

Reactive Attachment Disorder



Reactive attachment disorder is a mental health disorder in which infants and young children (usually before the age of 5) are unable to form healthy social relationships, particularly with a primary caregiver.

A child with reactive attachment disorder has typically experienced neglect, abuse, or has moved multiple times from one caregiver to another. As a result, the child may have major difficulties establishing loving and caring attachments with others, now and in the future.

There are two major subtypes for this disorder. Students with inhibited behaviour shun relationships and attachments to virtually everyone. Students with disinhibited behaviour seek attention from virtually everyone, including strangers. They may frequently ask for help, have inappropriately childish behaviour or appear anxious.

Implications for Planning and Awareness

- Meet with the parents early in the school year to discuss how the school staff can support this student's needs related to reactive attachment disorder. This could include:
 - understanding specific behaviours related to the disorder
 - sharing successful strategies used at home that could be used at school
 - developing a communication plan between home and school.
- If needed, collaborate with parents and mental health care professionals to develop a behaviour support plan to guide all school staff supporting this student.
- Collaborate with the parents to consider what specific information about their child they would like shared with other school staff.
- Learn as much as you can about how reactive attachment disorder may affect learning and social and emotional well-being. Reading, asking questions and talking to qualified mental health care professionals will build your understanding and help you make informed decisions to support the student's success in the classroom.

Your awareness needs to begin with conversations with the student's parents.

Implications for Instruction

- Teach and model simple problem-solving strategies. Use visual supports to help students remember the steps.
- Be sure the parents and school staff agree on and communicate about behaviour expectations; this may reduce miscommunication between home and school and all adults involved with this student.



- Make some rewards absolute and not contingent on anything. This effectively counteracts a student's perception that "nothing ever works for me." For example, students participate, barring any safety concerns, in a fun end-of-the-week activity regardless of their behaviour.
- Use natural opportunities to clearly point out the choices the student is making and use this discussion to help the student begin to recognize the consequences of their choices.
- Approach students with a matter-of-fact, firm, no nonsense, friendly tone of voice. Phrase directions as directions (e.g., "Do ...") versus questions (e.g., "Will you ...?").
- Provide clear, specific expectations for behaviour that the student can follow. Use visuals and charts to monitor progress during the day.

Implications for Social and Emotional Well-being

- Keep praise very concrete and specific and do not connect it to rewards.
- Use light-hearted humour to deflect students' attempts to be deliberately provocative or defiant.
- Children with reactive attachment disorder develop habits of dealing with the world in a way they believe will keep them safe. Help students use reframing to change their perception of situations that may typically cause anxiety.
- Be mindful of the tendency of these students to be "needy," and establish healthy adult-child boundaries by communicating expectations and providing encouragement.
- Students with reactive attachment disorder tend to live in the moment; therefore, they need adults to remind them of past successes to help them maintain more positive perspectives on the present.

Parents know their children well and can offer insights on how to support their social and emotional well-being. There is strength in collaborating on strategies that could be used at home, at school and in the community.



As you consider the implications for this mental health condition, think about the following questions:

1. Do I need further conversations with the parents to better understand this student's strengths and needs? Yes No
2. Do I need targeted professional learning?
If yes, what specific topics and strategies would I explore? Yes No
3. Is consultation with jurisdictional staff required?
If yes, what issues and questions would we explore? Yes No
4. Is consultation with external service providers required (e.g., Regional Educational Consulting Services, Student Health Partnership, Alberta Children's Hospital, Glenrose Hospital)?
If yes, what issues and questions would we explore? Yes No
5. Are further assessments required to assist with planning for this student?
If yes, what questions do I need answered? Yes No
6. Is service to the student from an external provider required? Yes No
If yes, what outcomes would be anticipated?
7. Is a wraparound referral required? Yes No
If yes, what issues and questions would we explore?

Links for further information:

Overview of Reactive Attachment Disorder for Teachers.
<https://www.attachment.org/wp-content/uploads/2014/01/Letter-to-Teachers.pdf>

Please note:

These websites are for information only and the user is responsible for evaluating the content and appropriate uses of the information.

