

Attachment difficulties in children and young people overview

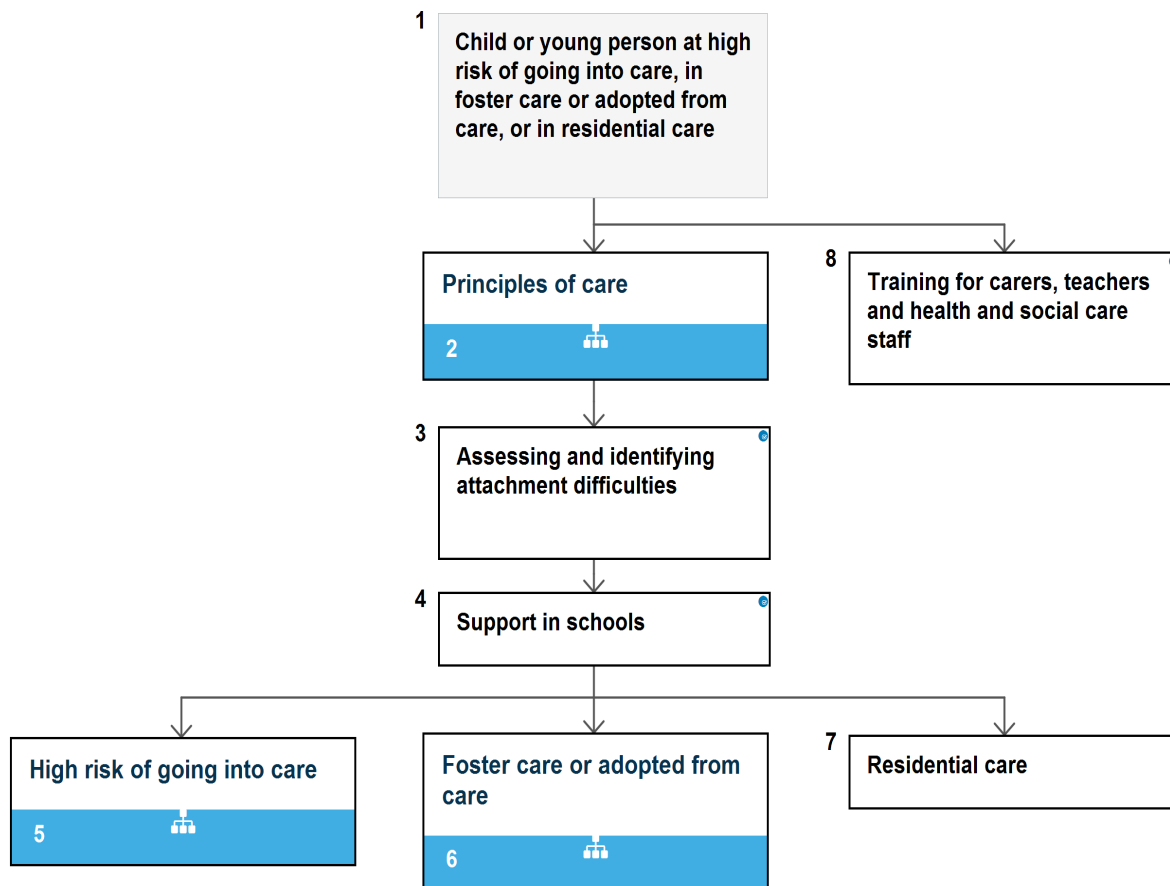
NICE Pathways bring together all NICE guidance, quality standards and other NICE information on a specific topic.

NICE Pathways are interactive and designed to be used online. They are updated regularly as new NICE guidance is published. To view the latest version of this pathway see:

<http://pathways.nice.org.uk/pathways/attachment-difficulties-in-children-and-young-people>

Pathway last updated: 11 November 2016

This document contains a single pathway diagram and uses numbering to link the boxes to the associated recommendations.



1 Child or young person at high risk of going into care, in foster care or adopted from care, or in residential care

No additional information

2 Principles of care

[See Attachment difficulties in children and young people / Attachment difficulties: principles of care](#)

3 Assessing and identifying attachment difficulties

Health and social care professionals should offer a child or young person who may have attachment difficulties, and their parents or carers, a comprehensive assessment before any intervention, including:

- personal factors, including the child or young person's attachment pattern and relationships
- factors associated with the child or young person's placement, such as history of placement changes, access to respite and trusted relationships within the care system or school
- the child or young person's educational experience and attainment
- parental sensitivity
- parental factors, including conflict between parents (such as domestic violence and abuse), parental drug and alcohol misuse or mental health problems, and parents' and carers' experiences of maltreatment and trauma in their own childhood
- the child or young person's experience of maltreatment or trauma (see also the NICE pathway on [when to suspect child maltreatment](#))
- the child or young person's physical health
- coexisting mental health problems and neurodevelopmental conditions commonly associated with attachment difficulties, including antisocial behaviour and conduct disorders, attention deficit hyperactivity disorder, autism, anxiety disorders (especially post-traumatic stress disorder), depression, alcohol misuse and emotional dysregulation.

Consider using the following assessment tools to guide decisions on interventions for children and young people who have or may have attachment difficulties:

- Strange Situation Procedure for children aged 1–2 years

- modified versions of the Strange Situation Procedure for children aged 2–4 years (either the Cassidy Marvin Preschool Attachment Coding System or the Preschool Assessment of Attachment)
- Attachment Q-sort for children aged 1–4 years
- Manchester Child Attachment Story Task, McArthur Story Stem Battery and Story Stem Attachment Profile for children aged 4–7 years
- Child Attachment Interview for children and young people aged 7–15 years
- Adult Attachment Interview for young people (aged 15 years and over) and their parents or carers.

See additional information about these [assessment tools](#) [See page 9].

Health and social care provider organisations should ensure that health and social care professionals are skilled in the use of these assessment tools.

Only diagnose an attachment disorder if a child or young person has attachment difficulties that meet diagnostic criteria as defined in DSM-5 (see information on reactive attachment disorder and disinhibited social engagement disorder in [DSM-5](#)) or ICD-10 (see information on reactive attachment disorder and disinhibited attachment disorder in [ICD-10](#)).

Do not offer genetic screening (including measuring gene polymorphisms) in children and young people to predict or identify attachment difficulties.

NICE has produced a pathway on [harmful sexual behaviour among children and young people](#).

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

1. Comprehensive assessment

4 Support in schools

Staff in schools and other education settings and health and social care professionals should work together to ensure that children and young people with attachment difficulties:

- can access mental health services for children and young people and education psychology services for interventions
- are supported at school while they are taking part in interventions following advice from mental health services children and young people and education psychology services.

When providing support for interventions in schools and education settings, staff should:

- be aware of the possibility of stigma, bullying and labelling as a result of any absences from school
- take into account the child or young person's preferences for the setting of the intervention.

Schools and other education providers should ensure that the designated teacher:

- is aware of and keeps accurate and comprehensive records about all children and young people in their school who:
 - are in the care system
 - have been adopted or subject to special guardianship orders
 - have or may have attachment difficulties
- has contact details for the parents, carers and health and social care professionals for all the above groups
- maintains an up-to-date plan (a personal education plan for children and young people in the care system) setting out how they will be supported in school
- provides a key person who can advocate for the child or young person and to whom the child or young person can go for support.
- allocates a safe place in school, for example a room where a child or young person can go if there are distressed
- attends looked-after children reviews
- maintains an effective referral system with other agencies.

Social care professionals, schools and other education providers should ensure that changes or gaps in the education of children and young people in the care system are avoided by:

- helping them to keep attending school when there are changes to their placements
- supporting them while they develop new relationships and if they are worried about the new placement.

If a change is unavoidable, it should be planned in advance so that disruption is minimal.

Schools and other education providers should avoid using permanent and fixed-term school exclusion as far as possible for children and young people with identified attachment difficulties.

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

2. Education plan

5 High risk of going into care

See Attachment difficulties in children and young people / Attachment difficulties: children and young people at high risk of going into care

6 Foster care or adopted from care

See Attachment difficulties in children and young people / Attachment difficulties: children and young people in foster care or adopted from care

7 Residential care

Interventions for attachment difficulties

Professionals with expertise in attachment difficulties should:

- work with the residential staff group and identify any key attachment figures to work specifically with the child or young people in residential care
- offer parental sensitivity and behaviour training adapted for professional carers in residential care.

Ensure parental sensitivity and behaviour training for professional carers:

- first consists of a single session with the carers followed by at least 5 (and up to 15) weekly or fortnightly carer–child sessions (lasting 60 minutes) over 6 months
- is delivered by a trained health or social care professional
- includes:
 - coaching the residential carers in behavioural management (for children aged 0–18 months) and limit setting
 - reinforcing sensitive responsiveness
 - ways to improve caring quality
 - homework to practise applying new skills.

Modify interventions for young people in residential care when needed to allow for:

- physical and sexual development
- transition to adolescence

- re-awakening of emotions about their birth parents or original family.

Take into account that these factors can complicate therapeutic interventions and relationships with professional carers. Discuss making contact with their birth parents or original family sensitively.

8 Training

Carers

Consider comprehensive education and training for potential carers to prepare them for the challenges involved in looking after children and young people with attachment difficulties and the likely impact on them and their families.

Teachers

Schools and other education providers should ensure that all staff who may come into contact with children and young people with attachment difficulties receive appropriate training on attachment difficulties as set out below.

Educational psychologists and health and social care provider organisations should work with local authority virtual school heads and designated teachers to develop and provide training courses for teachers of all levels on:

- how attachment difficulties begin and how they can present in children and young people
- how attachment difficulties affect learning, education and social development
- understanding the consequences of maltreatment, including trauma
- how they can support children and young people with attachment difficulties.

Children and young people with attachment difficulties, and their parents or carers, should be involved in the design of the training courses, wherever possible.

Schools and other education providers should ensure that the designated teacher:

- has had specialist training
 - to recognise and understand attachment difficulties and mental health problems
 - in data protection and confidentiality.

Health and social care staff

Health and social care provider organisations should train key workers, social care workers, personal advisers and post-adoption support social workers in the care system, as well as workers involved with children and young people on the edge of care, in:

- recognising and assessing attachment difficulties and parenting quality, including parental sensitivity
- recognising and assessing multiple socio-economic factors (for example, low income, single or teenage parents) that together are associated with an increased risk of attachment difficulties
- recognising and assessing other difficulties, including coexisting mental health problems and the consequences of maltreatment, including trauma
- knowing when and how to refer for evidence-based interventions for attachment difficulties (see [children and young people at high risk of going into care](#), [children and young people in `foster` care and adopted from care](#) and [children and young people in residential care](#) [See [page 6](#)] in this pathway).

Quality standards

The following quality statement is relevant to this part of the interactive flowchart.

2. Education plan

Assessment tools to guide decisions on interventions for children and young people who have or may have attachment difficulties

Tool	Setting	Format	Age (years)	Classification	
				Insecure attachment	Disorganised attachment
Strange Situation Procedure	Clinic	Observation	1–2	Y	Y
Cassidy–Marvin Preschool Attachment Coding System	Clinic	Observation	2–4	Y	Y
Preschool Assessment of Attachment	Clinic	Observation	2–4	Y	Y
Attachment Q-sort	Home	Observation	1–4	Y	N
Manchester Child Attachment Story Task	Any setting	Interviewer-researcher/clinician	4–7	Y	Y
McArthur Story Stem	Any setting	Interviewer-researcher/clinician	4–7	Y	Y
Child Attachment Interview	Any setting	Interviewer-researcher/clinician	7–15	Y	Y

Adult Attachment Interview	Any setting	Interviewer-researcher/clinician	15+ and parents or carers	Y	Y
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Glossary

carer

a foster carer, residential carer, special guardian or kinship carer

carers

foster carers, residential carers, special guardians or kinship carers

care system

this covers all children and young people looked after by a local authority, including those subject to care orders under section 31 of the Children Act 1989 and those provided with accommodation under section 20

designated teacher

a teacher who must be appointed by the governing body of all maintained schools, as set out in the Children and Young Persons Act 2008, to promote the educational achievement of looked-after children. Academies, with their funding agreement with the Secretary of State, are also required to appoint a designated teacher for looked-after children

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DSM-5

Diagnostic and Statistical Manual of Mental Disorders, 5th edition

edge of care

this covers children and young people who are considered by social care workers to be at high risk of going into care (for example, because of maltreatment, parental mental health problems or parental substance misuse). This includes those currently living with their birth parents or original family (such as step-parents), and those adopted from care but who are at high risk of returning to care

foster

foster care is the placement of a child or young person with a foster carer, who may or may not be related to the child or young person. This might be an emergency, short-term or long-term placement in a private family home

ICD-10

International Statistical Classification of Diseases and Related Health Problems, 10th revision

kinship

kinship care is care provided by adults who have a relationship with or connection to the child or young person, including grandparents, siblings, aunts, uncles, godparents or step-grandparents. Kinship care includes children and young people living in an informal arrangement, looked after by the local authority and placed with kinship foster carers, or in an arrangement planned to lead to adoption by a relative or friend

looked after

a child is looked after by a local authority if they have been provided with accommodation for a continuous period of more than 24 hours (in the circumstances set out in sections 20 and 21 of the Children Act 1989), or placed in the care of a local authority by virtue of an order made under part 4 of the Act

maltreatment

physical, sexual or emotional abuse or neglect

parent

a birth parent, adoptive parent or step-parent who has parental responsibility for a child or young person

parents

birth parents, adoptive parents or step-parents who have parental responsibility for a child or young person

personal adviser

person who is responsible, as set out in Children (Leaving Care) (England) Regulations 2001, for making sure that children and young people receive care and support from appropriate services when they leave the care system. They provide advice and support to the child or young person, are involved in preparing a 'pathway plan' (covering health and development, education training and employment, contact with parents, wider family and friends and managing finances), and are responsible for keeping it up to date

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placement

a home environment, whether in a family or residential setting, which may be temporary or permanent for a child or young person who is either voluntarily, or by order of a court, looked after or placed with a view to adoption by a local authority

placements

home environments, whether in a family or residential setting, which may be temporary or permanent for a child or young person who is either voluntarily, or by order of a court, looked after or placed with a view to adoption by a local authority

residential care

care provided under the Children Act 1989 in a children's home run by a local authority, voluntary or private provider, where 1 or more children or young people are cared for by a team of employed staff

safeguarding

a multi-agency action to protect children from maltreatment, prevent the impairment of their health and development, ensure that they grow up in circumstances consistent with the provision of safe and effective care, and actively enable all children to have the best outcomes

special guardianship

under the Children Act 1989, amended by the Adoption and Children Act 2002, a legally secure placement for children and young people who cannot live with their birth parents that confers parental responsibility on the special guardian

virtual school heads

officers who must be appointed by local authorities, as set out in the Children and Families Act 2014, who ensure that the authority properly carries out its duty to promote the educational achievement of its looked-after children

Sources

[Children's attachment: attachment in children and young people who are adopted from care, in care or at high risk of going into care](#) (2015) NICE guideline NG26

Your responsibility

The guidance in this pathway represents the view of NICE, which was arrived at after careful consideration of the evidence available. Those working in the NHS, local authorities, the wider public, voluntary and community sectors and the private sector should take it into account when carrying out their professional, managerial or voluntary duties. Implementation of this guidance is the responsibility of local commissioners and/or providers. Commissioners and providers are reminded that it is their responsibility to implement the guidance, in their local context, in light of their duties to avoid unlawful discrimination and to have regard to promoting equality of

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