**Reactive Attachment Disorder Writing Assignment**

Hannah Borstad

School of Social Work, Southern Adventist University

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Dr. Evie Nogales Baker

**Summary**

Reactive Attachment Disorder (RAD) is a disorder in children who have an abnormal inability to form healthy social connections. Children with RAD often exhibit severe behavioral problems and have difficulty socially. The DSM-5 criteria are patterns of emotional withdrawal, social issues, and “lack of having emotional needs for comfort … met by caregivers.” Children are diagnosed through observation of the child with caregivers and evaluation of behavior over time. The practitioner will ask questions about the child’s home life since birth and the caregiving they received. The practitioner will also rule out other mental health disorders that may appear like RAD. It is believed that children with RAD can form attachments, but their development has stunted this ability. Early intervention is essential for helping children move toward healing. The treatment goals are establishing safety and stability in the child’s life and creating positive interactions with parents and caregivers. Mental health professionals seek to improve the symptoms of RAD through nurturing, creating positive interactions for the child, establishing reliable caregivers, and meeting the needs of the child. Family counseling, educating caregivers, and classes for parents are also beneficial services for the child and family (Reactive attachment disorder, 2022).

The Mayo Clinic focuses on treatments related to the caregiver’s response to the child. As RAD can be an emotionally difficult diagnosis for the person caring for the child, caregivers need to educate themselves on the disorder and care for themselves as they seek to provide for their child. Caregivers are encouraged to discuss the disorder with their pediatrician or other health professionals and seek educational resources that provide insight into the condition of the child’s upbringing and how it impacts their behavior. They suggest finding people who can help support the caregiver and care for the child when they need a break. Stress management techniques are also helpful for parents. They need to recognize their own emotions and make time for self-care. The clinic strongly discourages the use of coercive techniques for the treatment of RAD. They have been proven to be dangerous and ineffective in treating children who are experiencing RAD symptoms. The most important aspect of treatment for children with RAD is educating the family and creating opportunities for developing healthy attachment with safe caregivers (Reactive attachment disorder, 2022).

**Application**

Though RAD is rare, it is not uncommon among the foster and adoptive community. As I wish to work in foster care, this information will be essential for my interactions with children and their families. I have already worked with several children who had RAD diagnoses. For these clients, we focused on creating effective treatment plans that included the support of their primary caregivers. We provided resources for caregivers and administered training for creating healthy attachment opportunities. We worked with the case managers, therapists, program director, and parents to formulate the best plans for supporting the child. I do not plan to pursue a clinical pathway in social work. Still, if I did, I would use the diagnostic tools available, such as the DSM-5, to evaluate the child for RAD and work with the parents to formulate a treatment plan that is centered around creating a healthy home environment that provides opportunities for developing attachment.

**Reference**

*Reactive attachment disorder*. (May 12, 2022). Mayo Clinic; Mayo Foundation for Medical Education and Research. Retrieved January 27, 2024, from https://www.mayoclinic.org/diseases-conditions/reactive-attachment-disorder/diagnosis-treatment/drc-20352945