Reactive Attachment Disorder (RAD) and Other Attachment Issues

If you’re a parent of a child with symptoms of an attachment disorder, these tools and treatments can help you bond with your child and shape their future development.

What is reactive attachment disorder (RAD)?

Attachment is the deep connection established between your child and you, their primary caregiver, that profoundly affects your child’s development and their ability to express emotions and build meaningful relationships later in life. Attachment issues fall on a spectrum, from mild problems that are easily addressed to the most serious form, known as
reactive attachment disorder (RAD). Reactive attachment disorder is a condition in which your child is unable to establish healthy attachment with you, their parent or primary caretaker. This can lead to difficulty connecting with others and managing their emotions, resulting in a lack of trust and self-worth, a fear of getting close to anyone, anger, and a need to be in control. A child with an attachment disorder feels unsafe and alone.

Children with RAD have been so disrupted in early life that their future relationships are also impaired. They may experience difficulty relating to others and are often developmentally delayed. Reactive attachment disorder is common in children who have been abused, bounced around in foster care, lived in orphanages, or taken away from their primary caregiver after establishing a bond.

However, no matter how detached or insecure your child seems, or how frustrated or exhausted you feel from trying to connect, it is possible to repair an attachment disorder. With these tools—and a healthy dose of patience and love—you can bond with your child and help them develop healthy, meaningful, and loving relationships.

**Attachment disorder causes**

RAD and other attachment disorders occur when a child has been unable to consistently connect with a parent or primary caregiver. If a young child repeatedly feels abandoned, isolated, powerless, or uncared for—whatever the reason—they will learn that they can’t depend on others and that the world is a dangerous and frightening place.

This can happen for many reasons:

- A baby cries and no one responds or offers comfort.
- A baby is hungry or wet, and they aren’t attended to for hours.
- No one looks at, talks to, or smiles at the baby, so the baby feels alone.
- A young child gets attention only by acting out or displaying other extreme behaviors.
- A young child or baby is mistreated or abused.
- Sometimes the child’s needs are met and sometimes they aren’t. The child never knows what to expect.
- The infant or young child is hospitalized or separated from their parents.
- A baby or young child is moved from one caregiver to another (the result of adoption, foster care, or the loss of a parent, for example).
- The parent is emotionally unavailable because of depression, illness, or substance abuse.
Sometimes the circumstances that cause attachment problems are unavoidable, but the child is too young to understand what has happened and why. To a young child, it just feels like no one cares. They lose trust in others and the world becomes an unsafe place.

**Early warning signs of an attachment disorder**

Although it is never too late to treat and repair attachment issues, the earlier you spot the symptoms of insecure attachment and take steps to repair them, the better. Caught in infancy before they become more serious problems, attachment disorders are often easy to correct with the right help and support.

Signs and symptoms of attachment issues in your infant:

- Avoids eye contact
- Doesn’t smile
- Doesn’t reach out to be picked up
- Rejects your efforts to calm, soothe, and connect
- Doesn’t seem to notice or care when you leave them alone
- Cries inconsolably
- Doesn’t coo or make sounds
- Doesn’t follow you with their eyes
- Isn’t interested in playing interactive games or playing with toys
- Spends a lot of time rocking or comforting themselves

It’s important to note that the early symptoms of attachment disorders are similar to the early symptoms of other issues such as ADHD and autism. If you spot any of these warning signs, make an appointment with your pediatrician for a professional diagnosis of the problem.

**Comforting a crying baby**

It’s common to feel frustration, anxiety, and even anger when faced with a crying baby—especially if your baby wails for hours on end. In these situations, you need to remain calm and centered so you’ll be better able to figure out what’s going on with your child and how best to soothe their cries.
Signs and symptoms of reactive attachment disorder

Common signs and symptoms in young children include:

**An aversion to touch and physical affection.** Children with RAD often flinch, laugh, or even say “ouch” when touched. Rather than producing positive feelings, touch and affection are perceived as a threat.

**Control issues.** Most children with reactive attachment disorder go to great lengths to remain in control and avoid feeling helpless. They are often disobedient, defiant, and argumentative.

**Anger problems.** Anger may be expressed directly, in tantrums or acting out, or through manipulative, passive-aggressive behavior. Children with RAD may hide their anger in socially acceptable actions, like giving a high five that hurts or hugging someone too hard.

**Difficulty showing genuine care and affection.** For example, children with reactive attachment disorder may act inappropriately affectionate with strangers while displaying little or no affection towards their parents.

**An underdeveloped conscience.** Children with reactive attachment disorder may act like they don’t have a conscience and fail to show guilt, regret, or remorse after behaving badly.

Inhibited reactive attachment disorder vs. disinhibited reactive attachment disorder

As children with reactive attachment disorder grow older, they often develop either an inhibited or a disinhibited pattern of symptoms:

**Inhibited symptoms of RAD.** The child is extremely withdrawn, emotionally detached, and resistant to comforting. The child is aware of what’s going on around them—hypervigilant even—but doesn’t react or respond. They may push others away, ignore them, or even act out in aggression when others try to get close.

**Disinhibited symptoms of RAD.** The child doesn’t seem to prefer their parents over other people, even strangers. The child seeks comfort and attention from virtually anyone, without distinction. They are extremely dependent, act much younger than their age, and may appear chronically anxious.
Parenting a child with attachment issues

Parenting a child with insecure attachment or an attachment disorder can be exhausting, frustrating, and emotionally trying. It is hard to put your best parenting foot forward without the reassurance of a loving connection with your child. Sometimes you may wonder if your efforts are worth it, but be assured that they are. With time, patience, and concerted effort, attachment disorders can be repaired. The key is to remain calm, yet firm as you interact with your child. This will teach your child that they are safe and can trust you.

A child with an attachment disorder is already experiencing a great deal of stress, so it is imperative that you evaluate and manage your own stress levels before trying to help your child with theirs. HelpGuide’s free Emotional Intelligence Toolkit can teach you valuable skills for managing stress and dealing with overwhelming emotions, leaving you to focus on your child’s needs.

To help a child with attachment issues, it’s also important to:

**Have realistic expectations.** Helping your child may be a long road. Focus on making small steps forward and celebrate every sign of success.

**Stay patient.** The process may not be as rapid as you’d like, and you can expect bumps along the way. But by remaining patient and focusing on small improvements, you create an atmosphere of safety for your child.

**Foster a sense of humor.** Joy and laughter go a long way toward repairing attachment problems and energizing you even in the midst of hard work. Find at least a couple of people or activities that help you laugh and feel good.

**Take care of yourself.** Reduce other demands on your time, make time for yourself, and manage stress. Rest, good nutrition, and parenting breaks help you relax and recharge your batteries so you can give your attention to your child.

**Find support.** Rely on friends, family, community resources, and respite care (if available). Try to ask for help before you really need it to avoid getting stressed to breaking point. You may also want to consider joining a support group for parents.

**Stay positive and hopeful.** Be sensitive to the fact that children pick up on feelings. If they sense that you’re discouraged, it will be discouraging to them. When you are feeling down, turn to others for reassurance.
Parents of adopted or foster care children with reactive attachment disorder

When you adopted a child, you may not have been aware of an attachment disorder. Anger or unresponsiveness from your new child can be heartbreaking and difficult to understand. Try to remember that your adopted child isn’t acting out because of lack of love for you. Their experience hasn’t prepared them to bond with you, and they can’t yet recognize you as a source of love and comfort. Your efforts to love them will have an impact—it just may take some time.

Making a child with an attachment disorder feel secure

Safety is the core issue for children with attachment problems. They are distant and distrustful because they feel unsafe in the world. They keep their guard up to protect themselves, but it also prevents them from accepting love and support. So, before anything else, it is essential to build up your child’s sense of security. You can accomplish this by establishing clear expectations and rules of behavior, and by responding consistently so your child knows what to expect when they act a certain way and—even more importantly—knows that no matter what happens, you can be counted on.

Set limits and boundaries. Consistent, loving boundaries make the world seem more predictable and less scary to children with attachment issues. It’s important that they understand what behavior is expected of them, what is and isn’t acceptable, and the consequences if they disregard the rules. This also teaches them that they have more control over what happens to them than they think.

Take charge, yet remain calm when your child is upset or misbehaving. Remember that “bad” behavior means that your child doesn’t know how to handle what they’re feeling and needs your help. By staying calm, you show your child that the feeling is manageable. If they are being purposefully defiant, follow through with the pre-established consequences in a cool, matter-of-fact manner. But never discipline a child with an attachment disorder when you’re in an emotionally-charged state. This makes the child feel more unsafe and may even reinforce the bad behavior, since it’s clear that it pushes your buttons.

Be immediately available to reconnect following a conflict. Conflict can be especially disturbing for children with attachment disorders. After a conflict or tantrum where you’ve had to discipline your child, be ready to reconnect as soon as they’re ready. This reinforces your consistency and love, and will help your child develop a trust that you’ll be there through thick and thin.
Own up to mistakes and initiate repair. When you let frustration or anger get the best of you or you do something you realize is insensitive, quickly address the mistake. Your willingness to take responsibility and make amends can strengthen the attachment bond. Children with attachment issues need to learn that although you may not be perfect, they will be loved, no matter what.

Try to maintain predictable routines and schedules. A child with an attachment disorder won’t instinctively rely on loved ones, and may feel threatened by transition and inconsistency—when traveling or during school vacations, for example. A familiar routine or schedule can provide comfort during times of change.

Repairing attachment disorders by helping your child feel loved

A child who has not bonded early in life will have a hard time accepting love, especially physical expressions of love. But you can help them learn to accept your love with time, consistency, and repetition. Trust and security come from seeing loving actions, hearing reassuring words, and feeling comforted over and over again.

Identify actions that feel good to your child. If possible, show your child love through rocking, cuddling, and holding—attachment experiences they missed out on earlier. But always be respectful of what feels comfortable and good to your child. In cases of previous abuse, neglect, and trauma, you may have to go very slowly because your child may be very resistant to physical touch.

Respond to your child’s emotional age. Children with attachment disorders often act like younger children, both socially and emotionally. You may need to treat them as though they were much younger, using more non-verbal methods of soothing and comforting.

Help your child identify emotions and express their needs. Children with attachment problems may not know what they’re feeling or how to ask for what they need. Reinforce the idea that all feelings are okay and show them healthy ways to express their emotions.

Listen, talk, and play with your child. Carve out times when you’re able to give your child your full, focused attention in ways that feel comfortable to them. It may seem hard to drop everything, eliminate distractions, and just live in the moment, but spending quality time together provides a great opportunity for your child to open up to you and feel your focused attention and care.
Supporting the health of a child with attachment issues

Your child’s eating, sleep, and exercise habits are always important, but they’re even more so for kids with attachment problems. Healthy lifestyle habits can go a long way towards reducing your child’s stress levels and leveling out mood swings. When children with attachment issues are relaxed, well-rested, and feeling good, it will be much easier for them to handle life’s challenges.

**Diet.** Make sure your child **eats a healthy diet** full of whole grains, fruits, vegetables, and lean protein. Be sure to **skip the sugar** and add plenty of good fats—like fish, flax seed, avocados, and olive oil—for optimal brain health.

**Sleep.** If your child is tired during the day, it will be that much harder for them to focus on learning new things. Make their sleep schedule (bedtime and wake time) consistent.

**Exercise.** **Any type of physical activity** provides a great antidote to stress, frustration, and pent-up emotion, triggering endorphins to make your child feel good. Physical activity is especially important for an angry child. If your child isn’t naturally active, try some different classes or sports to find something that is appealing.

Any one of these things—food, rest, and exercise—can make the difference between a good and a bad day for a child who has an attachment disorder. These basics will help ensure that your child’s brain is healthy and ready to connect.

**Professional treatment**

If your child is suffering from a severe attachment problem, especially reactive attachment disorder, seek professional help. Extra support can make a dramatic and positive change in your child’s life, and the earlier you seek help, the better. Start by consulting with your pediatrician, a child development specialist, or an organization that specializes in child development or RAD.

Treatment for reactive attachment disorder usually involves a combination of therapy, counseling, and parenting education, designed to ensure that the child has a safe living environment, develops positive interactions with caregivers, and improves peer relationships. While medication may be used to treat associated conditions, such as depression, anxiety, or hyperactivity, there is no quick fix. Your pediatrician may recommend a treatment plan that includes:
Family therapy. Typical therapy for attachment problems includes both the child and you, their parents or caregivers. Therapy often involves fun and rewarding activities that enhance the attachment bond as well as help parents and other children in the family understand the symptoms of the disorder and effective interventions.

Individual psychological counseling. Therapists may also meet with the child individually or while the parents observe. This is designed to help your child directly with monitoring emotions and behavior.

Play therapy. Helps your child learn appropriate skills for interacting with peers and handling other social situations.

Special education services. Specifically designed programs within your child’s school can help them learn skills required for academic and social success, while also addressing behavioral and emotional difficulties.

Parenting skills classes. Education for parents and caregivers centers on learning about attachment disorders as well as other necessary parenting skills.

Get more help

Reactive Attachment Disorder Fact Sheet (PDF) – For parents, teachers, and educators. (Minnesota Association for Children’s Mental Health)

Childhood Attachment Disruption/Disorder: A Symptom Checklist (PDF) – Checklist of symptoms and risk factors of childhood attachment disorders. (Michigan State University School of Social Work)

Bonding and Attachment in Maltreated Children: Consequences of Emotional Neglect in Childhood – Tips on nurturing children with insecure attachments. (Scholastic.com)

Overview of Early Intervention – How to get help for your child. (Center for Parent Information and Resources)

Hotlines and support

In the U.S.: ZERO TO THREE offers resources and support at (202) 638-1144, or find
Services in Your State for Infants and Toddlers for your baby or toddler with developmental delays. (Center for Parent Information and Resources)

In the UK: Call the Young Minds helpline for parents at 0808-802-5544

In Canada: Attachment Association of Canada offers resources and support groups.

In Australia: Call the Early Childhood Australia helpline at 1800-356-900

Authors: Melinda Smith, M.A., Lawrence Robinson, Joanna Saisan, MSW, and Jeanne Segal, Ph.D. Last updated: December 2019.