The term "Parental Alienation (PA)" is a heavily disputed term that arose out of Richard Gardner's early description of Parental Alienation being a syndrome, focusing on the parent’s symptoms. Many in the legal and therapeutic community unfortunately continue to deny the existence of this enormous problem.

James Bow has conducted a number of widely respected studies to assess current professional practice in a number of issues. In 2009, Bow, Gould, & Flens conducted an internet survey to examine the views of mental health and legal professionals about parental alienation (PA) in child custody cases. The responses of 448 respondents revealed much awareness about the concept of PA, and the need for further research in the field. Respondents were cautious in their views of PA and very reluctant to support Parental Alienation Syndrome. They further did not view the concept of Parental Alienation Syndrome as meeting admissibility standards in the courts. Nevertheless respondents reported that one quarter of their cases involved concerns about parental alienation, with approximately half of those cases being classified as mild alienation. Respondents reported alienation most frequently occurred with ten-year-old children, with children between the ages of 9-12 being the most vulnerable to being alienated by one parent against the other. Respondents also found parental alienation to be slightly more common for girls than boys. 65% of the respondents also reported the mother as more likely to be the alienating parent.

Within the last several years, the courts have begun to support testimony regarding Parental Alienation as recognized and admissible evidence. Professional organizations have begun to do the same. It is interesting to note that the Association of Family and Conciliation Courts (AFCC) has focused on the issue of Parental Alienation in both the 2016 as well as 2017 Annual Conferences. Currently the terms used in professional circles for PA include: abuse, alienation, gatekeeping, and references to Parent-Child Contact Problems. At present, the current dilemma is both how the Court can intervene in such cases; and how the children and adults involved in these cases can be treated.

The need for treatment in cases of Parental Alienation is now well recognized with differing theories about what works. Unfortunately, traditional reunification techniques have been found to be unsuccessful. It is not enough for the targeted parent to falsely apologize to the alienated child for wrongs they have not committed. Children enmeshed in an angry, distorted view of a targeted parent have essentially been brain washed. Such children have come to accept the “all or nothing” view of the “Good” parent and the “Bad” parent. In severe cases of Parental Alienation, where the child unjustifiably refuses contact with the targeted parent, it is often necessary to separate the child from the alienating parent for a period of time to allow for the child to re-establish a relationship with the alienated parent. During this period of separation both the alienating parent and the alienated child need individual therapy to address the distortions endorsed towards the targeted parent. Children in such cases also require therapy that enables them to move beyond enmeshed, dependent relationships with the alienating parent. Treatment involves helping the child get out of the parental conflict and begin to see both parents realistically. Alienators need to know that the Court will not allow such behavior to
continue. In some cases sanctions may need to be applied by the court in order to facilitate treatment for the alienating parent.

Unfortunately, the current legal situation is one where most often only the extreme cases of alienation are coming to the attention of the Court. Being able to identify the early signs of Parental Alienation in Parent-Child Contact Problems is essential. The professional community is becoming aware of the importance of recognizing the early signs of parental alienation. Parental allegations of abuse to a child, that occur for the first time after the separation in a high conflict divorce, should be interpreted with caution. Such allegations are particularly suspicious if the child has never previously reported abuse prior to the separation. Two hypotheses must be explored in such cases: first, that the abuse of the child did occur; and alternatively that the allegations of abuse are false allegations encouraged by a parent attempting to alienate the other parent. Again the alienating partner's motive is for the child to think less of the other parent and to minimize the child's contact with the other parent. Unfortunately the child who is persuaded to make false allegations of abuse against the other parent, inevitably suffers guilt as well as confusion about the reality of the other parent's behavior.

It has been my experience in dealing with Parental Alienation (PA) cases, that one or both parents have a Personality Disorder. Parents who have experienced attachment trauma in their own childhood, often act out their own attachment loss in the context of divorce. In such cases a parent attempts to undermine the children's relationship with the targeted parent in order to prevent further loss for him/herself.

When these early allegations are found to be false, Courts need to intervene immediately to assure the targeted parent's time with the child. The parent engaging in false allegations and triangulation needs targeted individual therapy to address the specific issues involved in parental alienation. Generic therapy does not work. If the alienating parent is given consequences and targeted treatment at the early stages of alienation, severe cases of parental alienation can be avoided.

“Child Psychological Abuse” is also a new diagnosis in DSM-5. It is defined as “non-accidental verbal or symbolic acts by a child's parent or caregiver that result, or have reasonable potential to result, in significant psychological harm to the child.” In many instances, the behavior of the alienating parent constitutes psychological abuse. “Children Affected by Parental Relationship Distress” is another new diagnosis in DSM-5. It should be used “when the focus of clinical attention is the negative effects of the parental relationship discord (high levels of conflict, distress, or disparagement) on a child in the family, inducing effects on the child's mental or physical disorders.” 7. The alienating parent assumes that if a spouse has in the past been physically abusive, it follows that the parent will assault the child. This assumption is not always true.

The stakes are high for children involved in the alienation process. The impact of Parental Alienation can often cause significant long term difficulties for the child as they become adults. These difficulties include:

- Having trouble trusting others;
- Low self-esteem;
- Difficulty sustaining intimate relationships;
- Experiencing shame for hurting the rejected parent;
• Depression;
• Substance abuse to relieve the pain of parental alienation;
• More likely to experience divorce;
• More likely to have difficulty with authority figures and the law;
• The loss of their own children through parental alienation

It is imperative that the abusive process of alienation be recognized by the Courts as well as mental health professionals.

About Dr. McNaught: Dr. McNaught is a clinical and forensic psychologist who has been in practice for over 30 years.

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