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Division of Child and Adolescent Psychiatry

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Attachment Disorders

TCHATT

**(Texas Child Health Through
Telemedicine)**



What is Attachment Theory?



- Attachment theory focuses on the early influences on the emotional development of a child and attempts to explain the development of and changes in strong emotional attachments between individuals throughout the life cycle.
- Psychiatrist, John Bowlby hypothesized that the attachment system serves as a survival function for the child, and is activated after birth in relation to specific attachment figures.
- Bowlby also explains how a young child seeks closeness, safety, protection, and security in proximity to their parental figure.



Common Signs of an Attachment Disorder

- Lack of eye contact
- Problems expressing anger
- Need for control
- Episodes of unexplained irritability, sadness, or fearfulness that are evident even during nonthreatening interactions with adult caregivers.
- Difficulty showing affection
- Seeks attention from strangers
- Difficulty showing remorse after mal-behaviors
- Anxiety
- Avoid interaction with peers





Types of Attachment Disorders Your Student May Experience Per DSM V

- **Reactive Attachment Disorder**
- A consisted pattern of inhibited, emotionally withdrawn behavior toward adult caregivers.
 - Rarely or minimally seeks comfort when distressed
 - Rarely or minimally responds to comfort when distressed
- A persistent social and emotional disturbance.
- The child has experienced a pattern of extremes of insufficient care (neglect, repeated changes of primary caregivers)
- Insufficient care is presumed responsible for the disturbed behaviors.
- The criteria are not met for Autism Spectrum Disorder.



Types of Attachment Disorders Your Student May Experience Per DSM V

- **Disinhibited Social Engagement Disorder**
- Pattern of behavior in which child actively approaches and interacts with unfamiliar adults and exhibits two of the following:
 - Reduced or absent reticence in approaching and interacting with unfamiliar adults.
 - Overly familiar verbal or physical behavior that is not consistent with culturally sanctioned with age-appropriate social boundaries.
 - Diminished or absent checking back with adult caregiver after venturing away, even in unfamiliar settings.
- The behaviors above are not limited to impulsivity (ADHS), but include socially disinhibited behavior.
- The child has experienced a pattern of extremes of insufficient care as evidenced by at least one of the following :
 - Social neglect or deprivation (lack of having basic emotional needs for comfort, stimulation, and affection met by caregiving adults)
 - Repeated changes of primary caregivers that limit opportunities to form stable attachments
 - Rearing in unusual settings



How Can Teachers Help Students with Attachment Issues?

- If you suspect your student having attachment issues please refer them to their school counselor for TCHATT referral/treatment.
- Avoid the use of punishment and use restitution. Ex: If a child breaks something, the child should try to repair it.
- Acknowledge then when they ask/answer a question and provide praise for those positive behaviors.
- Guide students on how to develop boundaries (See Setting Boundaries Presentation).
- Provide the love and support they might not have received, but be aware they will still need time and space to accept your support.





Treatment

- Counseling sessions with an LPC or LMFT.
 - Types of treatments include Play Therapy, Attachment-Based Therapy, Family Therapy, Cognitive Behavioral Therapy, Dialectical Behavior Therapy.
 - Psychiatric Services



Resources

- [Attachment Disorder Network: Strategies for Children with Reactive Attachment Disorder](#)
- American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders: Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. Arlington, VA: American Psychiatric Association, 2013.



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Questions