Bowlby (1969/82) conceptualized infant-parent attachment as a control system that evolved to ensure the safety and well-being of a child. He hypothesized that the attachment system plays an important role in human life "from the cradle to the grave" (Bowlby, 1977), thereby laying the foundation for studying attachment beyond infancy. The Secure Base Scoring System focuses on behavioral components of the attachment system within an adult partnership. It is hoped that the scoring system will advance the study of the link between attachment behaviors and mental representations of attachment, and of attachment behaviors across age and different attachment relationships, thus addressing critical issues in attachment theory.

In essence, the relationship with an attachment figure (AF) provides an individual a sense of security or safety regarding the self, and confidence in the availability of the AF and the predictability of the relationship. When this security is threatened, an individual feels anxious and distressed, and seeks physical and psychological proximity to the AF to be assured that all is well. Thus reassured of the availability and support of the AF, the individual can then confidently explore, that is engage in other activities, play, work, etc.

Ainsworth used direct observational methods to study infant-parent interactions (Ainsworth, Blehar, Waters, & Wall, 1978). By assessing the infant's care-reseeking behaviors and the AF's complementary secure base support behaviors, she established secure base behavior as a core phenomenon of the attachment system. As the study of the attachment system moved to include adults, there was a shift to the study of representations of attachment beyond infancy. For example, Main and colleagues (1985) developed the Adult Attachment Interview and its scoring system as a means to capture an adult's state of mind with respect to early attachment experiences with parents. The scoring system outlined here represents a return to the use of direct observational methods to examine the quality of the attachment system in adult partnerships.

The scoring system is intended to be analogous to that for infant-parent attachment behaviors (Ainsworth, Blehar, Waters, & Wall, 1978). Partners in adult relationships are hypothesized serve as secure base users and secure base supporters with each other. Therefore, it is proposed that the components in an effective infant-parent attachment system are present in the attachment system between partners. Unlike the infant-parent relationship where the infant usually seeks and the parent provides the care, an adult-adult relationship is reciprocal in nature. Hence at any time, either partner can play the role of the secure base or the secure base user.

It is assumed that the attachment system in adults is activated by danger or distress just as it is in the infant-parent dyad. The infant is guided by the parent in the development of attachment behavior as to when and how to act (Waters, Kondo-Ikemura, Posada & Richters, 1991); couples may also evolve a pattern of attachment which is the product of their relationship and the attachment experiences they
have had in the past. For Secure Base Scoring, the couple engages in a semi-structured interaction and discusses a topic on which they disagree. This situation is assumed to present a potential danger/distress situation with the chance of arousing attachment behavior in one or both partners and placing the other partner into a position of having to respond.

The adult behaviors scored are intended to be analogous to attachment behaviors involved in secure base and safe haven interactions observed between infants and parents. In the infant-parent dyad, a secure infant explores away from the caretaker establishing contact intermittently. If the infant becomes distressed, he/she signals the caregiver, approaches, seeks contact/comfort/reassurance, is comforted, and returns to exploration. For the adult in the care-seeking role, four scales are designed to measure the quality of attachment behavior: 1) strength and clarity of initial distress signal, 2) maintenance of a clear distress signal, 3) approach to attachment figure, e.g., apparent expectation that the partner will be responsive, and 4) ability to be comforted. A summary secure base use score is a composite of these ratings.

Guidelines for scoring an adult's secure base support behaviors are based on research on maternal sensitivity, accessibility, acceptance, and cooperation (Ainsworth et al., 1978). Serving as a secure base, a parent supports the infant's exploration and contact maintenance, is aware of the presence of danger, responds to the infant's signaling/distress, correctly interprets the infant's signal, and offers effective reassurance, that is, the parent is comforting the infant and allows him/her to return to exploration. For the adult providing care, four scales are designed to measure the quality of attachment behavior: 1) interest in partner or "promotion of exploration", 2) recognition of distress, 3) interpretation of distress, and 4) responsiveness to distress. In addition, a summary score of secure base support behavior is given.

Optimally the behavior of the individuals reflects this secure base scenario or script. There is a clear indication of the belief that the relationship is a partnership, a team, or a working unit that has as its function the emotional and physical security and well-being of each partner, the couple, and their family. This concept is evident in the individual's behavior and verbalizations regardless of the distress level manifested.

Procedure

1. The first step in scoring the videotaped session is to watch the couple's 15-minute interaction in its entirety. Note when key exchanges occur and the nature of these exchanges. Establish the topic(s) of disagreement, and which partner is initiating the concerns when. It is often true that one person may initiate a concern, but the other will raise a counter concern. These topics of concern should be recorded.

2. Next, the scorer determines if the conflict is attachment-related. The Attachment Scale is intended to help the scorer sort through the attachment- and non-attachment-related aspects of the discussion, and to rate the degree to which attachment concerns are explicitly discussed. The topic of discussion is also noted.

Attachment-related conflicts are based on concerns or worries that pose a threat to the well-being of the relationship, the self, and/or the attachment figure. An attachment topic is not merely one that is important to the couple, e.g., buying a house. For a topic to be attachment-related, feelings of security are raised. In many cases the topic of discussion is explicitly attachment related, for example, issues of warmth and affection, or time together. Issues about other family members, in-laws or children often directly connect to concerns about support and availability of the partner. NOTE: With young couples prior to marriage (Crowell, Gao, Treboux, Fyffe, Lawrence-Savane and Waters, 2000), the correlations between AAI security and behavior were higher for couples who discussed an attachment related topic (e.g., warmth and affection, time together) as opposed to those who didn't.

The individual in the care-seeking role (secure base user) requests support, assistance, reassurance or comfort from the partner (e.g., "It really upset me when ...", "It means the whole world to me to be able to ...", "you aren't there for me...", "I'd like to feel some (warmth/enthusiasm) from you when you see me at the end of the day...") and the caregiver offering to ease the partner's attachment anxieties by being available, and providing support and care (e.g., "You have a problem with ... Don't worry about that. I'll be there ...", "It will be okay. We'll work on it together ...)"). This type of conversation explicitly illustrates the attachment system.

A topic is also inferred to be attachment-related if the partners seem to avoiding an explicit mention of an attachment need, yet it appears obvious to the rater that issues of love, trust, support, and coopera-
tion are at the heart of the discussion. For example, a partner asks for less involvement and more distance in the relationship, or down-plays a concern, or counters the partner's attachment needs (e.g., "It's stupid to worry about that ...", or "that's your business", or "you know, I'm too busy/tired to be affectionate..."). These responses may occur even before the partner has explicitly stated a need.

The following topics are attachment related, or potentially so.

a) Concerns about separation, lack of emotional closeness/intimacy, jealousy, or not spending enough time together.

b) Doubts about whether the partner can be counted on or trusted to be available and supportive in times of need. That is, if necessary, will the partner put the careseeker's or the relationship's needs above the individual's own needs? Financial concerns can fall into this category.

c) Discussions of how to deal with problems that could seriously threaten the couple's ability to continue to function together as a responsible unit in the world, e.g., the soundness of the couple's finances, or the employment (or lack thereof) of one of the partners.

d) Less serious arguments about how the partners as a team manage a life together, e.g., who should and when to do household chores so each is free to engage in other activities, how to deal with in-laws and relatives so their feeling and thoughts are respected, and the choice of the kind of recreational activities.

e) Concerns about perceived physical danger, e.g., health concerns, fear for personal safety because of violence in the neighborhood.

f) Requests that the partner be accepting of the careseeker, e.g., siding with the careseeker instead of parents or friends, on key issues that affect the careseeker's self concept.

g) Soliciting support in pursuit of a personal goal that is crucial in an individual's self development.

h) Needs to re-negotiate attachment roles with the partner as the careseeker faces changes in attachment with others, e.g., death of a parent, or birth of a child.

i) Seeking to establish emotional equilibrium, i.e., to be relieved from distress, anxiety, or worries that do not concern the relationship. (Although this kind of careseeking behavior is theoretically possible, the nature of our task makes it less likely.)

The following possible threats to the physical and emotional well-being of the partner might stimulate an individual's secure base support behavior.

j) Concerns about perceived danger to the partner's health or safety.

k) Attempts to "teach" the partner to use the caregiver as a secure base/safe haven, i.e., instructing the partner to use a secure base.

l) Efforts to help the partner to develop a stronger self concept, i.e., working with the partner to boost his/her confidence, or berating the partner about their inadequacies.

Although it is obvious from the list above that some topics have high attachment relevance, any topic can potentially arouse attachment behavior. The basis for determining whether a topic is attachment-related depends on whether the concern is expressed as threatening to the well-being of the relationship, self, or partner.

Attachment-related discussions may be indicated by statements that show the individual has a relational focus, (i.e., statements are framed as "we") or an atypical or jarring individual ("i.e., "you" or "I") focus. For example, "How can we work it out?" shows the desire to be a team, to work together on the attachment conflict. However, statements such as "What I do on my time has nothing to do with you," and "Until we get married, my finances are none of your business" suggest a belief that they are not or should not be a team. It strongly suggests rejection or avoidance of an important attachment issue.

The relation between the explicitness of the attachment topic and the couple's security status is of empirical interest. It could be that a delay or absence of such directness even though they hover around a topic that many couples would render as relational represents an avoidance strategy. Alternatively, an underlying felt security may render the need for discussing attachment unnecessary.

3. Once it is determined whether the concern is attachment-related or not, the scorer should note the "ownership" of the problem, i.e., who is expressing the concern. If more than one such topic is noted,
then record when all of these moments begin as well as the "ownership" of the concerns. The topic may or may not match the proposed topic for disagreement set up by the researcher and announced at the beginning of the tape. If the topic changes, keep track of all topics discussed. Thus at this point, the coder should have list of who initiated each topic and all topics discussed by the couple, and should have identified those that are attachment related.

4. For all interactions, the scorer attempts to score both partners on the scales below.
   a) In some cases, throughout the interaction one partner is only in the care-seeking role while the other is only in the caregiving role. Score each individual in the relevant role. It SHOULD BE NOTED THAT THIS IS NOT THE USUAL SITUATION. In most cases (about 85%) a responding partner will at least briefly raise a counter concern or desire which puts them in the position to be scored also a secure base user, and the original secure base user is cast in the role of responder.
   b) At times, roles shift within the course of the discussion as the partners take on the care-seeking role on successive topics. Each individual's behavior in both roles needs to be assessed.
   c) In the situation where the two partners are asking for each other's cooperation on the same attachment topic (e.g., one partner asks the other to be more responsible fiscally and the other partner expresses a need for help on that) or both partners are discussing comparable solutions to a problem (e.g., one partner thinks to be considerate of their relatives' feelings, they should spend their holidays with one set of parents while the other thinks they should visit the other set of parents), score both partners as using a secure base and providing secure base support.
   d) In cases where one partner takes on a secure base role in instructing the other partner on how to request for help (e.g., "If going to the U.S. Open is really important to you, you need to let me know. I will rearrange my schedule to be with you.") or trying to change an undesirable trait of the partner (e.g., indecisiveness, inability to stand up to a parent, fiscal irresponsibility), this partner is to be scored as a secure base supporter because s/he is trying to tell the partner that s/he is an available resource during times of distress or need. The individual should also be scored as a secure base user as s/he is trying to gain cooperation from the other partner who is in the role of a caregiver.
   f) A "Can't Rate" code should be given for each scale only if the subject has not expressed any concern about an issue of his/her own.

I. THE ATTACHMENT TOPIC SCALE

This scale will be referred to as the topic of attachment in the remaining sections of the scoring manual and is designed to help the scorer identify the attachment-relevance of the couple's discussion. Although this scale is correlated with the secure base use and secure base support scales where the scores depend on the clarity of the attachment concern, it is not an overall summary score of how capable the couple is in seeking care from or giving care to each other.

Each topic that involves secure base use and the complementary support behavior is examined. The couple gets one score on the topic of attachment scale. If a new topic is raised, then it also gets a score. The score of the scale is the highest of the scores attained by the couple.

7. The topic of attachment is explicitly stated

One or both members of the couple has clearly expressed an attachment concern, such as direct expressions of concern about trust, closeness, etc. The distress or concern of a partner is clearly expressed in words of how it threatens the well-being of the relationship, the self, or the attachment figure. The way the distress or concern is brought up could either be pro-attachment with the careseeker asking for or the caregiver providing support, assurance, and acceptance, or anti-attachment with either partner or both dismissing or rejecting attachment needs. The topic need not be sustained to receive this score.

5. The topic of attachment system is moderately clear

a. There are no explicit statements concerning threats to felt security, but concerns are raised about separation, intimacy, and closeness.
   b. The problem is not presented as relational (e.g., the partner's impulsive spending), but it is talked about as if it will have a very detrimental effect on the relationship if the issue is not addressed.
c. One partner appears to be trying to control or dominate the other.

d. Over time, there is very high sustained distress expressed either verbally (e.g., "I just can't live like that", "It hurts me that you don't believe me") or behaviorally (e.g., crying, extreme withdrawal, signs of deep-seated helplessness), however, the distressed person does not clearly state what the concern is.

3. The topic of attachment is ambiguous, vague, or must be inferred

   a. In general, the coder gets the sense that the couple is "dancing around" the attachment topic and one or both partners is/are just about to state the attachment concern but they fail to do so.

   b. Over time, there are repeated mentioning of personal distress over problems concerning more instrumental, materialistic, or individual gains with no reference regarding how they threaten the self or the relationship.

1. The topic of attachment is not mentioned and is difficult or impossible to infer

   The couple is strictly engaged in problem solving in a non-distressed manner throughout the 15 minutes of discussion.

   For couples who score at this level, it can be very difficult or even not possible to score their behaviors for secure base use and support. In this case, use Can't Rate for the scales as needed.

II. SECURE BASE USE SCALES

A. Strength and Clarity of Initial Signal of Distress or Concern

This scale deals with the clarity and intensity of the individual's request to the partner. It is a signal that something is bothering the individual. Since the interaction task is verbal in nature, the signal is typically verbal. However, assessment of accompanying affect is an integral part of the scoring system.

The clarity of distress signal refers to the clearness of the concern. If an individual is very articulate but dances around the topic of concern, then he/she should be scored low on clarity.

Since the couples were asked to discuss a topic on which they disagree, such as finances, time together, sharing of household tasks, and how to deal with in-laws, usually at least one partner is upset with some aspect of the topic. Therefore, it is usually (but not always) relatively easy to identify the distressed individual.

The highest score is given to an individual who takes the initiative and is able to deliver the message directly and strongly both verbally and affectively. A mid-range score reflects a somewhat unclear expression of concern, or a signal that is inconsistent in words and affective tone. A low score indicates a weakly expressed concern, or one for which the partner identifies the concern first. NOTE: A person who is verbally abusive in the initiation of a concern should not receive above a 3.

If the episode contains several instances of seeking help, it would be judged by the first expression of distress from the approaching partner. If help is requested on more than one topic, then score on the pattern of the first signals. The maintenance of distress scale is used to score subsequent behavior. A "Can't Rate" should be giving if the subject has not expressed any concern throughout the discussion.

7. The concern is very clearly expressed

   a. The individual clearly signals the concern by using words that directly and unambiguously express his/her distress or concern, with matching affect and posture. That is, the seeking partner should orient his/her body toward the partner, maintain eye contact, and appear concerned. A person does not need not to be agitated to receive a high score.

   b. If the individual is straightforward in bringing out a concern but purposefully tones down the signal by putting it in a gentle and calm way so it will be easier for the partner to hear, it should be a "7".

5. Distress signal is moderately clearly demonstrated.

   a. The signal is clearly given in words or in affect, however, there may be some ambiguity in terms of the degree to which the person is upset or the clarity of the attachment problem. There is some mismatch of affect and language, e.g., the words are direct but put in a joking manner.

   The difference between a score of "7(c)" and "5" is that with a "7(c)" the individual is pur-
posedly trying to approach the partner in a calm fashion but the signal is pressing. However, a person given a score of "5" does not appear to be aware of the existence of discrepancy between the language and the affect.

3. The individual is distressed, but the intensity of signal given does not match the degree of the distress.
   a. The person is very distressed, but is ambiguous in expressing this. There is marked mismatch of language and affect.
   b. The individual uses cold/nasty tone when speaking of the issue, but does not seem aware that he/she is upset.
   c. The individual voices his/her concerns only when countering the partner's complaints, and does not clearly indicate in words that s/he is bothered. (For example, when a man complains that the woman is not spending enough time with him, she counterattacks with how she does not like the way he manages money without relating to this latter issue.)
   d. Low level introduction of topic, such that the individual does not seem aware of how distressed he/she is.
   e. Clarity and intensity are adequate, but the concern is odd, idiosyncratic, or materialistic.
   f. A '2' should be given if the observer finds it hard to tell the individual is distressed, but the partner seems aware,
   g. The individual seems to be hiding from the partner how distressed they are, playing down their distress or concern perhaps out of anxiety or fear of the partner’s reaction. This should not score above a 3, but may score lower if the signal is very weak.

1 Distress signal is very weakly demonstrated.
   a. The signal is exceedingly weak, such that the observer can barely identify that the person is distressed over the topic
   b. In some cases the desire of the individual is clear, "I want to get the car fixed", but the importance of this issue is not evident until the conversation continues.
   c. The concern is bizarre, irrational or destructive

B. Maintenance of A Clear Distress Signal

This scale deals with how actively and persistently the individual maintains a clear distress signal. Again, the clarity of signal refers to how clearly the individual is able to state the distress in relation to attachment needs, not skillfulness in communicating. When an individual asks for help, the distress signal should be repeated or increased in intensity if the partner is not successfully respond. When there are multiple attachment topics, rate maintenance on the pattern of maintenance across the different topics.

A high score in this scale indicates that when the person is upset, he/she continues to signal clearly, or becomes increasingly clear and direct in expressing what he/she is seeking. A mid-range score is appropriate for an individual who has tried to signal clearly or has persisted though not entirely successfully in getting the partner to help. A mid-range score also should be assigned if the content of the subject’s attachment concern is not clear although the subject continues to signal. A low score reflects very poor effort in asking for help, or failure to persist in expressing the concern. NOTE: A person who is verbally abusive at some point in the discussion should not receive above a 4. If the complaints become increasingly attacking to the partner, the person should not receive above a 3, and probably should be scored lower.

7. Very active and persistent efforts to maintain clear signal, or increase it if the initial signal is not strong enough
   a. The individual remains clear, explicit, and direct in his/her expressions of distress or needs.
   b. If the individual’s initial signal is immediately picked up by the partner and sufficiently responded to so that there is no need to maintain the signal because adequate ongoing discussions are taking place.
   c. The individual may start signaling a little weakly, but becomes very clear and explicit with time (rate 6).

5. Somewhat active and persistent efforts to maintain distress signal.
   a. The signal is clear or moderately clear but tapers off a bit as the discussion goes along.
   b. The individual fails to become more clear and direct when this seems needed.
c. The signal is clear and fairly strong, but the individual is able to be comforted by the partner before there is any need to escalate distress signaling.

d. The signal may be low level at first but becomes clearer.

e. A "4" should be given if there is escalation in an initially low signal but clarity is not reached fully in affect, or the message becomes increasingly confused.

3. Relatively little active and persistent efforts to maintain distress signal when it seems needed.

a. The signal may initially be fairly strong and clear (first time only). However, it is not repeated in a clear fashion, and quickly becomes weak or non-existent, confusing, or increasingly odd or idiosyncratic.

b. The initial signal is very weak, the individual remains at the same level throughout, even though the signal is obviously too weak to get his/her message across.

c. The desire of the individual is clear, but there is no distress expressed. The focus is on instrumental action, "I want the car fixed.... I want the car fixed.... I want to get the car fixed".

d. Use of distress signal predominantly as an attack, rate '2'.

1. No active and persistent effort to maintain distress signal.

a. The signal is never clear and direct, or is not repeated (assuming it is not responded to/individual is not comforted).

b. Distress is evident, but topic shifts rapidly, and problem remains unclear regardless of topic. Each topic is easily given up on.

C. Approach to the Attachment Figure

This scale deals with an individual's approach to the partner. Approach refers more to a clear and direct expression in behavior, words and affect of the desire and need for the support and help of the partner, as opposed to general expressions of distress or need.

This is a very important scale in the overall summary of secure base use. The individual who approaches effectively shows in behavior and affect that they have a clear expectation that the partner ought to behave as an attachment figure (should care and respond), not just be a sounding board. Thus, strong approach is scored when the secure base user appears to expect the partner to be fully and directly involved in responding to the request. Desire for help does not depend on the person having a clear expectation of what the partner will do to help. NOTE: A person who is abusive to a partner verbally or physically is showing very poor approach behavior and should not be scored above a 2 on this scale.

7. Very direct and active in seeking help from partner.

a. The individual is clearly asking for help and support from the partner. He/she uses words that directly and unambiguously expresses approach with matching affect and posture (i.e., looks at, leans toward, and speaks to the partner).

b. The subject does not need to use "Can you help me with...?", or "I need your help..." kind of sentences explicitly. As long as the need of support and help from the partner is indicated in the way that it is obvious to the scorer, a rating "7" can be given.

5. Some effort in direct approach, but the desire is not clear.

a. The person is generally clear, but there may be some ambiguity in their need of the partner for the attachment issue, (e.g., poor eye contact).

b. He/she is direct when asking for help on one issue and yet is indirect in asking for help for another issue during the discussion.

c. The clarity of the signal is moderate but the approach is strong (e.g., giving the partner clear instructions as to what he/she should do). This should be a '4' if the expectations are only for instrumental help, "I want you to get the car fixed".

d. A '4' is given if the approach seems adequate but the responder backs away, and so approach is not sustained OR if the individual asks the partner not to be negative "don't be that way", but otherwise the expectation of the partner's help is not clear.
3. Some desire for help, but the approach is not clear.
   a. The person is not clear in their need of the partner for the attachment issue, because they do not look at the partner or do not directly speak to the partner, although the distress may be quite clear.
   b. The request is demanding or controlling: It seems odd or unreasonable, therefore it limits partner's ability to respond. This includes behavior that alternates between approach and withdrawal (a "push-pull" approach), or behavior that may be passive aggressive in nature. Depending on the severity of the problem, the score may be lower than a 3.
   c. The argument is logical and about the relationship, but the partner is not addressed as a unique individual and as a true partner. The argument could be addressed to anyone, and the distress is not fully clear. For example, a logical discussion that the couple should not live in a particular neighborhood because of safety issues, perhaps based on facts or professional experience, but without direct personal appeal to the partner such as "why don't you listen to me, this is important, I'm afraid for our family, etc.
   d. Help seeking is implicit, so that the coder is generally aware of what the subject would like from the partner, but it never is made explicit.
   e. In some cases the caregiving partner expresses the concerns for an individual and offers supportive suggestions, such as "You have trouble talking to your parents. How can I help you with that?". If these are positively accepted by the "secure base user", but not spontaneously generated (poor initial signal and maintenance), score here. If they are only weakly acknowledged, score '2'.

1. No effort or initiative to seek support from the partner.
   a. Although the concern or desire may be clear, the problem is not stated as relating to the partner. The individual may focus their concerns outside of the relationship, on to other people or situations
   b. He/she only raises complaint when he/she is on the defensive without clear expectation of response.
   c. The request is very demanding, or controlling to the point of being irrational or destructive. Partner can not respond without compromising self, the relationship, and/or other important relationships or people.
   d. There is no response to caregiving partner's supportive suggestions.

D. Ability to be Comforted
This scale deals with the individual's ability to be comforted. To get the highest score in this scale the subject has to convince the observers that he/she is truly pleased with what the partner has done for him/her. Comfort is not the same thing as the subject giving up on trying to get a response from the attachment figure. In general, it is also not related to the observer's impression of how effective the responding partner is. If the attachment figure is not successful, it does not matter if the observer thinks this attachment figure is the most empathic partner in the world.

7. Greatly comforted by partner's responses and clearly states it.
   a. The individual responds to comforting with markedly diminished distress, and clear statements that they are pleased with the partner's responsiveness and the resolution of the situation.
   b. A "6" should be given if the subject is completely relaxed and happy, but never states his/her appreciation of the partner's helpfulness.

5. Moderately comforted but the distress feeling is not completely settled.
The individual appears more relaxed and happy, but there are no statements regarding his/her appreciation of the partner's helpfulness. He/she may continue to quibble with the partner but in an non-distressed manner. Benign satisfaction with "winning" should not be scored above a '5', but it must include obvious positive feelings of being responded to by the partner as well.

3. Obviously not comforted by partner, but the subject tries to minimize the distress.
   a. The individual remains somewhat tense or distressed despite the partner's effort, although he/she may not be actively stating this
and may even be making conciliatory or semi-positive noises. He/she may change the subject.

b. The individual appears unconsolled because of the partner's lack of responsiveness but the individual tries to comfort him/herself somewhat. (For example, when an individual brings up his/her concern about an issue, instead of responding to the complaint directly, the partner counterattacks. The subject senses that he/she is not going to win the argument and therefore gives in by changing the topic, rationalizing, resigning without being irritated, or simply agreeing with the partner).

c. Some concerns may be so great, or the partner so unresponsive, that it would be unreasonable to expect the individual to be comforted within the session. Such situations should lead to a score of 3 in most cases.

d. Concern is never strong and the individual is never very distressed (e.g., a concern is used as a counterattack, or is very concrete and instrumental), the individual should not score above a '3'. If the concern persists at the same level without resolution, rate '2'.

e. If the attachment concern severely threatens felt security and the partner is extremely rejecting and the individual only weakly attempts to self soothe, then give a "2".

f. Score should be 3 or lower if the individual's relief seems basely on winning or is gloating or pleased with domination of the partner.

g. Individual should not score above a '3' if they deny distress but still appear very unsettled. One form of being unsettled is to attack the partner subsequently.

1. Not comforted and remains distressed.

a. The individual is not comforted, and remains distressed, or becomes more distressed with time regardless of whether the partner is actually helping. The distress may range from active and repeated signaling to passive, helpless subsiding into silence.

b. The subject is obviously not comforted and is not convinced that the partner is going to help him/her.

E. Summary Scale for Secure Base Use

This scale summarizes the observer's overall impression of the subject in the secure base using role. That is, what is the quality of the subject's attachment behaviors: the initial strength and onset of the distress signal, maintenance of the a clear signal, approach to the attachment figure, and the ability to be comforted. To arrive at a summary score, consider the pattern of seeking help from the partner, BUT DO NOT SIMPLY AVERAGE THE SCALE SCORES.

Examples: Some individuals show sustained high maintenance of distress even when the partner tries to be responsive. In this case the individual would be scored low on comfort which would take precedence over the active maintenance score in indicating a relatively poor secure base user. In contrast some individuals are clear and maintain well, but the partner is unresponsive and hence limits comfort. This person should score better in the summary scale than the individual in the preceding example, despite potentially having identical scale scores.

The high score in this summary scale indicates that the subject is able to convey his/her distress clearly initially and throughout the discussion, is able to approach the partner and is satisfied with the partner's effort to help. A mid-range score shows average signaling, acceptable approach and gaining some comfort, or significant discrepancy between asking for help and gaining comfort. A low score marks both poor attachment behavior and low ability to be comforted.

7. Very good secure base use

The individual has expressed his/her distress and need for help clearly initially and throughout the discussion. He/she appears fully confident (even when upset) that the partner should be responsive. By the end of the discussion the distressed individual appears more relaxed and satisfied.

5. Moderately good secure base use

a. The individual has been fairly clear in their expressions of distress and need/concern, although there may have been times when he/she was vague, off-topic or is inconsistent in words and affect. In most ways he/she has approached the partner effectively and seem to have found the partner tolerably responsive. The individual appears fairly relaxed and happy by the end of the session.
b. The subject has been clear in expression of need or concern, and for the most part he/she stays on topic throughout the session with the apparent expectation that the partner should be helpful. However, the subject fails to become more relaxed or happy at the end because the partner is relatively unresponsive.

c. A "4" should be given if the subject has not expressed his/her distress/need very well, and maintained it at the same level throughout the discussion, but they seem to expect the partner to respond. The subject appears more relaxed and happy by the end of the session.

3. Fair secure base use
a. The individual has not expressed his/her distress/need very well, and appears somewhat wary of making a full approach or seems concerned that the partner cannot really help him/her. He/she remains somewhat tense or distressed.

b. The subject has been fairly clear in expressing distress/need/concern, and for the most part he/she stays on topic throughout the session. The expectation that the partner can or should help is not clearly evident. The comfort score is not above '3'.

c. A verbally abusing careseeker should not get above a 3 on the summary scale

1. Poor secure base use
a. The individual has not expressed his/her distress/need/concern in any clear way. He/she is not comforted, and may remain distressed or becomes more distressed with time. He/she appears very anxious and wary about their partner's availability and sensitivity.

b. The individual is repeatedly verbally attacking or uses physical attack even once.

CR (Can’t rate.) If the partner has not expressed any attachment related concern throughout the discussion.

III. SECURE BASE SUPPORT SCALES

Providing secure base support is not equivalent to doing what the partner wants. Secure base support should promote the relationship overall, and the well-being of the partner without severely compromising the self. The partner seeking help is not always clear or reasonable in requests or concerns, and the coder must make some judgment about this in order to score the secure base support scales. This judgment by the coder should rest on the idea that secure base users in an adult relationship should not be asking responding partners to act in ways that harm themselves emotionally or physically or their families, or to sacrifice autonomy in areas which are unrelated to the relationship. Attempts to dominate or control the partner or to "win for the sake of winning" are scored as poor secure base use. These facts must be kept in mind when scoring the secure base support of the attachment figure.

A. Interest in the Partner or "Promotion of Exploration"

This scale deals with the individual's willingness and ability to be a "good listener" and a catalyst in encouraging the partner to express his/her feelings and thoughts. It is designed to capture the caregiver's acceptance-rejection of the partner's request for support. To receive a high score, the individual has to be accepting and respectful of the partner's needs. That is, the caregiver takes the partner's needs seriously without belittling them either verbally or nonverbally. This behavior does not necessarily relate to a specific conflict topic or any distress behavior from the partner, but reflects a general attitude toward and regard for the partner. Interest is not the same as an individual expressing an agenda for the partner about what to do.

7. Highly interested and actively encourages the partner to express his/her needs.

a. He/she is actively interested in what the partner thinks and feels. Through actions and words, he/she encourages partner to express him/herself and explain events.

b. The individual gently helps to draw out the partner's needs or concerns if the partner has hard time putting these into words. The individual may actually state the partner's concerns more clearly than the partner or makes the attachment elements more explicit. "You get so nervous when you try to talk with your parents".

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5. Generally interested, occasionally cuts off the partner, speaks too frequently for the partner, or is not intensely engaged in the partner

   a. An individual is generally interested in what the partner is saying. He/she may respond a bit quickly occasionally before letting partner finish and may not seek to fully understand partner's views. He may be engaged at a moderate level. May raise a concern for the partner, but is not as gentle and supportive as the person scored a "7". "You're such a chicken when you try to talk with your parents" (said with humor and concern). Score lower (2-4), if criticism is more harshly delivered.

   b. The subject has a tendency to interfere with the partner's attempt to express his/her point of view, especially if the partner's position seems unreasonable (in the coder's opinion).

   c. The individual appears definitely interested in the partner, but his/her own concerns are overriding (and probably more valid in the coder's opinion), and limit the expression of interest in that partner or facilitating the partner's expressions. In such a case, if the subject cuts off the partner or tends to actively counter-attack in response to the partner's overtures, a score "4" should be given.

   d. If a partner seems to be listening but only responds passively, a score of "4" should be given.

3. Glimmers of interest, frequently cuts off the partner or is minimally engaged.

   The subject generally does not seem very interested in the partner. He/she frequently cuts partner off or fails to respond to partner's overtures. There are occasional glimmers of interest. Or responds may be odd or off topic although 'friendly'.

1. No interest

   a. The subject shows no interest in the partner. He/she does not appear to be listening to the partner or trying to understand partner's statements or feelings.

   b. The individual is upset or irritated by partner's concern or may be rejecting or demanding in his/her responses.

B. Recognition of Distress or Concern

   This scale assesses awareness of the partner's distress/needs/concern. To get a high score the individual must "notice" that the partner is bothered by something as soon as the partner expresses his/her concern. Therefore, the nonverbal cues (such as indications of engagement in the discussion) are as important as the verbal ones. Note that recognition is not positive or negative in tone. A partner who chooses to be nasty, to give signs that he/she has given up hope that something can be worked out immediately after noticing the signal would receive a high recognition score just as a partner who immediately responds in a supportive way would. Recognition is not related to the strength of the care-seeker's signal. A low score is given if the subject is slow in recognizing or appears to be unaware of the distress.

7. Fully and immediately recognizes the distress/concern of the partner

   a. Immediately recognizes that the partner is distressed regardless of the strength of the signal. He/she may even finish the sentence for the partner when the partner airs his/her complaint.

   b. He/she understands fully that the partner is upset, even though the individual may try to provoke or distress the partner further.

5. A little slow to pick up on distress/concern signal.

   a. The individual picks up on the partner's distress by the second clear signal or a few weak signals.

   b. The individual is aware of the content of the partner's concern but apparently is not fully registering the level of affect.

   c. A person who persistently presents his/her own view so as to seem out of touch with the partner's concerns scores '4' or lower.

3. Very slow to pick up on the partner's distress/concern.

   a. The individual recognizes the partner's distress only after repeated signaling.

   b. Comments on the partner's behavior, words or the topic of the discussion without actively acknowledging the concern, either positively or in a dismissing/rejecting manner

   c. The individual actively avoids acknowledging the concern of the partner should not score above a '3'. Such an individual appears pre-
dominantly interested in defending his/her own position.

1. **Apparently is unaware of the partner's distress/concern.**

C. Interpretation of Distress

This scale deals with the subject's "correctness" in understanding the partner's concern. A person who scores high on this scale may actually understand the issue better than the partner appears to, and responds accordingly. The rating of this behavior depends on both the observer's sense of what the partner's problem is, and how the partner responds to the interpretation (i.e., "no, you don't understand what I mean"). Correct interpretation is usually positive, but in some cases can be used as a means to attack a partner more directly and sharply.

7. **Immediate and fully correct interpretation of distress.**
   a. The individual remarks on partner's behavior or comments so that we and the partner know that he/she knows exactly what the partner's concern is with respect to both content and affect.
   b. He/she makes very good sense of the concern if the partner has been vague.

5. **Modestly correct interpretation or continued effort in trying to understand the distress.**
   a. The individual appears to have a fairly clear idea of what the concern is that is upsetting the partner and tries to let the partner know. This is not a sustained effort, but shows adequate understanding. For example, the level of understanding may be shown by becoming more attentive if he/she thinks the concern is serious as opposed to more casual. Similarly, a person who is more avoidant or negating of the partner's concerns as they become more serious is also implicitly demonstrating some awareness of the issues.
   b. He/she keeps trying to understand the issue even if she/he is off the mark at first, but does not quite achieve full understanding.
   c. A "4" should be given if the subject appears to understand the issue but does not communicate this to the partner.

3. **Some nominal understanding of the distress or aborted attempt to understand when the effort is necessary.**
   a. The individual is not clear about what the partner is saying. He/she may pick up on one of many or the less important aspects of the concern (e.g., The partner is complaining about how the individual is fiscally irresponsible. The individual only talks about whether he/she should have purchased a less expensive item this time.)
   b. He/she may fail to pursue efforts to understand after a brief effort.
   c. A '2' should be given if the individual expresses so little to the partner that is not really possible to tell the level of understanding (one could have the feeling that understanding is fairly high, and the person is withholding this knowledge).

1. **No understanding of the distress.**

   Seems totally unaware of the nature of the partner's concerns. May even speak to an unrelated issue or maintain their own position without acknowledgment of partner's distress.

D. Responsiveness to Distress

This scale addresses two components of responsiveness: 1) the willingness or desire to help the partner, and 2) the effort and effectiveness in the attempt as shown in the individual's behavior, words, and affective tone. The first component refers to the subject's willingness to make him/herself available for the partner who is in distress. The second component refers to the subject's respect for the partner as an individual, his/her skillful intervention when the partner is upset, and his/her willingness to use gentle means instead of a controlling, demanding manner to solve the conflict. The highest score indicates that the individual not only shows the willingness to help the partner, but also is able to use the most effective way of comforting the partner.

7. **Highly responsive.**
   a. The individual immediately responds in a way that seems intended to help the partner. He/she is concerned, offers suggestions, possible solutions, clarification. This may show up as prolonged and involved constructive problem solving, especially if the issue is complicated. NOTE: The suggestions/problem solving must be "sensible" or practical. Odd or bizarre suggestions, however warmly offered are not rated at this level.
   b. He/she involves the partner in the discussion to facilitate resolution, without directing the partner how to respond.
c. He/she is low keyed, and tries one thing at a
time. He/she is flexible in approach, i.e., tries to
assist in a variety of ways.

d. The responses are caring, flexible, and reason-
able. The individual need not accede to unreas-
sonable, irrational or controlling demands to be
considered highly responsive.

e. An individual can be very distressed or angry
about his or her own needs, yet not lose sight of
the fact that they are the partner’s attachment
figure. Such individuals should receive in the 5-7
range for responsiveness, if they are caring, help-
ful, interested, and not rejecting of the partner.

5. Reasonably responsive.

a. The individual seems to want to help the partner.
He/she is emotionally concerned and responsive,
but may try to do too much at once. He/she may
not draw the partner out, but rather may try to
impose solution, "you should do...", or "try...", or
"don't feel that way....".

b. He/she seems to want to work out the problem,
has no solution of his/her own, and settles with
the partner's suggestion.

c. He/she seems very willing to work out the prob-
lem or compromise after some arguments and
resisting the partner’s suggestions.

d. He/she offers to try (in a way that is convincing
to the partner and the observer) the partner's sug-
gestion next time when the problem comes up.

e. The individual seems to want to help the partner.
He/she is emotionally concerned and responsive,
but ultimately is baffled by the partner's failure to
be comforted or the unreasonableness of the de-
mand.

f. The subject shows high interest in the partner’s
distress/concern but also tries to push his/her own more reasonable agenda.

g. A "4" should be given if the subject seems to
want to help the partner but seems passive or
lacking in the know-how as to providing
comfort or their own distress is so great that
they cannot do it.

h. A '4' should be given if the responses are
instrumental or focus on a narrow aspect of
the concern. The repertoire of responses may
be somewhat limited, and inflexible.

i. A "4" should be given if there are mixed ex-
amples of good caregiving and rejecting behav-
iors which are not extreme. (For example,
after repeatedly trying to comfort the partner
who continues to complain, the subject says,
"I’m glad you could tell me when you are up-
set, but I don’t want to hear them anymore.")

3. Pseudo-response, is rather controlling, acts to
cut the partner up, or becomes very frustrated
because the partner is extremely uncooperative.

a. The individual does not really seem interested in
helping the partner. He/she may offer some sug-
gestions, but the affective tone is not warm or
concerned. He/she may be bossy or controlling,
e.g. "if you would only do...".

b. The person is superficially responsive in order to
stop the partner's complaints without an apparent
interest to comfort the partner.

c. The individual becomes frustrated and irritable in
responding because the partner is uncooperative.

d. Gives in to the partner out of passivity or help-
lessness.

e. This person is so unaware of what the issue is (as
demonstrated by a low interpretation score) that
they cannot adequately respond even if they ap-
pear to want to. Score '3' if they appear to be try-
ing to understand under such circumstances; 
scoring at 2 lower if they do not try.

e. A "2" should be given if the subject seems super-
aturally interested in helping the partner, but at
the same time strongly insisting on having his/
her own needs satisfied.

1. No real or apparent interest in helping the
partner.

a. The individual is apparently not interested in
helping. He/she is rejecting of partner's needs or
feelings, e.g., "You're entitled to your feelings,
but ...." Or actively threatens partner verbally or
physically.

b. He/she blames the partner for the problem, e.g.,
"If you weren't so (stupid, dependent, etc.)....".

c. He/she can't or won't help the partner, or isn't
interested, e.g., Saying "Whatever..." in a bored
tone, poor eye-contact, and acting bored
(repeatedly yawning or stretching) or with-
drawn. Evasive in interactions with the partner.
d. He/she never seems interested in helping the partner. He/she always focuses on and returns to his/her own concerns.

E. Summary of Secure Base Support Scales

This scale summarizes the overall secure base support of the caregiver. A high score indicates sensitivity to the partner's distress, understanding of the problem and responsiveness resulting in the partner being comforted considerably. To arrive at a summary score, consider the pattern of seeking help from the partner, BUT DO NOT SIMPLY AVERAGE THE SCALE SCORES. For Example: Some individuals have high recognition and high interpretation scores, but are intentionally unresponsive and rejecting. Such an individual would automatically get a low score on the summary scale. Similarly, warmth and positive attitude (interest and desire to be responsive) alone are not enough to get a high score on the summary scale, unless interpretation is also good.

7. Highly sensitive and responsive to partner's distress.

This individual is interested in his/her partner, and makes clear efforts to understand and respond supportively to the partner and the relationship. Even if the couple is disagreeing strongly, the underlying affection and respect of this subject for his/her partner is obvious to the scorer.

5. Reasonable sensitivity and responsiveness.

The individual has made some efforts to understand and respond supportively. There may be some rejection of the partner's thoughts or feelings, but for the most part he/she has been interested in the partner and attempted to respond to the issues raised.

3. Low sensitivity and responsiveness.

The individual has made only a few efforts to support or respond to the partner. These efforts are not well sustained, and the subject may appear irritated with the partner much of the time and/or unclear about partner's concerns.

1. No apparent sensitivity and responsiveness.

   a. The individual has not been interested in the partner or shown support. The individual is ignores the partner, is aggressive, belittling, and/or threatening toward the partner.

   b. The subject fails to recognize there is a problem (utterly clueless) or is clueless about the nature of the problem.

   CR (Can’t rate.) If the partner has not expressed any concern throughout the discussion.