

## Considerations for Choosing an Attachment Therapist

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### **I. Professional Qualifications**

**Does the therapist:**

- Have a current license/certification or other credential required by their particular state?
- Belong to ATTACH (Association for Treatment and Training in the Attachment of Children)?
- Have a current clinical registered membership in ATTACH (Go to: [www.attach.org](http://www.attach.org), Professional Practice Manual, Pg. 12, Standards of Practice) or meet the standards to be a registered clinician (80 hours of specialized post-graduate training in the diagnosis and treatment of attachment disorders and regular continuing education in those issues)?
- Have a current membership in his/her professional organization, and follow their organization's established code of ethics and standards of practice?

### **II. Training Questions**

- What training has the therapist received specific to attachment, trauma, early childhood development, adoption, foster care, and family therapy?
- How long has the therapist been practicing? How long has the therapist been treating children with attachment issues/disorder? Is 50% of their practice with adopted, foster, and others with attachment issues?
- Is the therapist skilled in treating a variety of problems with a variety of techniques? For example, comfortable in facilitating attachment building, working on behavior management strategies, working with ADHD and/or learning disabilities, helping with grief work, PTSD, Bi-Polar disorder, treating sexual abuse issues and helping with adoption related issues?
- How many hours of supervised and "hands on training" under the mentorship of a qualified attachment therapist does the therapist have?
- Does the therapist continue to learn about new developments in attachment therapy through a minimum of 20 continuing education units annually and maintain contact with other professionals in the field?
- Does the therapist have peer and professional consultation a minimum of 1 hour per month?

### **III. Therapeutic Process Questions**

- What ages does the therapist serve?
- Under what circumstances would the therapist choose not to treat a child/family?
- What are the treatment philosophies/goals of the therapist?
- How long is the usual course of therapy?
- Does the initial assessment of the child/family meet ATTACH's Standards of Therapeutic Process (Go to: [www.attach.org](http://www.attach.org) , Professional Practice Manual, pg. 14, Standards of Therapeutic Process)?
- How many therapists are part of the therapeutic process?
- What attention is given to educating parents with regard to specialized attachment parenting?
- What attention is given to helping parents heal their own emotional issues?
- Does the therapist make and use a contract between the therapist(s) and the parent(s), between the parent(s) and the child, and between the child and the therapist(s)?
- Is treatment done with the parent(s) present and joining with the therapist(s) on behalf of the child? Are parents considered a part of the treatment team?
- Does the clinician work with the family and community to find supports for respite?
- How does the therapist maintain coordination and continuity of care among various providers?
- Is the clinician willing to participate in community meetings that involve the child's welfare, i.e., school, court/probation, child welfare, etc.?

- \_\_\_\_\_ Does the therapist's orientation include what has become known as an "Intensive" (a duration of consecutive days of therapeutic treatment)?
- \_\_\_\_\_ If "Intensives" are used what is the therapeutic rationale for it (the "Intensive")? What follow-up work is provided after an "Intensive"?
- \_\_\_\_\_ If a child is from out of town, is there an arrangement made for a follow-up therapist in the child's local area? Is the hometown therapist invited to participate in the therapeutic process?
- \_\_\_\_\_ Is the therapist willing to refer for additional assessments (for example, speech and hearing, sensory integration, medical and neurological evaluations)?
- \_\_\_\_\_ If holding techniques are utilized, who does the holding and what style is used? Is nurturing holding an important part of the treatment? ATTACH does not support intrusive, provocative, and coercive methods of treatment—see ATTACH's Position Paper: go to [www.attach.org](http://www.attach.org), About ATTACH, Position Papers).
- \_\_\_\_\_ What is the therapist's specific plan to keep everyone safe (Go to: [www.attach.org](http://www.attach.org) , Professional Practice Manual, page 23, Attach Safety Principles)?

**IV. Financial considerations**

- \_\_\_\_\_ How much does treatment cost?
- \_\_\_\_\_ What funding sources are available to assist in the cost of treatment?
- \_\_\_\_\_ Does the therapist take insurance? If so, what programs is he/she eligible for?
- \_\_\_\_\_ Is private financial contracting an option?