

Internal Working Models in the FFI

IWMs are coded according to the child's narrative portrayal of caregivers as a *safe haven* and *secure base*, as well as the child's elaboration of his or her *adaptive response* to distress.

Safe haven/secure base. A core attachment assumption is that the child's mental health continues to depend, as it did during infancy, on the sense that a secure base (from which autonomy can be explored) and a safe haven (to return to in times of distress) are available from mother, father, or others. Raters pay special attention to the questions that probe what the young person does when he or she is upset, as well as those asking for most and least favorite aspects of each parent. Does the child express the importance of the attachment relationship, the need to rely on others, and does he or she acknowledge past and/or present dependence on parents?

At the lowest end of the spectrum, no evidence is

given to suggest that the respondent seeks out or expects instrumental or emotional support from the caregiver, who may be minimally referred to in the narrative. For instance, one child from a community sample, when asked about his relationship with his father, responded "I don't see him much" and did not want to elaborate further. Another respondent from a higher-risk group of inner-city youth, when asked about his mother with whom he was recently estranged, simply said, "Pass."

Above this level but still on the lower end, the caregiver is portrayed as an occasional or unreliable source of support. Support given is largely instrumental, and examples of emotional support may seem idealized, untruthful, or seem to otherwise leave the respondent dissatisfied.

Interviewer: Do you remember a time when you felt like you could ask your mother about anything?

Respondent: It's just when I'm upset, really, and uh [...] she just tries the best she can and then, who knows, we see what happens.

Alternatively, an explicit longing or desire for a closer relationship may be expressed. Such a response may be couched in angry, preoccupied feelings of being unloved or uncared for, or in dismissive, guarded feelings of not needing parental care, as emphasized below.

Respondent: Sometimes when I want to talk to my mom about things I can't, *but it doesn't bother me* [...] it's just that I wonder if it would be different if I could do that with my mother.

On the higher end of this dimension, the caregiver is portrayed as a positive resource, one who readily bestows affection and is available to provide instrumental and emotional support. Examples given should support the respondent's appraisal with little to no sense of idealization or untruthfulness. In the later years of adolescence, convincing *knowledge* of such availability, without necessarily utilizing it, is sufficient.

Respondent: These days I don't really have much in common with my mom, she's not a big football fan (*laughs*). But if something was really wrong at school or even between me and my friends or something, I know I could talk to her. She'd hear me out and be on my side.

Adaptive response. When working with adolescents—who are beginning to grapple with the important developmental challenges of independence and autonomy—it is incorrect to equate IWMs with the degree to which the child overtly expresses "needing" his or her caregivers. How the respondent reacts to distress in general is an important factor to consider alongside how he or she specifically talks about caregivers when attempting to assess internal representations. Certain strategies that do not in-

volve interpersonal dependence—such as engaging in a favorite activity for relieving unhappiness—may be age-appropriate and highly adaptive, and therefore indicative of how the child's IWMs have, over the course of development, helped to shape his or her ability to regulate painful and upset feelings. On this scale, raters look most carefully at responses to the question asking what the respondent does when distressed.

Lowest scores are given when there is a marked lack of strategy, such as “fight or flight” approaches. These are exemplified respectively in the following two responses to the question, “What do you do when you're upset?”

Respondent: If I had gotten in a fight with someone I would fight them and just keep fighting until someone loses or someone goes home.

Respondent: I would push my head against a pillow and not react in any way at all.

Responses can be either highly aggressive or highly avoidant to be given lowest scores; the central feature is the respondent's inability to effectively adapt to and recover from feeling upset. Low marks may also result when respondents refuse to provide a strategy, either because they claim they don't know what they do or because they claim that they never feel upset. In the latter case, the child's response would also indicate poor truthfulness.

High scores are given when the respondent displays a clear adaptive strategy, which appears consistent (i.e., high in truth) and is accompanied by a relevant example (i.e., high in relation).

Interviewer: When you're upset, what do you do usually?

Respondent: Oh, I don't really know. If I can, I go out for a walk and if I'm at school, I will just go and sit somewhere quiet, and just be satisfied listening to music, if I'm mad or upset, up or down.

Interviewer: And can you tell me about a time when you were upset?

Respondent: I had a whole day when my brother was going back to England, and I wanted to go back, as well. There really wasn't enough time, but I wanted to go back with him and thought it was really unfair.

Interviewer: And what did you do then? What happened?

Respondent: I just went inside my bedroom and threw a few pillows or something. I stayed in there awhile till I calmed down. I realized it wasn't so bad, I would go back soon enough.

In the above example, the pseudo-aggressive component of her example (“threw a few pillows”) is still considered adaptive, as she presents it in a context that demonstrates her secure IWMs. By telling the interviewer that she “realized it wasn't so bad”, she is showing her internal representation of the world as coherent and self-righting, and that she (unconsciously) uses that representation to calm down and organ-

ize her experience. Also important to note is that the child's initial ambiguity (“Oh, I don't know”) is not counted against her in rating adaptive response. Here and throughout the interview our interest is to give respondents the benefit of the doubt and have the final coding reflect their best capacity in all domains.

Reflective functioning in the FFI

In the FFI, RF is operationalized across three subdomains associated with high RF capacity: developmental perspective, theory of mind, and diversity of feeling. *Developmental perspective* represents the child's ability to contrast current thoughts and feelings concerning important relationships or his or her self-view with past attitudes. *Theory of mind* is the ability to assume the mental or emotional perspective of another person. *Diversity of feeling* is defined as the child's ability to show an understanding of diverse (negative and positive) feelings being present in significant relationships. As appropriate, these dimensions are scored for each relationship investigated during the interview, including caregivers, siblings, peers, teachers, and self.

Developmental perspective. To demonstrate developmental perspective, the respondent contrasts his or her current thoughts and feelings on a matter of substance (i.e., something other than tastes in food or sporting activities) with past attitudes or styles of response. This pertains particularly to a pair of questions in the interview, “How has your relationship with your parents changed since you were little?” and “What do you think the relationship with your parents will be like five years from now?”. Evidence for developmental perspective may come from other portions of the interview, as well, such as when one child from a community sample oriented his experience by reflecting on a sibling:

Respondent: I've seen that in the last year or so, my parents give my brother a lot more freedom, you know, they let him do his thing. So I expect, I don't know, it feels like they're very over-protective of me now, but I expect that once I'm his age, they'll ease back, as well.

Especially impressive are responses that acknowledge that the relationship has both changed and stayed the same in different ways over time, and will continue to do so in the future.

Interviewer: Can you think back and tell me if you think that your relationship with your parents has changed since you were little?

Respondent: Um, yes and no. The fact that they can sort of trust me now and they know that I will be able to look after myself, um, but not really, no, because we still get along really well like we did when I was younger.

Interviewer: Thinking ahead to the future, say, in five years, can you think how your relationship with

your parents might be different?

Respondent: Um, we might not see each other as much because I'll be off at sort of university or whatever, but probably still the same—get on really well and be able to tell them whatever.

RF is akin to an “as-if” mode of thinking in which multiple perspectives can be considered without being taken as concrete and objective truths. As such, when children are able to tolerate ambiguous “yes and no” states without becoming confused, distressed, or contradictory, it is usually indicative of high RF. When rating theory of mind, described below, appreciation of the opaqueness of the mental states of others is a similar indicator of the child's ability to hold several possibilities in mind at once.

Theory of mind. In coding theory of mind, raters look for evidence of the respondent's ability to assume the mental and emotional perspective of another person, paying special attention to responses to the questions, “What do you think your [mother/father/sibling/best friend/teacher] thinks of you?”, which appear periodically throughout the interview. Responses need not be lengthy or overly detailed—one clear and compelling statement about what the other person thinks and feels merits the highest score. As mentioned previously, the most sophisticated responses often show appreciation for the opacity of another's mental state. This may involve the respondent expressing what he or she “hopes” or “imagines” the other person to think and feel, or acknowledging the difficulty of the question but then going on to answer it as clearly as possible.

Respondent (re best friend): I hope she thinks I'm a good and trustworthy friend. I guess you never know, but I mean we tell each other everything, so I imagine she thinks of me that way.

When looking at a fully scored protocol, it can be clinically informative to consider consistency of theory of mind across relationships. A child with all low scores may, for one reason or another, be developmentally incapable of assuming a mentalizing stance. This is quite different from a child who gives clear responses in reference to sibling and best friend, but then cannot provide or gives an incoherent response in regard to mother. This pattern would indicate that there is not a global deficit in RF, but rather that the relationship with mother in particular inhibits reflection.

Diversity of feeling. This dimension covers evidence of the respondent's ability to show an understanding of diverse (negative and positive) feelings being present in significant relationships. The guiding question for raters is how easily the child can think of both negative and positive aspects of relationships involving self and other people. Higher scores require that the respondent not only show that he or she holds diverse feelings, but also demonstrate

an understanding of those diverse feelings.

Unsurprisingly, total refusal to acknowledge either favorite or least favorite qualities, in response to specific prompts as well as anywhere else in the narrative, yields lowest scores.

Interviewer: What's the best part of your relationship with your mom?

Respondent: The best part? I'm going to skip that one.

Low scores also result when favorite and least favorite responses display marked contradiction with one another, so that no diversity of feeling is actually present. This may also influence overall truthfulness of the narrative. For instance:

Interviewer: What's the best part of your relationship with your mom?

Respondent: She—, that *she listens to me*. I go on for ages about something and she just sits and listens to me.

The child goes on to contradict herself later in the same interview, suggesting that both her responses are anxiety-laden and driven by an idealizing defensiveness rather than genuine reflection:

Interviewer: And what's the one thing you like least about your relationship with your mom?

Respondent: I—, well she doesn't—, I don't know. She, she gets back quite late from work and she's not there in the morning, she's at work as well, so-, it's just *I don't really talk to her a lot* and when she gets home she has to do dinner and work and everything so *I don't talk with her a lot*.

Still on the low end are instances when diversity of feelings is shown but the respondent does not have a clear understanding of it. One or both statements regarding most and least favorite aspects are *instrumental* in nature, focusing on behavior over emotion. Accompanying examples are absent, or contain some contradiction or incoherence, damaging the credibility of the diversity of feeling offered.

Interviewer: What's the best part of your relationship with your dad?

Respondent: Well, usually when we're going to watch a film on Friday he gets take-out, he might get a Chinese take-away or something.

Interviewer: And what's the one thing you like least about your relationship with your dad?

Respondent: He is a very, very deep sleeper [...] It just can be irritating if you want, if there's something you've done for him and he just can't be bothered.

When positive and negative qualities are described in a thoughtful way that demonstrates not only their presence, but the respondent's understanding of his or her own complex feelings regarding self or others, highest scores are granted. Accompanying examples are concise and relevant illustrations of the diverse feelings, with no evidence of anxiety, contradiction, or incoherence.

Method of analysis

Analysis of an FFI transcript demands consideration of multiple constructs that involve both the content and process of narrative speech. Even those dimensions that are strongly influenced by what is said (e.g., does the respondent provide a “favorite” and “least favorite” quality about himself) must also be evaluated in terms of how the information is presented (e.g., presence of idealization, anxiety, or disorganization). As such, we advocate a “double read” method for analyzing FFI texts.

On first read, raters can make provisional notes pertaining to content-related scores, but should focus predominantly on the process of speech and obtaining a general “feel” of the interview, which will contribute to the global coherence ratings. Is the respondent concise and on point throughout, or does he or she regularly “lose the thread,” give flat monosyllabic responses, or fall into overwhelming, preoccupied tirades? The *quality* of digressions into incoherence should be noted in terms of Grice’s (1975) maxims, but so should the *temporal flow* and *range* of those digressions. In other words, what is the maximum coherence achieved by the respondent, and what is the minimum? Are the oscillations mild or severe, frequent or rare? In this first read we are hoping to derive some sense of the “tug of war” going on between the respondent’s early-established IWMs, which are deep-seeded and automatic, and the respondent’s RF, which developed later and is challenged by some of the FFI’s more cognitively and emotionally demanding questions. The ebb and flow of coherence is our global proxy of this IWM-RF dynamic, and once we have a sense of it, we return to the beginning for a closer read.

The second time through, we engage in a slower, more content-specific analysis and start to assign numbers to the FFI’s various scales. Having already familiarized ourselves with the interview on the first read, we are less likely to make coding errors that would typically result in under-representing the respondent’s capacity. For instance, a brazen or impatient rater may see on first read-through that, when asked “What do you think your mother thinks of you?” the respondent replied, “I don’t know,” and the rater will immediately give Theory of Mind for mother the lowest score of “1.” With this already committed to paper, the rater may gloss over a later statement made spontaneously by the respondent, in which he says, “Sometimes I think my mother wants to me to care about school more than I really do,” which clearly indicates an ability to consider his mother’s mental state. By only attending to the question that explicitly demanded theory of mind, the rater is no longer measuring the respondent’s RF capacity, but simply his capacity to provide a specific answer at a specific point in the interview.

Final classification. Assigning an attachment classification to an interview is the last step of the

FFI coding process, and represents an integration of the constructs discussed above. Before a final classification is made, transcripts are rated for the presence of security, dismissiveness, preoccupation, and disorganization on Likert-type scales. This approach reflects our contention that attachment patterns are dimensional, and that a child may exhibit diverse strategies when the attachment system is activated, some healthier or more adaptive than others.

A child’s rating in security is directly tied to the coherence of his transcript—an interview cannot be considered high in attachment security if it is low in overall coherence. Adaptive response and developmental perspective codes are also regarded as particularly indicative of the balanced, open, and reflective style typical of secure adolescents. The insecure and disorganized ratings, conversely, demand correspondingly low overall coherence scores. A high dismissive rating is considered when the child is low in relation and economy (on the side of providing too little information), as well as when diversity of feeling is restricted, either because the child is inclined toward idealization or derogation in his view of the self or others. The preoccupied rating is highest when relation and economy (on the side of providing too much information) are low, and the child’s capacities to reflect on self and others are restricted by excessive anger, blaming, and indecisiveness. Disorganized transcripts are marked by poorly monitored speech and incompatible strategies, in which the narrative feels disoriented and the child appears manifestly frightened or dissociative during the interview. As a result, significant impairment is typically observed across all coherence, RF, and IWM codes when assigning the highest disorganization score to an FFI.

Each dimensional classification code is made independently before a categorical determination is considered. The final attachment classification represents the *dominant strategy* observed in the transcript. In cases where multiple strategies are present, a subtype of “other” may be assigned to the overall classification of secure or insecure. For instance, a child’s transcript may be scored as exhibiting high security, mild dismissiveness, no preoccupation, and no disorganization—the final classification is secure-autonomous, as this represents the dominant strategy of the interview. Another child’s transcript may be rated with mild security, moderate dismissiveness, high preoccupation, and no disorganization. In this instance, coders must decide if the interview predominantly features a preoccupied strategy—resulting in a classification of insecure-preoccupied—or a significant combination of preoccupied and dismissive strategies—resulting in a classification of insecure-other. Finally, a third transcript may be given codes of no security, mild dismissiveness, mild preoccupation, and high disorganization. In this case, coders would likely determine that the transcript is marked by a *lack* of strategy, thus earning the classification of disorganized/disoriented.

Conclusion

IWMs and RF develop and solidify at different periods over the course of development, and they dynamically interact within and between generations to inform an individual's overall attachment. While the field has well-established methods of measuring IWMs in infancy and RF in adulthood, there are few ways of exploring how these two vital constructs co-exist in the developing child. In this paper we provided an introduction to the Friends and Family Interview, which attempts to fill that gap by catering its design and scoring approach to the developmental capacities of early adolescents. We elaborated in detail three constructs central to using and understanding the FFI—coherence, IWMs, and RF—while placing special emphasis on carefully considering both content and process of speech when analyzing transcripts.

To date, the FFI has appeared in few published research articles, and more data is needed to establish its psychometric properties and cement it as a standard for measuring attachment and RF in early adolescent populations. However, our work thus far has demonstrated robust inter-rater reliability and construct validity in both community (Kriss, Steele, & Steele, 2011; Steele & Steele, 2005) and at-risk (Kriss, Steele, & Steele, 2012) samples, and we hope the current and future work of other researchers utilizing the FFI will uphold and expand these early findings across a diverse range of populations. The FFI holds significant research and clinical value in its unique approach to eliciting and systematically rating autobiographical narratives from an age group that has been notoriously difficult to assess from an attachment perspective.

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