

STRENGTHENING FAMILIES: COLLABORATING WITH FAMILIES OF YOUNG CHILDREN IN ASSESSMENT AND SAFETY PLANNING LEARNING COLLABORATIVE

JUNE 2025 ATTACHMENT AND BONDING



Definitions

Attachment:

A deep and enduring emotional bond that connects one person to another across time and space.



Bonding:

The process by which a caregiver develops emotional ties to a child, often beginning at or before birth.



The critical time for bonding to occur, which may create long-term attachment styles, is typically in the range from birth to 3 years. Studies indicate that bonding can improve after 2.5, until approximately 5 years of age, with significant support and treatment.

Child Protective Services plays a critical role in identifying children with secure attachments as well as identifying when there are concerns. Children with disrupted attachments may show behavioral issues, difficulty trusting adults, anxiety, withdrawal, or aggression. Continued exposure to abuse, neglect, and removal from caregivers can fracture a child's sense of safety.

The role of CPS may be interpreting the child's behavior. Without the use of language, our birth to 5 population is most often communicating their sense of safety and security through behaviors. CPS may find themselves in the position to identify the parental factor(s) that are impacting bonding to support parents and caregivers to make changes.

How to Identify Attachment Concerns

1. Observe the child's behavior towards their caregiver. Look for signs of extreme clinginess or withdrawal. Indifference or lack of preference for familiar adults. Avoidance or physical or emotional closeness. Aggression or hostility directed at caregivers.

2. Watch for disorganized responses. Signs of confusion or fear may include the child seeking comfort and then pulling away, freezing, exhibiting dazed expressions, or sudden shifts in behavior, as well as children who demonstrate fear or wariness around a caregiver.



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3. Listen for developmental concerns. Attachment may be a factor in situations of delayed speech, emotional expression, or social skills. Children may make limited eye contact or have emotional flatness.

4. Assess for inconsistent or inappropriate caregiver behavior. Is the caregiver emotionally responsive? Does the caregiver show attunement? Are the caregiver's actions confusing, hostile, or emotionally absent?

5. Consider the child's history. Multiple placements, trauma, or neglect increase issues with attachment. CPS can ask, "Has the child had safe, consistent adults in their life?"

It's important not to label a child with an attachment disorder without clinical input. Instead, document what you see. Example: "Child does not seek comfort from a caregiver when distressed" rather than "Child has poor attachment."

If there are concerns about attachment behaviors, especially if persistent or severe, CPS should make professional referrals. Some indicators that it's time to make a referral include children showing no preference for familiar adults, indiscriminate affection with strangers (hugging strangers or clinging without boundaries), social withdrawal or refusal to engage with caregivers, or children displaying controlling, manipulative, or parentified behavior, that interferes with relationships.

CPS Can Promote Healthy Attachment

Child Welfare Professionals can help to create environments where children can heal and attach. Small actions, like supporting consistency in meeting basic needs, can make a big impact.

The CW Professional can encourage positive relationships, building supportive routines, consistent schedules, safe touch, shared playtime, and providing comfort at night.

The CW Professional can also model attachment through supportive practices, such as demonstrating empathy about the child's need for connection rather than behavior management.



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Reflection on Content

How can Child Welfare Professionals minimize the negative impact on attachment and bonding and incorporate healthy bonding activities when they must be involved?

Action Item

Is there a child you work with that's displaying aggression, hostility, or appears withdrawn? Have a conversation with the child or caregiver about what the behaviors may be trying to say regarding their sense of safety and security in their relationships.