Parent-Infant Relationship
Global Assessment Scale (PIR-GAS)

91–100
Well Adapted
Parent–child relationships in this range are functioning exceptionally well. They are mutually enjoyable and without sustained distress. They evidence adaptation to new circumstances and are typically free of conflict as parent and child manage the stresses of everyday life. The relationship clearly promotes the growth of both partners.

81–90
Adapted
Relationships in this range are also functioning well, without evidence that the relationship is significantly stressful for either partner. Interactions within these relationships are frequently reciprocal and synchronous, without distress, and reasonably adaptive. At times parent and child may be in substantial conflict, but conflicts do not persist longer than a few days and are resolved with appropriate consideration of the child’s developmental status. The pattern of the relationship protects and promotes the developmental progress of both partners.

71–80
Perturbed
Some aspect of the overall functioning of relationships in this range is less than optimal; partners may experience transient distress lasting up to a few weeks. Nevertheless, the relationship remains characterized by adaptive flexibility. The disturbance is limited to one domain of functioning. Overall, the relationship still functions reasonably well and does not impede developmental progress.

Example: An infant with a minor physical illness sleeps poorly for several nights, exhausting his parents; or parents moving into a new house are less attentive to their infant, who is less able to self-regulate in the unfamiliar new surroundings.

61–70
Significantly Perturbed
Relationships in this range of functioning are strained but still largely adequate and satisfying to the partners. Conflicts are limited to one or two problematic areas. Partners may experience distress and difficulty for a month or more. The relationship maintains adaptive flexibility, as parent and child seem likely to negotiate the challenge to their relationship successfully. A parent may be stressed by the perturbation, but is not generally overconcerned about the changed relationship pattern, considering it within the range of expectable, relatively short-lived difficult periods in a lifelong relationship.

Example: Following the birth of a new sibling, a toddler develops new-onset food refusal and a sleep disturbance that lasts more than a month.

51–60
Distressed
Relationships in this range of functioning are more than transiently affected as one or both partners experience distress in the context of their relationship. Parent and child maintain some flexibility and adaptive qualities, but conflict may spread across multiple domains of functioning, and resolution is difficult. The developmental progress of the dyad seems likely to falter if the pattern does not improve. Caregivers may or may not be concerned about the disturbed relationship pattern. Neither parent nor child is likely to show overt symptoms resulting from the disturbance.

Example: A child expresses distress and oppositionality during toilet training and feeding. Her mother is increasingly worried about her ability to engage her daughter in these activities in growth-promoting ways.
**Disturbed**

The adaptive qualities of a disturbed relationship are beginning to be overshadowed by problematic features. Although not deeply entrenched, dysfunctional patterns appear more than transient. Developmental progress can still proceed, but may be temporarily interrupted.

*Example: A parent and child engage in excessive teasing and power struggles during feeding, dressing, and bedtime. Although parent and child attempt pleasurable interactions, their teasing often goes too far, leaving one or both partners distressed.*

**Disordered**

Rigidly maladaptive interactions, particularly if they involve distress in one or both partners, are the hallmark of disordered relationships. Most interactions between partners are conflicted; some relationships without overt conflicts may nevertheless be grossly inappropriate developmentally. Developmental progress of the child and the parent–child relationship is likely to be influenced adversely.

*Example: A depressed parent repeatedly seeks comfort from her infant, actively recruiting caregiving behavior from the child. The child’s engagement in exploratory play is limited.*

**Severely Disordered**

Relationships in this range of functioning are severely compromised. Both partners are significantly distressed by the relationship itself. Maladaptive interactive patterns are rigidly entrenched. To an observer, interactive patterns seem to have been in place for a long time, although the onset may have been insidious. In a severely disordered relationship, a significant proportion of interactions are likely to be conflicted. Developmental progress of the child and the relationship is clearly influenced adversely. Indeed, the child may lose previously acquired developmental skills.

*Example: A father and his toddler frequently interact in a conflicted manner. The father sets no limits until he becomes enraged. Then he spanks the toddler vigorously. The toddler is provocative, and the father feels angry with him all the time.*

**Grossly Impaired**

Relationships in this range of functioning are dangerously disorganized. Interactions are disturbed so frequently that the infant is in imminent danger of physical harm.

**Documented Maltreatment**

The relationship contains documented neglect and physical or sexual abuse that is adversely affecting the child’s physical and emotional development.