

IDENTIFYING CASES OF PARENT ALIENATION SYNDROME—PART I

by LEONA M. KOPETSKI

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Editors' Note: This is the first part of a two-part article dealing with parental alienation of children and aiding the courts and counsel in recognizing parental alienation in cases involving custody and parenting time. Part II, which will appear in the March 1998 issue, will focus on the psychological dynamics of the family members in a parental alienation case.

In 1987, Richard Gardner identified a serious form of parent-child pathology and named it "Parent Alienation Syndrome."¹ Simultaneously, but without awareness of his work, The Family and Children's Evaluation Team ("Team")² evaluated 413 families in custody disputes and in 20 percent of those cases found dynamics that led the Team independently to conclusions that were remarkably similar to Gardner's conclusions regarding the characteristics of the syndrome. However, the Team's experience led to somewhat different conclusions regarding frequency, causality, and recommended interventions. Others have now investigated the problem, documenting its frequency and importance.³

Parental alienation cases pose a particularly difficult challenge to lawyers and mental health professionals attempting to help families negotiate divorce. The syndrome is seriously harmful to both children and parents. The following ideas are intended to help by providing clarifying criteria for identification.

Definition

Parent Alienation Syndrome is a form of psycho-social pathology. It is most frequently identified in the process of divorce, although it is not a condition limited to divorcing families. It is not caused by the divorce. However, it is exacerbated by legal procedures that coincide with and strengthen the pathological defenses alienating parents use to avoid experiencing the psychological pains of internal conflict, ambivalence, narcissistic injury, or the deflated self-esteem that is part of a normal grieving response to interpersonal loss. Thus, like many forms of psychological pathology, Parent Alienation Syndrome occurs when there is an unfortunate "fit" between the internal psychological dynamics of an individual and a cultural opportunity for living out pathology in an interpersonal setting.

This newsletter is prepared by the CBA Family Law Section. This month's article was written by Leona M. Kopetski, MSSW, who worked as a clinical social worker specializing in the field of custody evaluation in addition to maintaining a private practice in psychotherapy. She is now retired and living in Seeley Lake, Montana, (406) 677-3278.

Alienating parents enforce their agenda by aligning with intrinsically sound theories or causes, then accusing the parent to be alienated of behavior that violates the tenets of those theories or causes. Social causes and movements contain particularly powerful resources that can be exploited. Emotional and ideational content from any social causes, however well-intended or intrinsically sound, can be appropriated and used for the pathological purpose of alienating a child from the other parent.

The potential usefulness of a cause is not determined by its content, but by the amount of emotion and action that can be generated when there is an accusation that the tenets or taboos of the cause have been violated. The emotional climate attendant to the cause helps blur boundaries so that questions that need to be raised in a particular case are treated as though the validity of the cause itself is being questioned. However, in parent alienation cases, exclusion of the other parent from the life of the child is not desired for the altruistic reasons that generated the social cause with which the alienating parent hopes to be identified, but for personal reasons that are rooted in complicated emotional and psychological dynamics.

The alienating parent may or may not be consciously aware of manipulating the child and the legal/social systems. Alienating parents often believe that the accusations they make are true, but have developed those beliefs by a faulty reasoning process. The following case illustrates the process of parent alienation.

In the 1970s, child abuse and neglect were the subjects of national attention. The reporting law had just been passed, and systems were being forced to change to respond more effectively to neglected and physically abused children. In one case, a father accused a mother of life-threatening neglect of their four-year-old daughter. The family had experienced the accidental death of an older child, and the father could not overcome his grief. Like many parents who lose children, he believed that finding a reasonable explanation and placing blame would give him “closure” and relief.

The father blamed the mother and focused intense anger on her. Although data from the evaluation of the mother did not support his conclusion, her parenting was not flawless. Needless to say, the loss of her child and the blame and criticism directed at her caused her to be depressed. Depressed people often are not able to be as attuned to their children as would be optimal.

In spite of the Team’s recommendation, the child was placed in the custody of her father. Therapy was ordered and obtained. However, ten years and much litigation later, this child refused any contact with her mother. The mother resigned herself to the loss and made a good adjustment in spite of it.

Sound psychological theories can be exploited and used in pathological ways, just as legitimate social causes can. For example, a child’s normal needs may be exacerbated or exaggerated, then presented as a justification for excluding or severely limiting time with the unwanted parent. Attachment theories and theories about separation anxiety are most often used in this way. Again, there is no acknowledgment of the fact that it is the alienating parent not the child, who wants and would benefit from the exclusion of the other parent.

Differentiating causes from cases requires that there be criteria for making the diagnosis of any condition in a particular case. These criteria can then be used to rule in, and, just as important, to rule out the existence of a syndrome in a family.⁴ The following characteristics are common to all of the cases of parent alienation the Team has seen and seem to be useful as diagnostic criteria.

Observable Family Dynamics

It is well known that children need emotional support, comfort, and warmth provided in the context of secure, safe, predictable attachments and relationships with at least one and preferably two parents in order to develop and mature psychologically. However, emotional dependency is not the whole story for children. In all families, the limited experience and perceptual abilities of children make them dependent, not only emotionally but also cognitively, on one or more significant adults.

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The child’s cognitive understanding and view of the world and the people in it are shaped by a conglomeration of immediate perceptions combined with perceptions shared with that child by caretaking adults. Who has contributed which perceptions is not always clear, either to the child or to the caretaking adults. Because children, for very good reasons, trust the perceptions of parents more than their own perceptions, they participate in any perceptual distortion or delusion shared with them by a parent unless there are mitigating factors.⁵ The most important mitigating factor against sharing a distorted perception is a relationship with another separate, different parent who offers different data and perspectives. The child of an alienating parent is deprived of that relationship and, therefore, its potentially corrective influence.

The child’s emotional and cognitive dependencies can be exploited by adults. Alienating parents (who should know better) and their children (who cannot be expected to know better) sometimes share a common delusion that one and only one other human being, namely the alienating parent, can provide the child with the relationship necessary for psychological survival. The alienating parent believes and communicates to the child that only that parent or delegates of that parent can be considered safe. This, of course, gives the alienating parent a great deal of power—much more power than is the case if the child knows more than one safe, dependable, trustworthy adult. A child who does not know that there is a nurturing someone else “out there” separate from a symbiotic unit can only be terrified of leaving the only safe world that, in that child’s experience, does exist.

For children, *feeling* safe and *being* safe are synonymous; it takes significant growth, the development of a dependable capacity for testing reality as well as the freedom to use that

capacity, and considerable experience to distinguish between internal mental content and external reality. Most adults have achieved the ability to make such distinctions, although some adults lose that ability under severe stress and some adults have never developed it because of mental illness or because of deficits in education, personality development, or life experience.

Very young children need adults who can make the distinctions between feelings and facts for them; school age and older children need adults to help them make the distinctions if they can, and to take over that function when the child is unable to make the judgments. Many adults do not recognize how important it is to help children find healthy ways of managing, putting in perspective, and sometimes overcoming feelings, especially such painful ones as anger, fear, or disappointment. The child's participation in alienation is thus relatively easy to achieve by blurring the distinctions between feelings and facts, then exaggerating and exploiting the emotion.

The following parent-child interactions are observable when children have been engaged in the process of alienating a parent:

1. The alienating parent shares with the child a distorted, essentially negative perception of the parent to be alienated, as well as a lack of interest in or active avoidance of changing that perception. The child begins by being confused, but progresses toward identification with the alienating parent, finally reflecting the distorted perception as his or her own version of "the truth."
2. A child old enough to assert an opinion refuses to visit the parent to be alienated. A younger child either experiences or is described by the alienating parent as experiencing unusual distress or anger on separation from the alienating parent or on return from contact with the other parent, though often not during the visit itself.
3. The alienating parent attempts to attenuate, control, or exclude contact with the other parent through behavior such as the removal of the child from physical proximity to the parent to be alienated and/or engaging in repeated litigation aimed at enforcing exclusion, indefinite supervision, or attenuation of the relationship. This attempt is accompanied by intense, unconflicted parental affect, usually anger, anger mislabeled as fear, or fear itself and by "protective" behavior toward the child. Similar feelings are attributed to or are provoked in the child by the alienating parent so that the child mirrors parental ideas, attitudes, and emotions. Older children often show these intense feelings in interviews; preschool children say them and seem to believe them cognitively, but often do not show them when seen in a clinical interview. The feelings now attributed to the child are used to justify an exclusion that is in reality the alienating parent's desire, not the child's need. Alienation is the only proposed solution to the perceived problems; other possible solutions are either rejected or attempted but sabotaged before they can become or when they do begin to become effective.
4. Entitlement to alienation is often justified by accusing the parent to be alienated of immoral or irresponsible conduct and asserting that the child needs to be protected. It also may be justified by appeals to child development theories that may predict absolute irreversible and devastating consequences from "traumas" such as separations from a "primary parent" (that is, the alienating

parent). It sometimes is justified by appeals to “children’s rights,” such as a right to be believed literally and without question or the right to refuse a relationship with an unwanted parent.

5. The alienating parent also asserts entitlement to the desired outcome by arguing, often eloquently and convincingly, a need for “justice.” From the narrow perspective of the alienating parent, justice and revenge are synonymous; only those who have suffered “injustice” are considered to have the right to expect “justice,” especially in the form of protection of the civil right to be heard with the possibility of being believed. It is significant that contact with the child is often discussed as a reward (for the “good” or self-sacrificing alienating parent) or punishment (for the “bad” parent to be alienated).

6. The child’s need for a relationship with two parents is not recognized; the question is which one of the parents will remain in the child’s life.⁶

Understanding Accusations

Accusations are not the same as allegations. Allegations are here defined as serious concerns raised in the form of a question that can be answered negatively or positively by gathering data. Accusations are here defined as preformed convictions or conclusions considered to be beyond question.

The stated fear of the alienating parent in a custody or visitation evaluation is that the examiner will not see the pathology in the other parent. Information that raises questions or conflicts with the conclusion made by the alienating parent is excluded, explained away, or considered invalid. Anyone, professional or otherwise, who questions or disagrees with an accusation may be accused of being naive and charmed or brainwashed by the accused, or of being incompetent or biased. Such dissenters are accused of collaborating with injustice and thereby causing harm to children. Self-defense by the accused is called lying or denial. In the minds of some accusers, denial actually proves guilt.

The normal parent making an allegation is different from an alienating parent making an accusation. Normal parents are not perfectionistic. The capacity to tolerate flaws and imperfections in himself or herself allows the normal parent to take in information that disproves the allegation as well as information that confirms it. Normal parents thus not only allow themselves to be wrong on occasion, but have clear ambivalence about being right in this situation. They do not wish to believe that their children have been hurt, so they want to be mistaken in their suspicions or perceptions, even when they have good data, and they are relieved when good data indicate that the child was not hurt.

The alienating parent is not relieved by a finding that the child has not been harmed, but is both angry and disappointed. Such a parent actively seeks more information or more professional opinions in order to prove that the preformed conviction is true.

Normal parents tolerate flaws in others as well as in themselves. They understand the importance of the child’s relationships with people other than themselves and do not want the child to lose a relationship with the other parent. Accordingly, they will consider alternatives for helping the

other parent overcome problems and improve functioning or even will simply allow the child to take advantage of limited parental ability and interest. In addition, normal parents have a minimal residual trust in and fondness for an individual once loved, in addition to the disappointment and anger that attend the failure of the relationship and which may be very intense at times. This minimal trust and fondness allow some cooperation on behalf of the child.

There are, of course, situations in which there is clear evidence that a child or a spouse has been neglected or abused, or clearly observable evidence in which a parent/spouse is emotionally abusive or guilty of serious neglect. In alienation cases, however, the evidence is very frequently ambiguous and difficult to sort out. Physical evidence is often sparse or lacking. In younger children, the directly observed relationship between the child and the parent to be alienated is often emotionally positive (loving but sometimes conflicted and lacking in fear or emotional constriction, for example), in contrast to verbalized content.

Older children are sometimes very angry with the parent to be alienated and participate actively, but for different reasons than those that would justify alienation. Although they may say the words that produce the desired effect of engaging the system, their actions and emotions may suggest different motivations. The desire to alienate may be an attempt at retribution for a perceived desertion (“I’ll do to you what you are doing to me!”), and thus an expression of a wish to stop the divorce and reconstitute the family. It may be an attempt to accommodate the needs and wishes of the alienating parent.

The Team has seen children ages twelve and fourteen become infuriated when direct evidence conflicted with a conviction, openly shared with the mother, that the father was uncaring and irresponsible. The children accused the father of “pretending” and thereby deluding the examiners, adding, “You will believe him because he is the adult.”

In one such case, the child was convinced, erroneously, that the father was not paying his child support. This particular case was finally resolved when an accusation of sexual abuse was made. Although the evidence for that accusation was very questionable, the relationship between the father and child was, by then, irretrievably broken, and she stopped all contact with him.

Ambiguity often serves to prolong the litigation and thereby furthers the process of alienation. Relationships between a child and an accused parent are usually attenuated or disrupted during investigations. In ambiguous cases, the investigations can last months or even years in hopes of achieving a level of certainty that can never be achieved. Such prolonged investigations can in themselves be harmful to the family relationships.

Conclusion

Parent Alienation Syndrome complicates the evaluations and legal process in divorce cases by exploiting the normal concerns and anxieties of professionals trying to help families through litigation. Accusations abound and must be carefully evaluated because often they are untrue, only partially true, or remediable by means other than excluding a parent from the child’s Life. The interactions described in this article indicate serious and specific psychological conditions that will be described in a later article.

Although it is uncommon in the Team's experience, it is conceivable that abuse or neglect and parent alienation could occur in the same case. Both therapists and lawyers are familiar with situations in which the pathology of each parent is used to attempt to obscure the pathology of the other, with the result that neither parent can ever improve functioning enough to parent adequately. Pathologies do not cancel each other out. Obviously, it is important in such circumstances to respond to and provide interventions such as therapy for both conditions. Remediation should almost never consist of excluding a relationship with the problematic parent. Such exclusion increases intractable conflict and litigation and deprives children of adequate parenting from any source.

NOTES

1. Gardner, *The Parental Alienation Syndrome and the Differentiation Between Fabricated and Genuine Child Sexual Abuse* (Cresskill, N.J.: Creative Therapeutics, 1987).
2. The Family and Children's Evaluation Team, comprised of Claire Purcell, Ph.D., and Leona M. Kopetski, MSSW, pioneered the team approach to child custody evaluations in Colorado. From 1975 to 1995, the Team evaluated both parents and all of the children in approximately 600 cases. Kopetski, the author of this article, originated the concept that both parents must be evaluated by the same examiner in a custody evaluation and was a founder of the Interdisciplinary Committee on Child Custody.
3. Clawar and Rivlin, *Children Held Hostage* (Section of Family Law, American Bar Association, 1991).
4. Popper, "Science: Conjectures and Refutations," in *Introductory Readings in the Philosophy of Science* (Klemke, Hollinger, and Kline, eds.) (Buffalo, N.Y.: Prometheus Books, rev. ed. 1988) at 19-26.
5. Bowlby, "Omission, Suppression, and Falsification of Family Context," in *Separation* (N.Y.: Basic Books, 1973) at 313-21; Loftus, "When a Lie Becomes Memory's Truth: Memory Distortion After Exposure to Misinformation," in 1 *Current Directions in Psychological Science* 121-23 (Aug. 1992).
6. Bowlby, "Focusing on a Figure," in *Attachment* (N.Y.: Basic Books, 1969) at 299-330. Bowlby was the first theorist to study and offer comprehensive information about attachment. Although many theorists have elaborated since, Bowlby is one of the very few who indicated that there are variations in attachment figures, that attachments change over time, and that it is normal to have multiple attachments beyond the first year and abnormal to need to cling to one attachment beyond that time. See *also* "Patterns of Attachment and Contributing Conditions," *id.* at 330-49.