Reactive Attachment Disorder (RAD) is a complex psychiatric illness that can affect young children. It is characterized by serious problems in emotional attachments to others. RAD usually presents by age 5, but a parent, caregiver or physician may notice that a child has problems with emotional attachment by their first birthday. Often, a parent brings an infant or very young child to the doctor with one or more of the following concerns:

- severe colic and/or feeding difficulties
- failure to gain weight
- detached and unresponsive behavior
- difficulty being comforted
- preoccupied and/or defiant behavior
- inhibition or hesitancy in social interactions
- disinhibition or inappropriate familiarity or closeness with strangers.

The physical, emotional and social problems associated with RAD may persist as the child grows older.

Most children with Reactive Attachment Disorder have had severe problems or disruptions in their early relationships. Many have been physically or emotionally abused or neglected. Some have experienced inadequate care in an institutional setting or other out-of-home placement such as a hospital, residential program, foster care or orphanage. Others have had multiple or traumatic losses or changes in their primary caregiver. The exact cause of Reactive Attachment Disorder is not known although research suggests that inadequate care-giving is a possible cause.

Children who exhibit signs of Reactive Attachment Disorder need a comprehensive psychiatric assessment and individualized treatment plan. These signs or symptoms may also be found in other psychiatric disorders. A child should never be given this label or diagnosis without a comprehensive evaluation.

Treatment of this complex disorder involves both the child and the family. Therapists focus on understanding and strengthening the relationship between a child and his or her primary care givers. Without treatment, this condition can affect permanently a child's social and emotional development. However, unconventional and forced treatments such as "rebirth" strategies are potentially dangerous and should be avoided.

Parents of a young child who shows signs or symptoms of Reactive Attachment Disorder should:
Reactive Attachment Disorder is a serious clinical condition. Fortunately, it is relatively rare. Evaluating and treating children with complex child psychiatric disorders such as Reactive Attachment Disorder is challenging. There are no simple solutions or magic answers. However, close and ongoing collaboration between the child's family and the treatment team will increase the likelihood of a successful outcome.

For additional information see: *Facts for Families:*
- #5 Child Abuse: The Hidden Bruises
- #7 Children Who Won't Go to School
- #15 The Adopted Child
- #47 Anxious Child
- #52 Comprehensive Psychiatric Evaluation
- #64 Foster Care

If you find *Facts for Families* helpful and would like to make good mental health a reality, consider donating to the *Campaign for America's Kids.* Your support will help us continue to produce and distribute Facts for Families, as well as other vital mental health information, free of charge.

You may also mail in your contribution. Please make checks payable to the AACAP and send to *Campaign for America's Kids*, P.O. Box 96106, Washington, DC 20090.

The American Academy of Child and Adolescent Psychiatry (AACAP) represents over 8,500 child and adolescent psychiatrists who are physicians with at least five years of additional training beyond medical school in general (adult) and child and adolescent psychiatry.

*Facts for Families*© information sheets are developed, owned and distributed by AACAP. Hard copies of *Facts* sheets may be reproduced for personal or educational use without written permission, but cannot be included in material presented for sale or profit. All *Facts* can be viewed and printed from the AACAP website (www.aacap.org). *Facts* sheets may not be reproduced, duplicated or posted on any other website without written consent from AACAP. Organizations are permitted to create links to AACAP’s website and specific *Facts* sheets. For all questions please contact the AACAP Communications & Marketing Coordinator, ext. 154.

If you need immediate assistance, please dial 911.

*Copyright © 2012 by the American Academy of Child and Adolescent Psychiatry.*