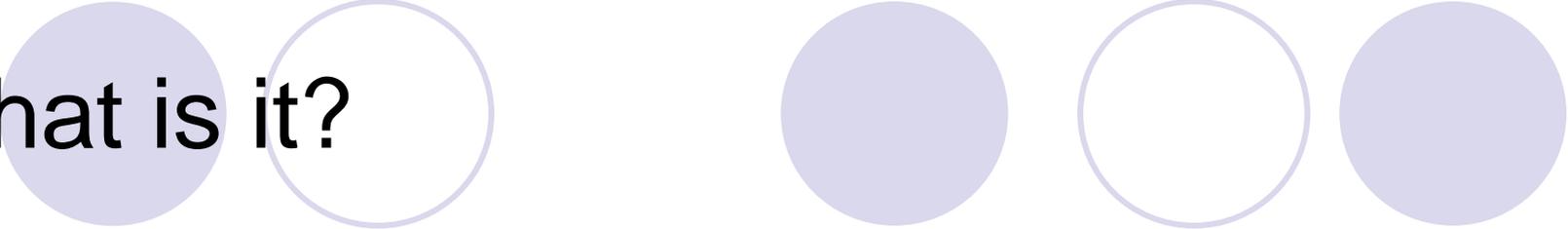


Reactive Attachment Disorder (RAD)



Presented By
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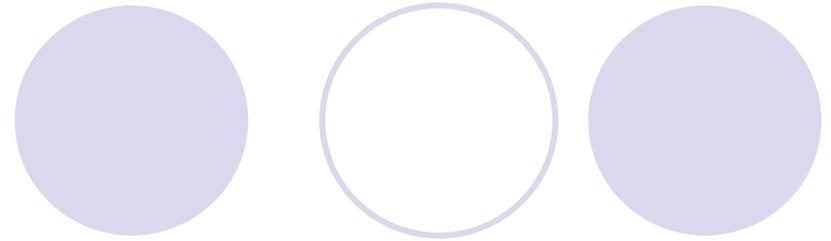
What is it?

- Serious emotional, behavioral, relational disturbance
- clinically recognized form of severe insecure attachment
- children with RAD may have no interest in pleasing their parents/caregivers

Definitions

- DSM (***Please See Handout***)
 - Reactive attachment disorder (RAD), as defined by the [American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition \(DSM-IV\)*](#), requires etiologic factors, such as gross deprivation of care or successive multiple caregivers, for diagnosis.
 - Inhibited and Disinhibited type
- Children with this [mental disorder](#), associated with care that is "grossly pathological," fail to relate socially either by exhibiting markedly inhibited behavior or by indiscriminate social behavior.

Attachment cont.



- Attachment is an interactive process.
- Attachment is a nonverbal process.
- Causes of attachment disorders

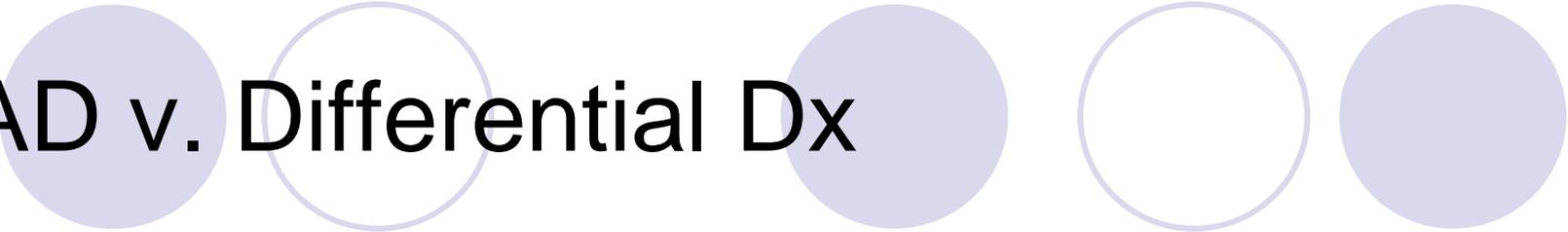
History of development

- **Dr. Harry Harlow and Rhesus Monkeys**
- **Mary Ainsworth's work on Attachment**
 - Three distinct attachment categories (original studies on Mother but can be used with caregiver)
 - Secure Attachment = Stays close to caregiver, moderate distress when separated, and is happy when caregiver returns
 - Avoidant = does not seek contact with caregiver and does not cry when she leaves
 - Anxious/ambivalent = upset when caregiver leaves and angry when she returns
 - Basically comes down to does the child exhibit secure or insecure attachments

Why is it important?

- The attachment styles that develop in childhood stay with us for a lifetime, unless amended and changed by therapeutic intervention. These styles influence our feelings of security, the personal meaning given to our experiences, and the ability to develop and maintain intimacy with others.
 - This is why it is often used to keep kids where they are versus changing custodians

RAD v. Differential Dx



- How might RAD be used/misused?
 - Being applied beyond scope of DSM definition and/or intent
 - Are other characteristics evidenced with RAD Dx: hoarding food, lying, stealing, sexually inappropriate behavior
 - What does the current research say about the frequency of Attachment Disorders?

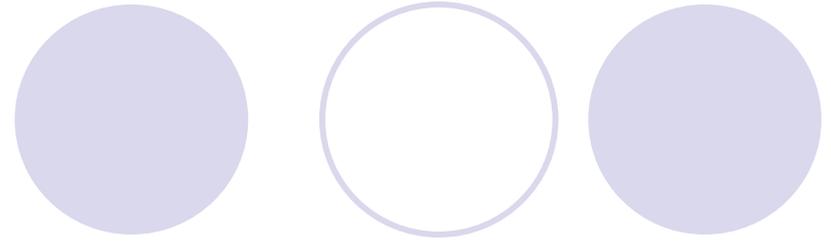
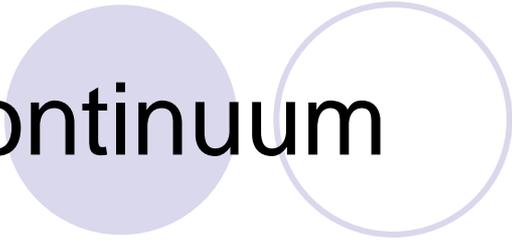
Continuum

- Increases in symptom severity

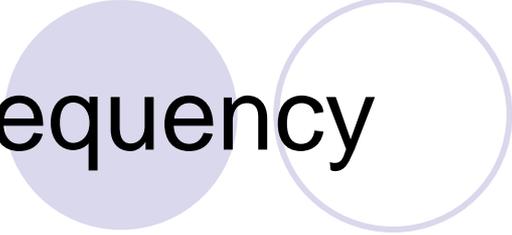
Adjustment
Disorder

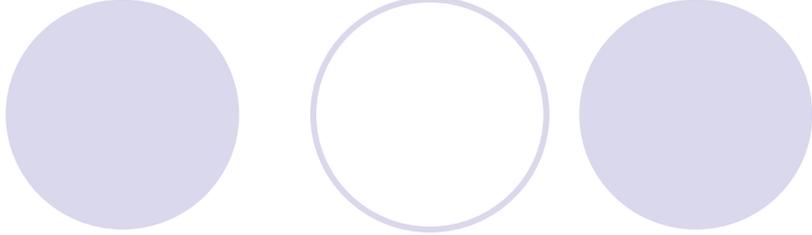
Attachment
Issues or concerns

RAD

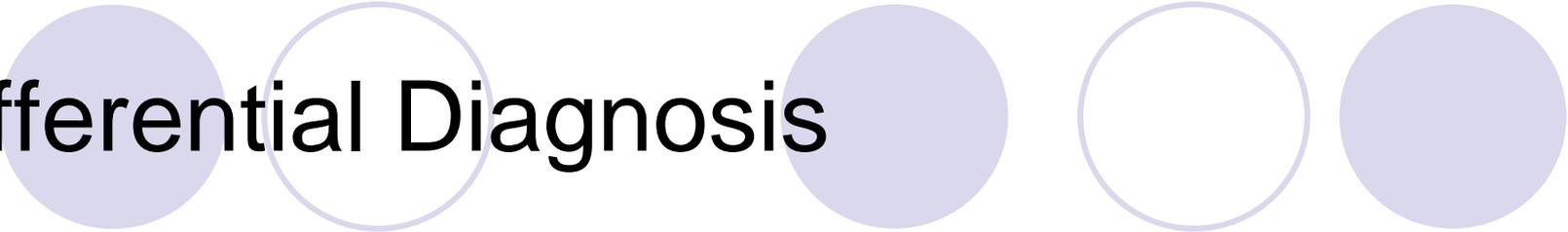


Frequency



- In the US
 - Internationally
 - Race
 - Sex
 - Age
 - Criteria specify the cause (pathogenic care)
- 

Differential Diagnosis



- Could be another type of disorder (ADD/ADHD, Disruptive behavior D/O NOS, MR, Autistic, Pervasive developmental disorder (PDD), Relational Problem, Conduct D/O, Oppositional defiant, Adjustment D/O...)



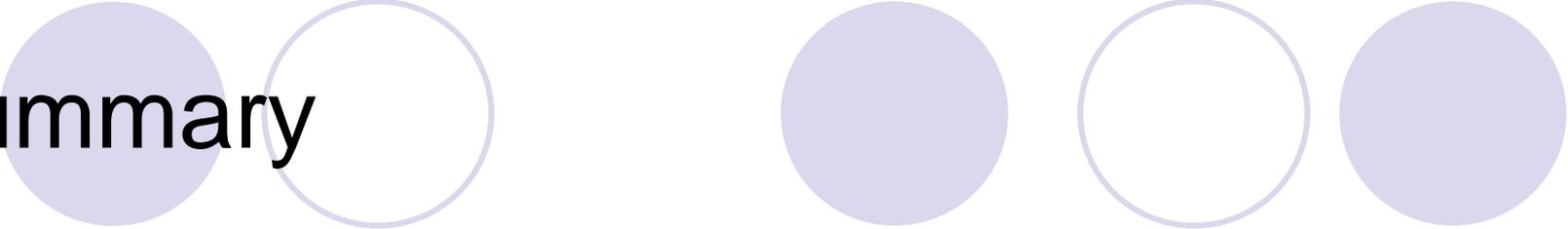
So, do the fact of your case support...

- Markedly disturbed and developmentally inappropriate behavior
- Begins before 5 y.o.
- Associated with grossly pathological care
- Persistent and repeated failure to act in developmentally appropriate ways in most social interactions

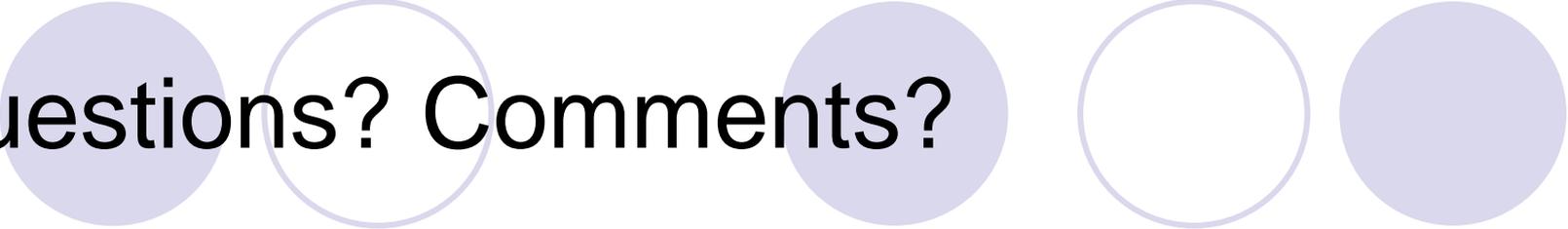
What do you do now?

- Reunification= help or hinder the diagnosis (e.g. the behavior)
 - Behavior of the child is observed and documented after the visit
 - What is the behavior of the child when he/she learns that a visit is going to occur?
- Get all ***medical/MH records***
 - Kids records
 - Court order needed?
- Gather information from ***collaterals/interviews***
- MH *assessment for client?*
- MH review of information allowed by the courts

Summary



- Facts of the case that prompted the attention legally
 - Hx
 - Current
 - How long is “current”
- Age of child(ren)
 - Hx behavior pre and post legal involvement
 - Behavior pre and post visit
 - Current behavior
- Definition of “minimal parenting”
- Tx plan? (What was it? Was it followed?)
- Definitions of various types of abuse and neglect (Federal definition, state definition)
- “Best interest of the child”
- Definition
- Put child’s needs before parent’s
- What does child want? (Age dependent)



Questions? Comments?

- Who can determine where on the continuum the elements of your case fall?