Reactive Attachment Disorder

Definition
The DSM-IV definition includes: markedly disturbed and developmentally inappropriate social relatedness in most contexts, beginning before age five, as evidenced by either:

1. **Inhibited Type**: persistent failure to initiate or respond in a developmentally appropriate fashion to most social interactions, as manifest by excessively inhibited, hypervigilant, or highly ambivalent and contradictory responses (e.g. responds to caregivers with approach, avoidance, and resistance to comforting, or frozen watchfulness); or
2. **Disinhibited Type**: diffuse attachments as manifest by indiscriminate sociability with marked inability to exhibit appropriate selective attachments (e.g. excessive familiarity with relative strangers or lack of selectability of attachment figures).

Characteristics
- Can be manipulative: superficially engaging 'charming' (being 'cute' is safe.
- Lack of eye contact on carers' terms.
- Indiscriminately affectionate with strangers.
- Lacking ability to give/receive affection (not cuddly), not affectionate on carers' terms
- Extreme control battles: often manifest in covert ways.
- Destructive to self, others, animals, material things – accident prone.
- Stealing/hoarding or gorging food, abnormal eating patterns.
- Preoccupation with fire, blood, gore.
- Lack of impulse control and cause and effect thinking (frequently hyperactive).
- Learning lags and speech disorders, abnormal speech patterns
- Poor peer relationships
- Persistent nonsense questions and incessant chatter
- Inappropriately demanding and clingy.

Causes
Cause relates to pathogenic care. Disorder evident in child before 5 years of age.

Patterns of Comorbidity
- Bipolar/depression.
- Oppositional Defiant Disorder
- Attention deficit/Hyperactivity disorder
- Conduct Disorder

Prognosis
Prognosis without treatment is extremely poor as most children continue with similar problems in adulthood.

Strategies
There needs to a range of interventions implemented:
- as early as possible;
- including a very structured behaviour management plan
- including all caregivers working as a team;
- consistently across all environments and time;
- for as long as needed

Ranges of approaches include the following.
- Inner Child Work
- Re-parenting
- Cognitive restructuring
- Cognitive/Behavioural Therapy
- Insight Oriented Therapy
- Supportive Psychotherapy
- Holding Therapy
- Psychodrama
- Sensory Integration
- Social Skills Building