

Reactive attachment disorder (RAD)

Prepare Questions About Attachment Care

Parents and caregivers with a qualified child clinician | 10 to 15 minutes

Concerns about a child's connection with caregivers can have different explanations. A qualified professional needs a careful assessment rather than a worksheet label. Use this page to describe observations, share what helps the child feel comfortable, and ask how a proposed care plan protects their safety and dignity.

Use specific observations, avoid testing attachment, and bring questions to a qualified child mental-health professional.

Describe without proving a label

Record a recent interaction and the child's response without assigning motives. Include comfort preferences, communication needs, changes in caregiving, and supports that helped. Adoption, foster care, or reluctance to hug does not by itself establish an attachment disorder.

Ask about the care approach

Ask how the clinician will assess alternative explanations and involve caregivers appropriately. A care plan should not require forced holding, forced affection, deprivation, or rebirthing. Ask what choices the child has and how distress or unwanted effects will be addressed.

1. What specific interaction or concern do I want the clinician to understand?**2. What helps the child feel comfortable, and what do they resist or avoid?****3. What assessment and alternative explanations should we discuss?****4. How will the proposed support protect safety, choice, and caregiver follow-through?****Clinical use and adaptation**

RAD requires specialist assessment and individualized care; do not diagnose from adoption history or a single behavior. Avoid coercive attachment interventions, forced eye contact or affection, and speculative trauma narratives. Address safeguarding needs first. This sheet is caregiver preparation, not child treatment or an attachment test.