Attachment Disorders

Insecure Attachment and Reactive Attachment Disorder



When infants and young children have a loving caregiver consistently responding to their needs, they build a *secure attachment*. This lifelong bond affects growth, development, trust and the ability to build relationships. However, severely confusing, frightening and isolating emotional experiences early in life disrupts this bond, creating insecure attachment. In extreme circumstances, this can result in attachment disorders. Problems with attachment limit a child's ability to be emotionally present, flexible and able to communicate in ways that build satisfying and meaningful relationships. The earlier attachment disruptions are caught, the better. However, it is never too late to treat and repair attachment difficulties. With the right tools, and a healthy dose of time, patience and love, attachment repair can and does happen.

Insecurere attachment?

Attachment is the process of bonding between an infant's primary caretaker, usually the mother, and the infant. Infants are helpless from birth, and need consistent, loving responses to their needs for food, sleep and comfort. As the infant grows, so does the bond of trust with the primary caregiver. Secure attachment has a lifelong effect on growth, development, trust and relationships.

If a child is not provided this consistent, loving care, *insecure* attachments form. Children with insecure attachments have learned that the world is not a safe place. They don't have the experiences they need to feel confident in themselves and trust in others. Because attachment is a fundamental part of children's development that affects the growing brain, insecure attachment shows itself in many different ways. Children may have trouble with learning, may be aggressive and act out, be excessively clingy, have difficulty making friends, suffer anxiety or depression, or be developmentally delayed. In cases of severe deprivation, abuse or neglect, attachment disorders may form. Attachment disruptions and disorders often have similar symptoms of disorders such as ADHD or autism and may be misdiagnosed.

Causes of Insecure Attachment and Attachment Disorders

- The caregiver is unable to provide for the child. Sometimes, parents may love and intend the best for their children, but not know themselves how to provide the care the children need. They may have a history of abuse, depression, trauma or be overwhelmed by work and childcare responsibilities. A medical emergency may have occurred in the parent, making care very difficult. A death or trauma in the family can also have enormous impact.
- Abuse and neglect. If the primary caregiver is a source of pain and terror, as in physical or emotional abuse, a secure attachment cannot form. Parents who abuse alcohol and drugs may have a lowered threshold for violence and are at increased risk for neglecting their children.
- Constantly changing caregivers. Insecure attachment can also occur if the child has very little interaction with a primary caregiver, but instead has a succession of childcare providers that are not attuned to the child and do not stay in the child's life.
- Children in institutional care. Children in institutional care have not only lost their primary caregiver but may have lived in conditions where they cannot form a secure bond. Children in a succession of foster or group homes, or children adopted from overseas who have lived in orphanages, are at risk.
- Child illness or disability. Infants with long hospital stays, where they have been isolated and alone, are also at risk. Parents may also feel overwhelmed with an infant's needs if the infant is constantly sick and in pain, withdrawing or lashing out at the child because they don't know what to do.

Signs and symptoms of attachment disorders

Insecure attachments influence the developing brain, which leads to a variety of symptoms. Interactions with others, self-esteem, self-control, learning, and optimum mental and physical health are affected. Symptoms of insecure attachment may be similar to common developmental and mental problems including ADHD, spectrum autism, depression, and anxiety disorders.

Emotional	low self-esteem, needy, clingy or pseudo-independent behavior, inability to deal with
Problems	stress and adversity, depressed, unresponsive, resists comforting.

Physical	susceptibility to chronic illness, obsession with food – may hoard food, gorge, refuse to
problems	eat, eat strange things, may be developmentally delayed

Social Problems	lack of self-control, inability to develop and maintain friendships, alienation from parents, caregivers, and other authority figures, overly friendly and treating strangers like the primary caregiver, aggression and violence, difficulty with genuine trust, intimacy, and affection, lack of empathy, compassion and remorse, negative, hopeless, pessimistic view
	of self, family and society

Learning	behavioral problems at school; speech and language problems; incessant chatter and
problems	questions; difficulty learning

Insecure attachment patterns

Although the signs of insecure attachment are many, they are really the child's attempt to make sense out of an unpredictable world. Some symptoms of attachment disruption can be traced back to what the parent did not provide.

- Avoidant attachment. When a parent is emotionally unavailable, rejecting, or prematurely forcing independence, a child may become avoidantly attached. These children adapt by avoiding closeness and emotional connection. On the surface, this child may appear to be very independent, but their self reliance is a cover for insecurity. Avoidant children may have difficulty forming relationships, be aggressive and bully other children.
- Ambivalent attachment. An ambivalently attached child experiences the parents' communication as inconsistent. Sometimes their needs are met, sometimes not, and sometimes the communication can be overly intrusive. Because these children cannot reliably depend on the parent for attunement and connection, they may be insecure and anxious. They may also display excessive clinginess and dependence, on the unconscious hope that their needs will be met some of the time.
- **Disorganized attachment.** Disorganized attachment occurs when the child's' need for emotional closeness remains unseen or ignored, and the parents behavior is a source of disorientation or terror. When children have experiences with parents that leave them overwhelmed, traumatized, and frightened, they become disorganized and chaotic. Coping mechanisms may include dissociation, withdrawal, extreme passivity or aggression in getting needs met.

Reactive Attachment Disorder (RAD)

Reactive Attachment Disorder (RAD) is a clinically recognized form of extreme insecure attachment. Common causes of RAD include severe child abuse and neglect. Children may have been removed from the home and placed in the foster care system. RAD also frequently occurs in internationally adopted children who were living in orphanages.

Signs and Symptoms of RAD

Children with RAD are so neurologically disrupted that they have extreme difficulty attaching to a primary caregiver, attaining normal developmental milestones or establishing normal relationships with other people. They show strong symptoms of attachment disruption. These children may be difficult or impossible to soothe, accepting comfort from no one, even the primary caregiver, and preferring to play alone. On the other hand, they may seem superficially friendly to everyone, inappropriately approaching and interacting with strangers as if they were the primary caregiver. What can be especially hard to bear for those who care for these children is that the child might not seem to be bonded to them at all, despite their attempts to show love and affection. Many of these children may be incorrectly diagnosed with severe emotional and behavioral disturbances ranging from bipolar disorder to depression. Families caring for children with RAD will benefit from treatment and therapeutic parenting skills. In time and with patience, even severe attachment disorders can be repaired.

Repairing insecure attachments and attachment disorders

Sadly, insecure attachment can be a vicious cycle. Due to problems with social relationships, insecurely attached children may become even more isolated and withdrawn from their primary caregivers, family and friends. They may be seen as "bratty" or "bullies", making it hard for them to form relationships that may mitigate the effects of insecure attachment. However, it is never too late to work on forming secure attachments. While the brain is most pliable in infancy and early childhood, it is responsive to changes all of our lives. Relationships with relatives, teachers and childcare providers can also supply an important source of connection and strength for a child's developing mind.

Here are some tips on repairing an insecure attachment:

- Learn what creates a secure attachment. Attachment is an interactive process that requires both verbal and nonverbal skills. Emotional intelligence is critical to building a secure attachment, since even verbal children are sensing our moods and watching everything we do. Every child is unique and will have different ways to be soothed.
- **Provide support for the primary caregiver.** The primary caregiver needs to be emotionally healthy, have adequate time, and the right skills to be attuned and responsive to the child's needs. In some cases, the caregiver may simply be overwhelmed, and help with household or work responsibilities allows them to focus. Other caregivers may need more help, such as parenting classes, alcohol or drug treatment, or therapy for mental disorders such as emotional trauma or depression.
- Help the child express his or her needs. Children with attachment problems will need extra help in learning to express their needs. They may have learned not to cry if in pain or frightened, for example, or not associate touch with being soothed. They may revert to developmentally inappropriate behaviors if stressed or scared. It might take extra creativity and diligence on the caregiver's part to help the child express needs safely and appropriately.
- Time, consistency and predictability is key. Problems in attachment result from problems with trust. By this very definition, repairing an attachment disruption takes time, consistency and patience. It will take time for a child to realize that they can trust and rely on their primary caregiver and other important people in their lives. Children with attachment disruptions may be more sensitive to life changes and situations like travel, returning to school or holidays. Caregivers should be aware and as attuned to this as possible, helping to keep a normal schedule during unpredictable times.

Conflict, boundaries, and repair in secure attachment

No matter how much we love our children, there comes a point where we are not in agreement with them, a point when we have to set limits, and say "no." This conflict temporally ruptures the relationship as the child angrily protests. Such protest is to be expected. The key to strengthening the attachment bond of trust is to be consistently available when the child is ready to reconnect. It is also important to initiate repair when we have done something to hurt, disrespect, or shame a child. Parents aren't perfect. From time to time, we are the cause of the disconnection. Again, our willingness to initiate repair can strengthen the attachment bond.

For children with insecure attachments and attachment disorders, this conflict can be especially disturbing and scary—for both the children and the primary caregiver. The child may overreact, having a wild tantrum, or rapidly withdraw. They may temporarily show developmentally regressive behaviors, like rocking or trouble with toileting. Don't be afraid to set limits and boundaries with insecurely attached children. Consistent, loving boundaries will help them develop the sense of trust they need that their caregiver will be with them through thick and thin. These children also need to learn that no matter what they do, they will be loved and respected.

Professional treatment

Children with severe attachment difficulties and their caregivers can benefit from professional treatment as well. Caregivers can learn tips and techniques for coping with their child and helping to repair the attachment. Therapists can help caregivers learn how their child communicates through play, for example, which allows many children to express feelings and desires they cannot verbalize. Attachment therapy should *never* be coercive or shaming to the child.

Adoptive and foster parents

Adoptive and foster parents open their hearts and homes to children who have sometimes been severely abused and neglected. These parents might not have expected the challenges that come with children with attachment difficulties. Even if these challenges are known, anger, lashing out and difficult behaviors can be frustrating and hard to handle. Remember that the child is not acting out because of lack of love for you. They are acting out because their brain development has actually progressed differently. Your stability in the child's life is giving him or her a tremendous chance to repair insecure attachments and have a much better start in life. Be sure to seek support from organizations and support groups that specialize in your situation, and don't be afraid to seek help for yourself if you are feeling overwhelmed and frustrated.