This search summary contains the results of a literature search undertaken by the Lincolnshire Knowledge and Resource Service librarians in; August 2013

All of the literature searches we complete are tailored to the specific needs of the individual requester.

If you would like this search re-run with a different focus, or updated to accommodate papers published since the search was completed, please let us know. This literature searching service is available to support public health / health and social care commissioning in Lincolnshire.

Alison Price  alison.price@lincolnshire.gov.uk
Janet Badcock  janet.badcock@lincolnshire.gov.uk

Lincolnshire Knowledge and Resource Service
Lexicon House, Stephenson Road
North Hykeham, Lincoln  LN6 3QU

Disclaimer
Every effort has been made to ensure that this information is accurate, up-to-date, and complete. However it is possible that it is not representative of the whole body of evidence available. No responsibility can be accepted for any action taken on the basis of this information. It is the responsibility of the requester to determine the accuracy, validity and interpretation of the search results.

All links from this resource are provided for information only. A link does not imply endorsement of that site and the Lincolnshire Knowledge and Resource Service does not accept responsibility for the information displayed there, or for the wording, content and accuracy of the information supplied which has been extracted in good faith from reputable sources.

“Google can bring you back 100,000 answers, a librarian can bring you back the right one.”
Neil Gaiman
“Google can bring you back 100,000 answers, a librarian can bring you back the right one.”

Neil Gaiman
Understanding attachment in abuse and neglect: implications for child development.
British Journal of School Nursing, 01 July 2013, vol./is. 8/6(290-295), 17522803
Obadina, Seye
Full Text: Available from EBSCOhost in British Journal of School Nursing

Prevalence of reactive attachment disorder in a deprived population.
The British Journal of Psychiatry, May 2013, vol./is. 202/5(342-346)
Minnis, Helen, Macmillan, Susan, Pritchett, Rachel, Young, David, Wallace, Brenda, Butcher, John, Sim, Fiona, Baynham, Katie, Davidson, Claire, Gillberg, Christopher
Abstract: Background: Reactive attachment disorder (RAD) is associated with early childhood maltreatment and has unknown population prevalence beyond infancy. Aims: To estimate RAD prevalence in a deprived population of children. Method: All 1646 children aged 6-8 years old in a deprived sector of an urban UK centre were screened for RAD symptoms. Parents of high and low scorers were interviewed using semi-structured interviews probing for psychopathology and individuals likely to have RAD were offered face-to-face assessment. Results: Questionnaire data were available from 92.8% of teachers and 65.8% of parents. Assessments were conducted with 50% of those invited and missing data were imputed based on the baseline data for the rest. We calculated that there would be 23 children with definite RAD diagnoses, suggesting that the prevalence of RAD in this population was 1.40% (95% CI 0.94-2.10). Conclusions: In this deprived general population, RAD was not rare.

Reactive attachment disorder following early maltreatment: Systematic evidence beyond the institution.
Journal of Abnormal Child Psychology, May 2013, vol./is. 41/4(571-581), 0091-0627;1573-2835
Kay, Catherine, Green, Jonathan
Abstract: Reactive Attachment Disorder (RAD) remains one of the least evidence-based areas of DSM and ICD nosology. Recent evidence from severely deprived institutional samples has informed review of RAD criteria for DSM-V; however, this data is not necessarily generalizable to expectable child environments in the developed world. We provide the first systematic study of this important syndrome in maltreated non-institutionalized adolescents from a high-income country. 153 high-risk adolescents in English out-of-home Looked After Care (LAC: mean age 174 months, SD 23, 52 % male) and 42 low-risk (LR) community controls (mean age 168 months, SD 18, 38 % male) were assessed for RAD behaviors. Data on maltreatment and care history were collected from social work reports and concurrent psychopathology from caregiver report. Triangulated data sources informed independent researcher ratings of adaptive functioning. LAC adolescents showed high prevalence of RAD behaviors. Factor analysis showed four symptom groups; Disinhibited Indiscriminate, Attention Seeking, Superficial Relationships and Unpredictability. RAD was associated with multiple maltreatment experience, earlier entry to care and increased rates of psychopathology. Superficial Relationships and Attention Seeking factors showed strong independent association with particularly pervasive functional impairment. Disinhibited RAD behaviors are identifiable with high prevalence in non-institutionalized high-risk adolescents. They are strongly associated with psychopathology and functional impairment. Retention of this subtype in DSM-V is supported. Findings on the inhibited subtype in adolescence are less persuasive. RAD behavior is a relevant marker of developmental impairment, has significant clinical implications and is deserving of further study within non-institutionalized risk populations.
Social use of language in children with reactive attachment disorder and autism spectrum disorders.
European Child & Adolescent Psychiatry, May 2012, vol./is. 21/5(267-76), 1018-8827;1435-165X
Sadiq FA, Slator L, Skuse D, Law J, Gillberg C, Minnis H

Abstract: Children with a diagnosis of reactive attachment disorder (RAD) appear to show difficulties in social understanding. We aimed to compare the pragmatic language functioning of children with (RAD) and autism spectrum disorder (ASD). Assessments were made in three groups of children aged 5-8 years, with verbal IQ estimates in the normal range: 35 with a RAD diagnosis, 52 with an ASD diagnosis and 39 with typical development. The Children's Communication Checklist (CCC) was used to compare their pragmatic language skills, and ADI-R algorithms were used to compare autistic symptomatology, according to parent report. According to the CCC, the RAD group demonstrated significant problems in their use of context, rapport and social relationships with a degree of severity equivalent to children in the ASD comparison group. More than 60% of the group with RAD met ADI-R clinical criteria on the Use of Language and Other Social Communication Skills subscale, 46% on the Reciprocal Social Interaction subscale, and 20% had significant repetitive and stereotyped behaviours. Children with RAD appear to be at least as impaired as children with ASD in certain domains of social relatedness, particularly in their pragmatic language skills.

Full Text: Available from European Child and Adolescent Psychiatry

Reactive attachment disorder and severe attachment disturbances.
O'Connor, Thomas G, Spagnola, Mary, Byrne, J. Gerard

Abstract: (from the chapter) Reactive attachment disorder (RAD) has been in the psychiatric nomenclature for more than a quarter of a century, appearing in the Diagnostic and Statistical Manual (DSM) (3rd ed.) in 1980. Its formulation in DSM-IV-TR (American Psychiatric Association, 2000) differs in some notable ways from the earlier diagnostic definition, but most of the central features remain. RAD is now a focus of considerable debate; there is a wide range of opinions about the disorder and its treatment among clinicians and scientists, social care professionals, and parents. Significantly, this debate has occurred and, by and large, continues to occur in the absence of very substantial progress in understanding the disorder or how it is best managed in clinical practice. Indeed, RAD has a dubious distinction of being a disorder about which there are probably more review papers than there are solid empirically based clinical studies. In short, the evidence base is quite limited and much of the existing clinical research assesses a phenotype that is far broader than the DSM-IV or International Classification of Diseases (ICD) (10th ed.) (World Health Organization, 1992) definition. Nevertheless, a chapter on evidence-based treatments for RAD is appropriate in this volume because there is substantial clinical scientific interest in RAD and there is an abiding need to differentiate which of the various treatments so far proposed have merit or promise. (PsycINFO Database Record (c) 2013 APA, all rights reserved)

Publication Type: Book, Edited Book
Discrimination between attention deficit hyperactivity disorder and reactive attachment disorder in school aged children.
Research in Developmental Disabilities, 2011, vol./is. 32/2(520-6)
Follan M, Anderson S, Huline-Dickens S, Lidstone E, Young D, Brown G, Minnis H
We aimed to determine whether it is possible to discriminate between children with attention deficit hyperactivity disorder (ADHD) and children with reactive attachment disorder (RAD) using standardized assessment tools for RAD. The study involved 107 children: 38 with a diagnosis of RAD and 30 with ADHD were recruited through community child and adolescent mental health services (CAMHS) and specialist ADHD clinics. In addition, 39 typically developing children were recruited through family practice. Clinicians were trained to use a standardized assessment package for RAD using a DVD with brief follow-up support. Discriminant function analysis was used to identify the items in the standardized assessment package that best discriminated between children with ADHD and children with RAD. Clinicians’ ratings of RAD symptoms were reliable, particularly when focusing on eight core DSM-IV symptoms of RAD. Certain parent-report symptoms were highly discriminatory between children with ADHD and children with RAD. These symptoms included “cuddliness with strangers” and “comfort-seeking with strangers”. A semi-structured interview with parents, observation of the child in the waiting room and teacher report of RAD symptoms aided diagnostic discrimination between the groups. Clinical diagnosis of RAD can be made reliably by clinicians, especially when focusing on eight core RAD symptoms. Clear discrimination can be made between children with RAD and children with ADHD.

Forty-four juvenile thieves revisited: from Bowlby to reactive attachment disorder.
Child: Care, Health & Development, 2010;36/5(639-645)
Follan M, Minnis H
Abstract: Background: John Bowlby’s work on attachment has had a major influence on practice in child and adolescent psychiatry and developed from observations Bowlby made in his clinical work. In a published case series of work with juvenile offenders, he provided a case description of the differing sets of problems that drove his interest. Clinical features described in a subgroup of these offenders, the ‘affectionless psychopaths’, might be recognized now as reactive attachment disorder (RAD). Methods: We scrutinized Bowlby’s case series ‘44 Juvenile Thieves’ and compared the aetiology and clinical features of a subgroup of these children with the other 74 cases described by Bowlby. We selected one typical case as an exemplar and provide an edited version here. We then present one composite case from a recent study of RAD and provide a comparison with typically developing children. Results: Of the Bowlby cases, 86% had experienced early prolonged separation from their primary caregivers and had experienced multiple care placements. In total, 10% of clinical comparisons had been similarly separated. In our recent sample, 66% of children experienced separation from primary caregivers compared with none of the comparison group. A similar proportion of our sample of children with RAD had been removed from home as a result of neglect or had experienced other forms of maltreatment. Conclusions: Bowlby beleived that a main aetiological factor in the development of difficulties was the experience of separation. We suspect that a main aetiological factor in both his and our cases is the experience of maltreatment. We suggest that RAD arises from a complex interplay of genetic and environmental triggers.
Full Text: Available from Child: Care, Health and Development

Understanding and promoting attachment.
Journal of Psychosocial Nursing & Mental Health Services, 2009;47/8(23-7)
Wilson SL
Interest in early relationships has led to increased use of terms such as attachment disorder, attachment problems, and attachment therapy when describing behavioral/emotional regulation in young children. Unfortunately, such terms are vague and lead to clinical confusion and diagnostic inaccuracies. This article will introduce attachment theory, with a discussion of reactive attachment disorder and implications for treatment of children who have problems with social-emotional development.
Full Text: Available from Journal of psychosocial nursing and mental health services
Supporting children with attachment difficulties in schools.
Full Text: Available from British Journal of School Nursing

Clinical interventions for children with attachment problems.
Cornell T, Hamrin V. Journal of Child & Adolescent Psychiatric Nursing, 2008;21/1(35-47)
Abstract: TOPIC: Applying the current evidence to treating clinical populations with attachment disorders.PURPOSE: This study aims to review the literature regarding the treatment of childhood attachment disorders, with the goal of guiding clinicians towards evidence-based practice.SOURCES USED: MEDLINE, CINAHL, PsychBooks, EMBASE and PsychINFO were searched and all articles reporting results of a treatment intervention for attachment disorder were reviewed. Ancestry analysis garnered additional sources.CONCLUSIONS: There are few studies addressing therapeutic interventions for attachment disorder, but the literature supports benefits to the child-parent attachment relationship in biological families in the application of both psychoeducational and psychotherapeutic treatment modalities. A summary of the important components of applying these techniques in therapy is included. Foster and adoptive families with attachment disorders require different types of intervention than biological families. In particular, foster and adoptive parents need to help repair their child's negative internal representations by responding appropriately to their child's cues. Advanced practice psychiatric nurses are well-prepared to provide evidence-based interventions to both biological and foster families with attachment problems. More research is needed to determine the most appropriate treatment interventions for children with attachment disorders.
Full Text: Available from Journal of Child and Adolescent Psychiatric Nursing

Attachment theory and reactive attachment disorder: theoretical perspectives and treatment implications.
Hardy LT. Journal of Child & Adolescent Psychiatric Nursing, 2007;20/1(27-39)
Abstract: TOPIC: Attachment theory and reactive attachment disorder (RAD).PURPOSE: To highlight current perspectives on attachment theory, RAD, and treatment implications using a case study of an 8-year-old patient with RAD.SOURCES: Selected multidisciplinary literature related to attachment theory and RAD.CONCLUSIONS: The literature provides a body of work that substantiates the importance of early attachment relationships to human development and highlights gaps in our knowledge related to treatment of children with RAD. The quality of early attachment relationships is correlated with future personality and brain development. Attachment disturbances are associated with psychopathology in childhood and adulthood. Although evidence for the effective treatment of children with attachment disorders is minimal and inconclusive, the two major perspectives, developmental psychology and neuropsychoanalysis, offer guidelines for practice.
Full Text: Available from Journal of Child and Adolescent Psychiatric Nursing

Reactive attachment disorder--a theoretical model beyond attachment.
Minnis H et al. European Child & Adolescent Psychiatry, 2006, vol./is. 15/6(336-42)
Abstract: Despite its importance in public health, reactive attachment disorder (RAD) is an under-researched and little used clinical category. Abnormalities of social relatedness have long been documented in children who have been abused, neglected or institutionalised, but there have been more recent efforts to define these behaviours within the psychiatric nosology. There has been an implicit assumption that the central deficit in RAD is in the attachment system, but this has caused controversy and may have blocked research. We propose that RAD is better construed within the framework of intersubjectivity, which has a central role in the development of core brain and social functions and may also have had an important role in the evolution of a key human characteristic-complex social functioning. This broader framework may potentially explain apparently diverse symptoms such as indiscriminate friendliness and negative or unpredictable reunion responses. Finally, we suggest that a change of name may be useful in progressing the field, but accept that this may be difficult until there is better agreement in the clinical and scientific communities about the core features and aetiology of this disorder.
Full Text: Available from European Child and Adolescent Psychiatry