

THE SPECTRUM OF PARENTAL ALIENATION SYNDROME (PART I)

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from the AMERICAN JOURNAL OF FORENSIC PSYCHOLOGY, VOLUME 15, NUMBER 3, 1997

The Parental Alienation Syndrome, so named by Dr. Richard Gardner, is a distinctive family response to divorce in which the child becomes aligned with one parent and preoccupied with unjustified and/or exaggerated denigration of the other target parent. In severe cases, the child's once love-bonded relationship with rejected/target parent is destroyed. Testimony on Parental Alienation Syndrome (PAS) in legal proceedings has sparked debate. This two-part article seeks to shed light on the debate by reviewing Gardner's work and that of others on PAS, integrating the concept of PAS with research on high conflict divorce and other related literature. The material is organized under topic headings such as parents who induce alienation, the child in PAS, the target/alienated parent, attorneys on PAS, and evaluation and intervention. Part II begins with the child in PAS. Case vignettes of moderate to severe PAS are presented in both parts, some of which illustrate the consequences for children and families when the system is successfully manipulated by the alienating parent, as well as some difficult but effective interventions implemented by the author, her husband Randy Rand, Ed.D., and other colleagues.

Dr. Richard Gardner was an experienced child and forensic psychiatrist conducting evaluations when, in 1985, he introduced the concept of Parental Alienation Syndrome (PAS) in an article entitled "Recent Trends in Divorce and Custody Litigation" (1). His work with children and families during the 1970s led him to write such books as *Boys and Girls Book of Divorce*, *The Parents Book About Divorce* and *Psychotherapy with Children of Divorce*. He knew from experience that the norm for children of divorce was to continue to love and long for both parents, in spite of the divorce and the passage of years, a finding replicated by one of the first large scale studies of divorce (2). With this background, Gardner became concerned in the early 1980s about the increasing number of divorce children he was seeing who, especially in the course of custody evaluations, presented as preoccupied with denigrating one parent, sometimes to the point of expressing hatred toward a once loved parent. He used the term Parental Alienation Syndrome to refer to the child's symptoms of denigrating and rejecting a previously loved parent in the context of divorce.

Gardner's focus on PAS as a disturbance of children in divorce is unique, although from the mid-1980s on there has been a proliferation of professional literature on disturbing trends in divorce/custody disputes, including false allegations of abuse to influence the outcome. At least three other divorce syndromes have been identified. In 1986, two psychologists in Michigan, who were as yet unaware of Gardner's work, published the first of several papers on the SAID syndrome, Blush and Ross's acronym for sex abuse allegations in divorce (3). Drawing on their experience doing evaluations for the family court, and the experience of their colleagues at the clinic there, these authors delineated typologies for the falsely accusing parent, the child involved and the accused parent. Two of the divorce syndromes named in the literature focus on the rage and pathology of the alienating or falsely accusing parent. Jacobs in New York and Wallerstein in California published case reports of what they called Medea Syndrome (4, 5). Jacobs discussed Gardner's work on PAS in his 1988 study of a Medea Syndrome mother, as did Turkat when he described Divorce Related Malicious Mother Syndrome in 1994 (6). Fathers,

too, can be found with this disorder, as one of the case vignettes below indicates, but for some reason Turkat has not encountered any.

In addition to articles specifically on PAS and literature which refers to it, there is a body of divorce research and clinical writings which, without a name, describe the phenomenon. The literature reviewed here comes from a number of sources including: practitioners who like Gardner are seeking to improve the diagnostic skills and intervention strategies of the courts and other professionals who deal with high conflict divorce; attorneys and judges who come in contact with PAS cases; researchers like Clawar and Rivlin who reference Gardner's work on PAS in their large scale study of parental programming in divorce (7) and Johnston whose work on high conflict divorce (8) led her to study the problem of children who refuse visitation, including a discussion of PAS (9). When PAS is viewed from the standpoint of parts and subprocesses which create the whole, the literature which pertains increases exponentially, for example: psychological characteristics of parents who falsely accuse in divorce/custody disputes; cults who help divorcing parents alienate their children from the other parent; and psychological abuse of children in severe PAS including Munchausen Syndrome by Proxy type abuse.

The trends identified by Gardner and others are the result of important social changes which began to take root and flower around the mid 1970s. The legal treatment of divorce and child custody shifted from the preference for mothers to have sole custody and the "tender years presumption" to the preference for joint custody and "best interests of the child." This gave divorce fathers more legal options for parenting their children and increased the quantity and intensity of divorce disputes as parents vehemently disagreed over the numerous custodial arrangements now possible. By the late 1970s, rising concern about parental programming of children to influence the outcome of disputes led the American Bar Association Section of Family Law to commission a large scale study of the problem. The results of this 12 year study were published in 1991 in a book called *Children Held Hostage* (7). Clawar and Rivlin found that parental programming was practiced to varying degrees by 80 percent of divorcing parents, with 20 percent of engaging in such behaviors with their children at least once a day. Further discussion of this book appears below.

At the same time as new divorce trends have been emerging, sweeping social changes have been occurring in society's treatment of child abuse. Mandated reporting became the law of the land in the 1970s and the procedures for making reports were simplified such that anonymous reports are now accepted and acted upon in some states. As the number of suspected abuse reports practically doubled, so did the number of false and unsubstantiated reports, according to statistics compiled by the National Center for Child Abuse and Neglect in 1988 which showed that non-valid reports outnumbered cases of *bona fide* abuse by a ratio of two to one (10).

According to some observers, false allegations of abuse in contested divorce/custody cases have become the ultimate weapon. Judge Stewart wrote that "Family Courts nationwide are feeling the effects of a new fad being used by parties to a custody dispute—the charge that the other parent is molesting the child...The impact of such an allegation on the custody litigation is swift and major...The Family Court judge is apt to cut off the accused's access to the child pending completion of the investigation" (11, p. 329). In response to concerns such as these, the Research Unit of the Association of Family and Conciliation Courts obtained funding for a study on sex

abuse accusations in divorce/custody disputes (12). Data for 1985-1986 were gathered from family court sites across the country. At that time, the incidence of sex abuse allegations in divorce was found to average two percent, but varied from one percent to eight percent depending on the court site. Results of this study suggest that sex abuse allegations in divorce may be valid only about 50 percent of the time. Many of the court counsellors and administrators interviewed believed they were seeing a greater proportion of such cases than in previous decades.

Ten years later in 1996, Congress amended the Child Abuse Prevention and Treatment Act to eliminate blanket immunity for persons who knowingly make false reports, based on information that 2,000,000 children were involved that year in non-valid reports, as opposed to 1,000,000 children who were genuinely abused (13). In addition, many states have already enacted laws against wilfully making a false child abuse report. In California where the author and her husband practice, the Office of Child Abuse Prevention revised their manual for mandated reporters several years ago to include a section on false allegations in which the coaching of children during custody disputes is described as a major problem and Gardner's work on PAS is referenced (14).

In the meantime, the 1980s saw a massive campaign to train social workers, police, judges and mental health professionals in such concepts as "children don't lie about abuse." To make up for society's blind eye to child abuse in the past, professionals are encouraged to unquestioningly "believe the child" and to reflexively accept all allegations of child abuse as true. Widespread media attention and a proliferation of popular books and movies on child abuse continues to suggest that the problem is widespread and insidious. Parents and professionals alike are enjoined to be vigilant for what are touted as "behavioral indicators" of sex abuse. These include the common but vague symptom of poor self esteem, conflicting "indicators" such as aggressive behavior and social withdrawal, and child behaviors which may be developmentally normal such as sexual curiosity and nightmares. Little attention is paid to the fact that children may develop the same symptoms in response to other stressors, including divorce and father absence.

Children, too, are being sensitized to abuse, taught about "good touch/bad touch." At the end of such a lesson in school, they may be asked to report anyone who they think may have touched them in a bad way. Although some instances of legitimate abuse are detected in this manner, children sometimes misunderstand the lesson such that a kindly grandfather going to scoop up his young grandson in his arms, as he had done many times before, may find the child pulling back from him in horror and accusing him of "bad touch." Adults conducting these classes are sometimes so eager to find abuse that in one Southern state, the parents of over half the class were arrested.

The foregoing outline of recent social changes is not meant to imply that Parental Alienation Syndrome and false allegations of sex abuse in divorce are synonymous. PAS can occur with or without such abuse accusations. Although false allegations of sex abuse are a common spin-off of severe PAS, other derivative false allegations may include physical abuse, neglect, emotional abuse, or a fabricated history of spousal abuse. In addition, there seems to be an increase in PAS type cases of accusations by the alienating parent that it is the alienated parent who is practicing PAS, a tactic which tends to confuse and neutralize interveners.

PARENTAL ALIENATION SYNDROME

According to Gardner, PAS is a disturbance in the child who, in the context of divorce, becomes preoccupied with deprecation and criticism of one parent, which denigration is either unjustified and/or exaggerated. Gardner sees PAS as arising primarily from a combination of parental influence and the child's active contributions to the campaign of denigration, factors which may mutually reinforce one another. Gardner distinguishes between Parental Alienation Syndrome and the term "parental alienation". There are a wide variety of causes for parental alienation, including bonafide parental abuse and/or neglect, as well as significant deficits in a rejected parent's functioning which may not rise to the level of abuse. From Gardner's perspective, a diagnosis of PAS only applies where abuse, neglect and other conduct by the alienated parent which would reasonably justify the alienation are relatively minimal. Thus Gardner conceives of PAS as a specialized subcategory of generic parental alienation. Since introducing the concept of PAS in 1985, Gardner has written two books on the subject (15, 16), and included a chapter on it in his book entitled *Family Evaluation, in Child Custody Mediation, Arbitration and Litigation*(17).

Depending on the severity of the PAS, a child may exhibit all or only some of the following behaviors. It is the cluster of these symptoms which prompted Gardner to consider them as a syndrome.

- 1) The child is aligned with the alienating parent in a campaign of denigration against the target parent, with the child making active contributions;
- 2) Rationalizations for deprecating the target parent are often weak, frivolous or absurd;
- 3) Animosity toward the rejected parent lacks the ambivalence normal to human relationships;
- 4) The child asserts that the decision to reject the target parent is his or her own, what Gardner calls the "independent thinker" phenomenon;
- 5) The child reflexively supports the parent with whom he or she is aligned;
- 6) The child expresses guiltless disregard for the feelings of the target or hated parent;
- 7) Borrowed scenarios are present, i.e., the child's statements reflect themes and terminology of the alienating parent;
- 8) Animosity is spread to the extended family and others associated with the hated parent.

In Gardner's experience, born out by the clinical and research literature reviewed below, mothers are more frequently found to engage in PAS, which is likened by Clawar and Rivlin to psychological kidnapping (7). Where PAS with physical child abduction occurs, however, Huntington reports that fathers are in the majority (18). Gardner recognizes that fathers, too, may engage in PAS and gives examples in his books. For consistency and simplicity, though, he refers to the alienating parent as "mother" and target parent as "father."

According to Gardner, the brainwashing component in PAS can be more or less conscious on the part of the programming parent and may be systematic or subtle. The child's active contributions

to the campaign of denigration may help to create and maintain a mutually reinforcing feedback loop between the child and the programming parent. The child's contributions notwithstanding, Gardner views the alienating parent as the responsible adult who elicits or transmits a negative set of beliefs about the target parent. The child's loving experiences with the target parent in the past are replaced with a new reality, the negative scenario shared by the programming parent and child which justifies their rejection of the alienated parent. In light of these observations, Gardner warned that children's statements in divorce/custody about rejecting one parent should not be taken at face value and should be evaluated for PAS dynamics. According to psychologist Mary Lund, this insight is one of Gardner's most important contributions because it alerted the legal system, parents and mental health professionals dealing with divorce to an important possibility which can have disastrous effects if unrecognized (19).

Gardner emphasizes the importance of differentiating between mild, moderate and severe PAS in determining what court orders and therapeutic interventions to apply. In mild cases, there is some parental programming but visitation is not seriously effected and the child manages to negotiate the transitions without too much difficulty. The child has a reasonably healthy relationship with the programming parent and is usually participating in the campaign of denigration to maintain the primary emotional bond with the preferred parent, usually the mother. PAS in this category can usually be alleviated by the court's affirming that the preferred or primary parent will retain primary custody.

In moderate PAS, there is a significant degree of parental programming, along with significant struggles around visitation. The child often displays difficulties around the transition between homes but is eventually able to settle down and become benevolently involved with the parent he or she is visiting. The bond between the aligned parent and child is still reasonably healthy, despite their shared conviction that the target parent is somehow despicable. At this level, stronger legal interventions are required and a court ordered PAS therapist is recommended who can monitor visits, make their office available as a visit exchange site, and report to the court regarding failures to implement visitation. The threat of sanctions against the alienating parent may be needed to gain compliance. Failure of the system to apply the appropriate level of court orders and therapeutic interventions in moderate PAS may put the child at risk for developing severe PAS. In some moderate cases, after court-ordered special therapy and sanctions have failed, Gardner states that it may be necessary to seriously consider transferring custody to the allegedly hated parent, assuming that parent is fit. In some situations, this is the only hope of protecting the child from progression to the severe category.

The child in severe PAS is fanatic in his or her hatred of the target parent. The child may refuse to visit, personally make false allegations of abuse, and threaten to run away, commit suicide or homicide if forced to see the father. Mother and child have a pathological bond, often based on shared paranoid fantasies about the father, sometimes to the point of *folie a deux*. In severe PAS, Gardner has found that if the child is allowed to stay with the mother the relationship with the father is doomed and the child develops long-standing psycho pathology and even paranoia. Assuming the target parent is fit, Gardner believes that the only effective remedy in severe PAS is to give custody to the alienated parent. In 1992 he suggested that courts might be more receptive to the change of custody option if the child was provided with a therapeutic transitional

placement such as hospitalization, an intervention employed with success by the author and her husband (see case vignette in Part II).

Gardner's original conception of PAS was based on the child's preoccupation with denigration of the target parent. It was not until two years later when he published his first book on PAS that he addressed the problem of PAS with false allegations of abuse. Gardner prefers to view such allegations as derivative of the PAS, observing that they often emerge after other efforts to exclude the target parent have failed. Some of the literature reviewed below, however, indicates that false allegations of abuse may also surface prior to the marital separation, symptomatic of a pre-existing psychiatric disorder of the alienating parent which may not be diagnosed until there is further mental deterioration after the divorce. Gardner was among the first to recognize that involving a child in false allegations of abuse is a form of abuse in itself and indicative of serious problems somewhere in the divorce family system. Insofar as PAS with false allegations of abuse can result in permanent destruction of the child's relationship with the alienated parent, it can be more harmful to the child than if the alleged abuse had actually occurred.

Gardner supports joint custody for those parents who can sincerely agree on it and have the ability to fulfil this ideal. Research by Maccoby and Mnookin suggests that about 29 percent of divorced parents are successfully co-parenting three to four years after filing (20). Gardner opposes imposing joint custody on parents in dispute and between whom there is significant animosity. For these families, Gardner recommends that a thorough evaluation be conducted to develop a case specific plan with the right combination of court orders, mediation, therapeutic interventions, and arbitration.

HIGH CONFLICT DIVORCE AND PAS

High conflict divorce is characterized by intense and/or protracted post separation conflict and hostility between the parents which may be expressed overtly or covertly through ongoing litigation, verbal and physical aggression, and tactics of sabotage and deception. Clinical and research literature suggest that Parental Alienation Syndrome is a distinctive type of high conflict divorce which may require PAS specific interventions, just as the problems of divorced families have been found to respond to divorce specific interventions rather than to traditional therapies. In their book on children caught in the middle of high conflict divorce, Garrity and Baris treat PAS as a distinctive divorce family dynamic, devoting two chapters to PAS, one on understanding it and the other on a comprehensive intervention model (21).

In high conflict divorce without significant PAS, the parents do most of the fighting while the children manage to go back and forth between homes, maintain their own views and preserve their affection for both parents. They cope by developing active skills for maneuvering the situation or by adopting a survival strategy of treating both parents with equal fairness and distance (8). Periodically, children may exacerbate parental conflicts by embellishing age appropriate separation anxieties, telling each parent things the parent wants to hear and shifting their allegiance back and forth between the parents. Nevertheless, they avoid consistent alignment with one parent against the other and are able to enjoy their time with each parent once the often difficult transition between homes has been accomplished.

In high conflict divorce with significant PAS, the children are personally involved in the parental conflict. Unable to manage the situation so as to preserve an affectionate relationship with both parents, the child takes the side of one parent against the other and participates in the battle as an ally of the alienating parent who is defined as good against the other parent who is viewed as despicable. In a study of 175 children from high conflict families, Johnston found that chronic hostility and protracted litigation between the parents contributed to the development of PAS among older children (9). In other words, where the system is unable to settle and contain parental divorce conflicts, the children may be at increasing risk for developing PAS as they get older. Johnston acknowledges that her findings support Gardner's contention that as many as 90 percent of children involved in protracted custody show symptoms of PAS.

A large scale study of patterns of legal conflict between divorce parents three to four years after filing contained the significant finding that the most hostile divorce couples were not necessarily those engaged in the most contentious legal battles (20). This suggests that PAS may occur not only in the context of litigation but may develop after litigation has ceased, or proceed a new round of litigation after many years, supporting what Dunne and Hedrick found in their clinical study of severe PAS families (22).

According to Johnston, high conflict divorce is the product of a multilayered divorce impasse between the parents (8). Often, the impasse has its roots in one or both parents' extreme vulnerability to issues of narcissistic injury, loss, anger and control. These vulnerabilities prevent a satisfactory divorce adjustment and feed an endless, sometimes escalating cycle of action and reaction which promotes and maintains parental conflict. The parents are frozen in transition, psychologically neither married, separated or divorced, a pattern which may pertain even when only one parent is significantly disturbed. Using Johnston's model, PAS can be viewed as an effort by one parent, with the help of the children, to "resolve" the divorce impasse with a clear-cut understanding of who is good, who is to blame and how the parent to blame should be punished. The following vignette illustrates this. Like the other case examples interspersed throughout this article, it is a composite scenario synthesized from real cases encountered by the author and her colleagues.

Mr. L had adopted his wife's child from her previous marriage and he and Mrs. L. had a child of their own, a girl who was six years old when Mr. L. moved out of the family home. During the six months leading up to this precipitous event, Mrs. L. was living in one part of the house with the older child while Mr. L. and his daughter had rooms together in a separate part of the house. The parents hardly spoke to one another but the children visited back and forth freely with each other and with both parents. Under the circumstances, Mr. L. did not think his wife would object to his leaving, but just in case there was a scene he decided to move out first and then work out the practical issues with Mrs. L. He left a letter for her and another one for the children, explaining his decision and affirming his desire to make arrangements for visitation and child support. Mrs. L. was furious. She immediately had the locks changed and successfully blocked her husband's efforts to contact the children by phone or to see them. Both children probably felt betrayed by father and Mrs. L. amplified such feelings by telling the children their father had abandoned them and did not care about them at all. She also alleged that he had had numerous affairs during the marriage although Mr. L. always denied that. These allegations may have sprung from the fact that Mrs. L. found out six weeks after her husband left that he was dating

someone. Outraged, she told Mr. L. that he would never see the children again. She and the children began calling Mr. L. and his girl-friend at all hours, screaming accusations and obscenities over the phone until a restraining order was obtained. When efforts by father's attorney to arrange for mediation between Mr. and Mrs. L. were stonewalled, Mr. L. got a court order for visitation. Three months had passed when his first opportunity to see his children since moving out was scheduled. On the eve of this visit, Mrs. L. called child protective services and accused Mr. L. of sexually molesting their daughter. According to the social worker's notes which were obtained during subsequent litigation, Mrs. L. told the social worker that she "knew" while she and her husband were still living together that he was molesting their daughter.

The family law judge ordered a custody evaluation which was very thorough and took months to complete. The evaluator documented a number of instances in which the girl's statements about abuse and hat mg. her father seemed to be strongly influenced by mother's overwhelming anger and that of the older half sibling, who was strongly aligned with the mother. Mrs. L. was diagnosed with a severe narcissistic personality disorder with antisocial features, while Mr. L. was seen by the evaluator as rather passive by comparison and as ambivalent and conflict avoidant. The evaluator was able to hold one meeting with father and daughter together, during which their loving attachment to one another was apparent. This was the little girl's first opportunity to talk to her father about the feelings engendered by his leaving. As it turned out, it was also her last opportunity. The PAS intensified such that efforts to convene further father/daughter sessions failed when the child threw tantrums in the waiting room and ran screaming into the parking lot where her mother was waiting.

Seven months after the marital separation, the custody evaluator's report was released. It stated that the alleged abuse had in all probability not occurred but failed to diagnose severe PAS with false allegations of abuse. The evaluator recommended that the mother retain primary custody and that the girl and her parents each become involved in individual therapy to facilitate father/daughter reunification. Not surprisingly, Mrs. L. arranged for the child to see a therapist/intern who never saw the custody evaluator's report. Based on input from the mother alone, the therapist treated the girl for abuse by her father instead of providing divorce specific therapy aimed at helping the little girl to adjust to her parent's divorce and to establish a post divorce relationship with her father. The girl's anger at her father became more extreme with each passing month and defeated the visitations planned by the family mediation center. Finally, a year after the separation, the custody evaluator was prepared to testify as to the PAS and to make the strong recommendations needed to remedy the situation. By that time, the father was convinced that nobody could do anything about his daughter's continued expressions of hatred toward him. He also felt daunted by the prospect of further litigation and an even greater financial drain. He decided to let go, hoping that one day when his daughter was older she would understand and seek him out.

CHILDREN HELD HOSTAGE: DEALING WITH PROGRAMMED AND BRAINWASHED CHILDREN

By the late 1970s, judges, parents, and mental health professionals involved with divorce were so concerned about parental programming that the American Bar Association Section on Family Law commissioned this 12 year study of 700 divorce families (7). Clawar and Rivlin found that

the problem of parental programming was indeed widespread and that even at low levels it had significant impact on children. Data from multiple sources was analyzed including: written records such as court transcripts, forensic reports, therapy notes and children's diaries; audio and video tapes of interactions between children, their parents and others related to the case; direct observations, such as children with parents and clients with attorneys; and interviews with children, relatives, family friends, mental health professionals, school personnel, judges and conciliators.

Gardner's work on PAS is referenced at the beginning of Clawar and Rivlin's book (7), but the authors take issue with what they represent as his position, that less severe cases need not be a cause of great concern. They found that PAS can result from a variety of complex processes, whether or not one parent engages in a systematic programming campaign and whether or not alienation is the programming parent's goal. Parental alienation is only one of a number of detrimental effects. According to this study, even well meaning parents often attempt to influence what their children say in the custody and visitation proceedings.

Mild levels of parental programming and brainwashing seem to have significant effects.

Clawar and Rivlin anchor their work in 30 years of literature on social psychology and the processes of social influence, variously referred to in the literature as thought reform, brainwashing, indoctrination, modelling, mimicking, mind control, re-education, and coercive persuasion. These terms describe a variety of psychological methods for ridding people of ideas which authorities do not want them to have and for replacing old ways of thinking and behavior with new ones. For the purposes of research, Clawar and Rivlin ascertained the need for more precisely defined terminology. They selected the words "programming" and "brainwashing." They defined "program" as the content, themes, and beliefs transmitted by the programming parent to the child regarding the other parent.

"Brainwashing" was defined as the interactional process by which the child was persuaded to accept and elaborate on the program. Brainwashing occurs over time and involves repetition of the program, or code words referring to the program, until the subject responds with attitudinal and behavioral compliance.

According to Clawar and Rivlin, the influence of a programming parent can be conscious and wilful or unconscious and unintentional. It can be obvious or subtle, with rewards for compliance that were material, social or psychological. Noncompliance may be met with subtle psychological punishment such as withdrawal of love or direct corporal punishment, as illustrated in the case vignette of S in Part II. The author encountered another case in which the alienating mother handcuffed her son to the bedpost when he was 12 years old and the boy asserted he was not willing to continue saying his father had physically abused him. The Clawar and Rivlin study found that children may be active or passive participants in the alienation process. As the case of the 12-year-old boy suggests, the nature and degree of the child's involvement in the PAS may change over time.

This study identifies the influential role of other people in the child's life, such as relatives and professionals aligned with the alienating parent, whose endorsement of the program advances the

brainwashing process. In a general way, these findings appear to replicate Johnston's research on high conflict divorce which identified the importance of third party participants in parental conflicts (8). Rand noted the influence of so-called "professional participants in Munchausen Syndrome by Proxy type abuse which in divorce can overlap with PAS" (23).

Clawar and Rivlin identify eight stages of the programming/brainwashing process which culminates in severe Parental Alienation Syndrome (7). Recognizing the power imbalance between parent and child, they view the process as driven by the alienating parent who induces the child's compliance on step by step basis:

- 1) A thematic focus to be shared by the programming parent and child emerges or is chosen. This may be tied to a more or less formal ideology relating to the family, religion, or ethnicity;
- 2) A sense of support and connection to the programming parent is created;
- 3) Feeling of sympathy for the programming parent is induced;
- 4) The child begins to show signs of compliance, such as expressing fear of visiting the target parent or refusing to talk to that parent on the phone;
- 5) The programming parent tests the child's compliance, for example, asking the child questions after a visit and rewarding the child for "correct" answers;
- 6) The programming parent tests the child's loyalty by having the child express views and attitudes which suggest a preference for one parent over the other;
- 7) Escalation/intensification/generalization occurs, for example, broadening the program with embellished or new allegations; the child rejects the target parent in a global, unambivalent fashion;
- 8) The program is maintained along with the child's compliance, which may range from minor reminders and suggestions to intense pressure, depending on court activity and the child's frame of mind.

CLINICAL STUDIES OF PAS

According to Gardner and seconded by Cartwright, Parental Alienation Syndrome is a developing concept which clinical and forensic practitioners will refine and redefine as new cases with different features become better understood (24). This section reviews the work of practitioners who, like Cartwright, seek to elaborate on Gardner's work by contributing their own knowledge and experience from work with moderate to severe PAS cases.

Dunne and Hedrick

Practicing in Seattle, Washington, Dunne and Hedrick analyzed sixteen families who met Gardner's criteria for severe PAS (22). Although the cases show a wide diversity of characteristics, the authors found Gardner's criteria useful in differentiating these cases from other post-divorce difficulties, lending support for the idea that PAS has distinctive features

which differentiate it from other forms of high conflict divorce. Among the severe PAS cases examined, some involved false allegations of abuse and some did not. Children in the same family sometimes responded to the divorce with opposing adjustments. For example, the oldest child in one family, a 16-year-old girl, aligned with her alienating mother while her 12-year-old brother's desire for a relationship with his father led to the mother finally rejecting the boy.

In another case, failed separation between mother and daughter, age 4 at the time of the marital break up, was shown to contribute to an escalating pattern of the girl rejecting her father. The onset of PAS in a given family was found to occur before the parents separated, during the actual divorce proceedings, or years after the divorce decree. Dunne and Hedrick describe a two-and-a-half year-old girl whose parents were disputing custody where there had been a long series of allegations by the mother since the early months of her pregnancy. Some of the teens in this sample had enjoyed a lengthy and positive post-divorce relationship with a parent prior to rejecting that parent as part of a PAS scenario.

Lund

Psychologist Mary Lund examined factors in addition to parental programming which can contribute to estrangement between the child and a rejected parent (19). She wrote that the methods Gardner advocates, such as court orders for continued contact, fit many cases and may help prevent the child developing the kind of phobic-like reaction to the rejected parent which can occur when contact is discontinued during long, drawn out legal proceedings. Such legal interventions often form the cornerstone for treatment. In treating these families, Lund integrates Gardner's work with that of Janet Johnston. She assesses the family in terms of developmental factors in the child which may be contributing, such as normal separation problems among preschoolers and oppositional behavior during preadolescence and adolescence. Deficits in the noncustodial parent's parenting may also contribute to the problem. In her experience, the hated parent, usually the father, often has a distant, rigid, even authoritarian style which contrasts with the indulgent, clinging style of the loved parent, who may also need help with appropriate parenting. These are risky generalizations, however. In the experience of this author and others, alienating and target parents exhibit a wide variety of personality patterns which do not lend themselves to this type of generalization. In addition, where the father is the alienating parent, it is sometimes he who uses an overindulgent and materially lavish parenting style to overwhelm and override the children's healthier psychological bond with the mother.

According to Lund, PAS may also develop when the stress for the child of ongoing high conflict divorce becomes too much and the child seeks to "escape" being caught in the middle by aligning with one parent. Therapists, especially individual child therapists, can unwittingly become part of the system maintaining the PAS, such that a court order is required to break up the therapist's polarizing influence. Ultimately, a combination of strategic legal and therapeutic interventions are required to mitigate the PAS and keep the case manageable.

Cartwright

A Canadian psychologist, Cartwright makes eight points about PAS:

- 1) PAS can be provoked by conflicts other than custody matters, e.g., child support and relatively trivial differences;
- 2) alienation is a gradual and consistent process that is directly related to the time spent alienating;
- 3) time is on the side of the alienating parent, who may engage in a host of delay tactics;
- 4) slow judgments by courts exacerbate the problem;
- 5) alienating parents sometimes use the hint of sexual abuse to discredit the other parent, what Cartwright calls "virtual" allegations of sexual abuse;
- 6) judgments by the court which are clear and forceful are required to counter the force of alienation;
- 7) children subject to excessive alienation may develop mental illness and
- 8) successful parental alienation has profound, long term consequences for the child and other family members which are only beginning to be appreciated (24).

As an example of "virtual" allegations abuse, Cartwright describes a mother who insinuated sexual abuse by the father by alleging that he had shown the child a pornographic videotape which in fact was just a Hollywood comedy rented from a family video store. Regarding risk to the child of developing mental illness, Cartwright gives the example of disintegrating behavior by an alienated son, presumably latency age, who tried to poison his father by slipping air freshener into his stomach medicine. Later, the boy ran away during a visit with the father and the police had to be called. The *folie a deux* literature includes a report in 1977 of a 10-year-old boy who allegedly attempted to burn down his father's house two years after his parents divorced, apparently as a result of his *folie a deux* relationship with his disturbed mother (25). Such cases suggest that severe PAS can be indicative of significant emotional disturbance in the alienating parent with a proportionately disturbing effect on the child.

Cartwright poignantly describes the psychological effects on the child of being involved in severe PAS. "The child...experiences a great loss, the magnitude of which is akin to death of a parent, two grandparents, and all the lost parent's relatives and friends...Moreover...the child is unable to acknowledge the loss, much less mourn it" (24). The child's good memories of the alienated parent are systematically destroyed and the child misses out on the day-to-day interaction, learning, support and love which, in an intact family, usually flows between the child and both parents, as well as grandparents and other relatives on both sides.

The child may encounter insurmountable obstacles if, later in life, he or she seeks to reestablish relations with the lost parent and his family. The lost parent may be unable or unwilling to become reinvolved. The parent or grandparents may have died. Some of these children eventually turn against the alienating parent, and if the target parent is lost to them as well, the child is left with an unfillable void.

PARENTS WHO INDUCE ALIENATION

Gender

Gardner's observation that mothers seem to engage in PAS behavior with significantly greater frequency than fathers is born out by divorce research, as well as by the clinical PAS literature. The California Children of Divorce Study found that in a nonclinical sample, mothers were twice as likely as fathers to form PAS type alignments with their children (2). When false allegations of abuse arise, as in more severe manifestations of PAS, mothers also seem to comprise the majority (3, 26-28). Mothers constituted 67 percent of the accusers in the nationwide study which revealed that allegations of abuse in divorce/custody disputes were found to be invalid about 50 percent of the time (12). Fathers were the accusers in 22 percent of cases while third parties such as relatives and professionals were the adult initiators 11 percent of the time. Where a third party was the initiator of the allegation, a parent might also believe there was abuse. The numbers reverse when it comes to physically abducting the child, with fathers the abductors from 60 percent to 70 percent of the time (18). There may be gender differences in how men and women go about gaining control of their children and taking revenge on an ex-spouse, with men more inclined to physical kidnapping and women more inclined to social/psychological abduction, which is how Clawar and Rivlin characterized severe PAS (7).

Never Married

Parents may engage in PAS behavior even if they were never married. In Johnston's study of children who refuse visitation, she found that from 6 percent to 15 percent of the high conflict parents she studied were not married (9). In the author's experience, one of the contributing factors to PAS with some of these couples is the mother's anger and resentment over the father's refusal to marry her, an effect which is exacerbated if the father becomes involved with a new partner. A mother in this position may have particularly strong proprietary feelings, similar to what Clawar and Rivlin describe (7), infuriated by the unfairness of joint custody laws which grant the father rights to a relationship with his child without his having fulfilled his obligations with respect to the mother.

New Partners

Johnston found that the new partner of either parent could be the primary instigator of efforts to gain custody of the child (8). Something similar happens when a divorcing parent joins a cult which actively strives to get the child from the noncult member parent, with the cult fulfilling the role of new partner in a sense, as shown in one of the case vignettes to follow.

Narcissistic Vulnerability

Johnston found that to varying degrees, one or both of the parents in high conflict divorce may be narcissistically vulnerable, lacking a well-established self identify and relying on primitive defenses such as externalization, denial and projection (8). The need of one or both parents to protect and defend themselves against narcissistic injury is at the root of many high conflict divorces. This may be a motivating factor for PAS in some cases, a dynamic described by Wilhelm Reich almost 50 years ago (29) when he foretold how parents of certain character types would seek to defend themselves against narcissistic injury in divorce by fighting for the child, using the technique of defaming the partner in order to alienate the child from that parent.

Need to Conceal Parental Deficits

According to Clawar and Rivlin, the campaign to alienate the child from the other parent is sometimes used to deflect unwanted scrutiny of the programming parent's personal problems, for example alcohol, drugs, neglectful parenting, physical and sexual abuse, criminal involvement, or socially unaccepted life-style (7). Sometimes parents engage in PAS behavior out of fear that they will be found wanting when compared to the more loving and capable target. The literature on false allegations in divorce/custody disputes often makes the point that the accusation helps the accuser level the playing field, so to speak.

Vulnerability to Separation and Loss

A factor in some high conflict divorces is the presence in one or both parents of specific underlying vulnerabilities to loss and conflicts around attachment and separation (8). A PAS scenario can develop when a troubled parent who was rejected in the divorce copes with loss and loneliness by turning to the child to fulfil emotional needs, resulting in what Wallerstein calls the "overburdened child", discussed in Part II. For some parents, the divorce reactivates separation issues from earlier losses such as previous divorce, kidnapping or death of a child, or the loss of other family members. Such a parent may engage in PAS to defend against further "loss," that of having to share the child with the other parent. Some parents have long standing personality problems with separation and individuation. The ongoing conflicts over the child engendered by PAS help ward off feelings of loss and abandonment by maintaining the relationship with the ex-spouse. PAS can also be used by keep the other parent hostility engaged, as in Medea Syndrome (4, 5) and Divorce Related Malicious Mother Syndrome (6, 30).

Revenge Clawar and Rivlin found that revenge was one of the most common and powerful reasons for parents to engage in alienating behavior (7). The personality makeup of some parents is such that revenge seems like their only viable option in response to feeling wounded by the

divorce. The desire for revenge can be further kindled if infidelity is discovered, the alienating parent is left for someone else, or finds themselves immediately replaced by a new love object in the life of the parent who left.

Need for Control and Domination

Some alienating parents are driven by overriding needs for power, influence, domination and control (7). Engaging in PAS may provide the dual gratification of maintaining power, influence and control over the child and vicariously over the ex-spouse whose visitation and relationship with the child is frustrated by the alienating parent's control maneuvers. Needs for domination and control are sometimes acted out by abducting the child and using it to taunt and torment the frantic target parent. In addition to mothers and fathers, a new partner can be the one with inordinate needs for power, domination and control. For example, a mother may become involved with a new partner who first seduces her away from her relatively weak husband and then acts as a sort of one-on-one cult leader to mother and child, who are both programmed and brainwashed into compliance and submission.

Medea Syndrome

The need for revenge is taken to an extreme in Media Syndrome (4, 5). "Modern Medeas do not want to kill their children, but they do want revenge on their former wives or husbands—and they exact it by destroying the relationship between the other parent and the child...The Medea syndrome has its beginnings in the failing marriage and separation, when parents sometimes lose sight of the fact that their children have separate needs [and] begin to think of the child as being an extension of the self...A child may be used as an agent of revenge against the other parent...or the anger can lead to child stealing" (5). The "embittered-chaotic" parents described earlier by Wallerstein and Kelly may also fall in the revenge category (2). These parents act out their intense anger in a disorganized but chronically disruptive way which bombards the children, rather than protecting them, with the raw bitterness and chaos of the angry parent's feelings about the ex-spouse and the divorce.

Divorce Related Malicious Mother Syndrome

Turkat would have done better to call this disorder "Malicious Parent Syndrome," but be that as it may, this disorder describes a special class of alienating parents who engage in a relentless and multifaceted campaign of aggression and deception against the ex-spouse, who is being punished for the divorce (6, 30). Contrary to Turkat, the author has encountered several cases in which the father was the malicious parent, as illustrated in the case vignette at the end of this section. Discussing PAS by name, Turkat classified PAS as a moderate form of visitation interference as compared with Divorce Related Malicious Mother Syndrome. The parent with the latter disorder uses an array of tactics including excessive litigation, alienating the child from the target parent, and involving the child and third parties in malicious actions against the ex-spouse. Lying and deception are routinely used. A malicious parent might arrange to have the ex-spouse investigated for use of illegal drugs at work or file a complaint with authorities against the ex-spouse's new partner. Malicious parents are often successful in using the law to punish and harass the ex-spouse, sometimes violating the law themselves but often getting away with it.

Their efforts to interfere with the target parent's visitation are persistent and pervasive, including attempts to block the target parent from having regular, uninterrupted visitation with the child and from having telephone contact, as well as trying to block the target parent from participating in the child's school life and activities.

Mr. C's suspiciousness and verbal attacks on his wife finally drove her to file for divorce. As on previous occasions, Mr. C. threatened that if she would not reconcile he would win custody of their four-year-old daughter and make sure the mother never saw her again. In the past, Mrs. C. had relented, fearful that Mr. C. would fulfil his threats, but this time she stood firm. Mr. C. filed for sole custody based on false allegations that the mother was unfit. When these allegations were not upheld, the father made up new ones. Within a year of filing, Mrs. C. became engaged to another man. Mr. C. succeeded in breaking up the engagement by accusing the fiancée of sexually abusing the child. He had the police arrest the fiancée at the mother's home. When child protective services informed the mother that they would take her daughter away for failure to protect, the mother cancelled her engagement, terrified that Mr. C. would make good on his threat to take her daughter away. When police and child protection investigation of the sex abuse allegations resulted in a finding that no abuse occurred, Mrs. C. proceeded with her wedding plans. Father raised allegations of sex abuse against Mrs. C.'s new husband in family court and succeeded at one point in gaining temporary custody. Primary custody was returned to the mother after the court ordered evaluation found the allegations to be without merit and the father to be emotionally disturbed and pressuring the child to report abuse. During his visitation time, the father and a male friend continued to interrogate the girl about abuse by the stepfather and as time went by she felt increasingly pressured to meet their expectations. Away from the father's influence, however, the girl enjoyed her family with her mother and stepfather. She stated to several different therapists that she had only accused her stepfather of molesting her to please her father and his friend.

In the meantime, Mr. C. and friend continued to make abuse reports against the stepfather, creating significant distress for Mrs. C., her new husband and the child. Eventually, when the girl was 10, the father succeeded in getting the juvenile court to take jurisdiction and give him custody, although medical examination of the child did not support the increasingly serious accusations. Mrs. C. was not allowed to see her daughter. When she tried to contact the therapist who was now seeing the girl for sex abuse by Mrs. C.'s new husband, the therapist was rude and refused to speak with her. The mother was tortured by reports from a series of child protection workers which indicated that her daughter was acting out in bizarre and often self-destructive ways. At the age of twelve, she was picked up by the police for prostitution and had to be psychiatrically hospitalized. Several professionals who were involved when the mother had custody wondered if Mr. C. was deliberately destroying his daughter so as to get revenge against the mother. Mr. C. was able to retain custody, however, by focusing the attention of authorities on allegations of sex abuse against the stepfather.

Long before Divorce Related Malicious Mother Syndrome was identified by Turkat, a male psychologist, whose ex-wife undoubtedly exhibited the disorder, wrote a book about his ordeal (31). Accusing him of sexually abusing their young daughter, the mother arranged for the police to arrest him at his office in front of his clients and staff. She also arranged for newspaper reporters to be present so that pictures of the shocked psychologist being handcuffed and hauled

off to jail were widely broadcast. The father fought back and eventually obtained joint custody after the court found that mother's extreme efforts to sever the father's relationship with his child were detrimental and stripped her of sole custody.

Personality Characteristics of Parents Making False Accusations of Sexual Abuse in Disputes

Wakefield and Underwager undertook a systematic review of divorce/custody case files to examine and compare the characteristics of 72 false accusers, 103 falsely accused parents and a control group of 67 parents disputing custody but without allegations of abuse (28). Criteria for determining whether a parent had falsely accused included a finding by the justice system that there had been no abuse. Of the three groups, the falsely accusing parents were much more likely to have been diagnosed by a professional as exhibiting a personality disorder including mixed, unspecified, histrionic, borderline, passive-aggressive or paranoid. Approximately one-fourth of the false accusers did not exhibit significant pathology, while most of the parents who were disputing custody without abuse allegations were assessed as normal. Some of the false accusers were so obsessed with anger toward their estranged spouses that this became a major focus of their lives. They continued to be obsessed with abuse despite negative findings by mental health professionals and the courts, similar to what is found in cases of delusional disorder and Munchausen Syndrome by Proxy. The relationship of falsely accusing parents with their children was often characterized in the record as extremely controlling and symbiotic. Two were given a formal diagnosis of *folie a deux* between parent and child. Several exhibited extremely serious dysfunction, such as unpredictable bizarre behavior, belief that they possessed supernatural powers and delusions of grandeur. These authors found more similarities than differences between mothers and fathers who falsely accused, with mothers very much in the majority.

SAID Syndrome

Blush and Ross have come up with three psychological profiles for mother false accusers and a typical profile of father accusers (3, 26, 27). Mothers tend to present as "fearful victim," "justified vindicator," or to some degree psychotic. The "fearful victim" presentation involves manipulation of social image around a specific theme to which others respond with sympathy and support, such as child abuse or spousal abuse. The "justified vindicators" initially present as intellectually organized with a knowledgeable, even pseudo-scientific sounding agenda, similar to what Clawar and Rivlin report regarding self righteousness as an important motivation of some programming parents. Women in the third group present with a combination of borderline and histrionic features, which interact with the stress of the divorce to impair the mother's reality testing and significantly interfere with her functioning, sometimes to the point of a psychotic or quasi-psychotic presentation. Similar to Wakefield and Underwager's findings (28), mothers in all three categories tend to be histrionic in presentation, so emotionally convinced of the "facts" that no amount of input, including from neutral professionals, can dissuade them from their perceptions. According to Blush and Ross, the typical profile for father accusers is one of intellectual rigidity and a high need to be "correct," possibly male counterparts of the "justified vindicator" presentation among mothers. By history, these men were hypercritical of their wives while the marriage was still intact, quick to suspect them of negligence and to accuse their wives

of being unfit mothers. Gardner's work is referenced in the second and third SAID syndrome articles by these authors (26, 27).

Accuser and Accused Dyads

Important information about a programming parent using false allegations of abuse is to be found in the particular choice of accused. The study reported by Thoennes and Tjaden showed that the battle goes beyond simply mothers against fathers and vice versa (12). Parents were found to accuse not only each other but the other's new partner, or relatives such as grandparents or the new partner's teenage son. A parent who accuses the ex-spouse's new partner may fulfil a number of goals simultaneously, expressing feelings of jealousy, revenge, and trying to keep the child from forming a positive attachment with the new parent figure. Accusations against the target parent's relatives may provide a combination of revenge, allegations that are difficult for the ex-spouse to defend since they are not directly against him or her, and a means to exclude the relatives from post-divorce involvement in the child's life. The accuser can set up a devastating conflict for the target parent by accusing his teenage son from a previous marriage or the new partner's teenage offspring from a previous union. This has the effect of forcing the target parent to "choose" between his child involved in making the allegation and another child whom he loves and is responsible for. This enhances the alienating parent's ability to convince the child that daddy does not care.

The Delusional Parent

Rogers refers to PAS in her report on five divorce/custody cases in which the falsely accusing parent, all mothers in this sample, suffered from delusional disorder (32). The children were subjected to undue influence to get them to accept the accusing parent's psychotic belief and concomitant rejection of the other parent in a severe PAS scenario. Where the child succumbed, a diagnosis of shared paranoid disorder, otherwise known as *folie a deux* might also be made. According to Rogers, the first stages of the mother's delusional disorder were present to some degree during the marriage and exacerbated parental conflicts prior to the separation. However, these subtle signs were not immediately discernible as a psychiatric illness and were only recognized in retrospect, as the mother's symptoms became worse in the course of the divorce and its attendant disputes. One of the severe PAS cases reported by Dunne and Hedrick appears to be an example of the mother developing delusional disorder. The "subtle signs" were expressed as suspicions during her pregnancy that the father would molest the child, similar to a case encountered by the present author in which suspicions harbored by the mother even before the child was born prompted her to abduct the child a few months later. According to Rogers, the mothers who became delusional were usually the main caretakers for the children. In two cases they were awarded custody during the first round of custody litigation, before more noticeable deterioration in their parenting capabilities had occurred. With continued custody litigation, the intractable nature of their mental illness became apparent and the court gave custody to the father in four of the five cases.

Munchausen Syndrome by Proxy

Some cases of PAS, especially those with false allegations of abuse, may have important features in common with Munchausen Syndrome by Proxy (MSP) in which parents fulfil their needs vicariously by presenting their child as ill (23). In cases of “classical” MSP, parents repeatedly take their children to doctors for unnecessary, often painful tests and treatments which the physician is induced to provide based on the parent’s misrepresentations. “Contemporary-type” MSP occurs when a parent fabricates an abuse scenario for the child and welcomes or actively seeks out repeated abuse interviews of the child by police, social workers and therapists (23). The concept of contemporary-type MSP elaborates on the idea put forth by Sinanan and Houghton that new types of MSP behavior will evolve in parallel with the evolution of new medical and social services, e.g., the child protection system (33). MSP parents may change or come up with new “symptoms” for the child so as to better elicit the desired response from a particular care provider or an institution offering specialized services. Thus, the same child may be receiving attention simultaneously for fabricated physical symptoms from several medical providers and for fabricated sex abuse from therapists and public agencies who specialize in abuse. Careful evaluation and thorough investigation of sex abuse allegations which turn out to be questionable or false will sometimes bring a parent to the attention of authorities for practicing “classical” as well as “contemporary-type” MSP (34).

As with PAS, MSP is most often practiced by mothers, although fathers and other caretakers are sometimes found to engage in the behavior. MSP parents maintain their psychic equilibrium through control and manipulation of external sources of social gratification, including the child and care providers who serve children. Medical and other care providers are sometimes referred to as the “third party participants” in the MSP, because of their importance in carrying out the parent’s agenda, including false allegations of abuse. There are at least four different presentations where MSP and PAS overlap:

- 1) an MSP mother may, during the marriage, add false allegations of abuse to the child’s fabricated physical symptoms, thus precipitating the divorce;
- 2) where the MSP parent feels angry or rejected in divorce, manipulating the child’s medical care and involving the child in false allegations of abuse may serve multiple functions including revenge, maintaining the symbiotic bond with the child and preserving the freedom to continue the MSP behavior;
- 3) a parent dealing with the losses and stress of divorce may respond with MSP type behavior to obtain social support from the child and care providers;
- 4) an alienating parent may exhibit MSP type behavior by manipulating the child’s medical care for the primary purpose of furthering the alienation agenda (35).

In PAS with features of MSP, the alienating parent may gain legal authority to control and determine whom the child sees and what treatment is given. The child may be taken to the doctor after visits with the target parent for fabricated or induced symptoms which are attributed to abuse and neglect by the other parent. The child is likely present while the alienating parent makes this negative presentation about the other parent to the doctor, who inadvertently lends support to the denigrating account by listening to it, asking questions and examining the child.

The target parent may be rendered ineffective to stop this cycle because providers retained by the alienating parent, and who take her assertions at face value, often refuse to talk to the target parent or allow the target parent access to child's medical records. The result for the child is what Rand calls MSP *type* abuse. Rand expands Meadow's formulation of MSP as a complex form of emotional abuse by applying Garbarino's five types of psychological maltreatment. Research on MSP shows that it sometimes overlaps with other forms of abuse and neglect (36).

Parental Child Abductors

According to Huntington, post-divorce parental child stealing has been on the increase since the mid-1970s, paralleling the rising divorce rate and the explosion of litigation over child custody (18). An abducting parent views the child's needs as secondary to the parental agenda which is to provoke, agitate, control, attack or psychologically torture the other parent. It should come as no surprise, then, that post-divorce parental abduction is considered a serious form of child abuse. Psychological maltreatment may predominate or be accompanied by physical abuse and neglect. Abducting parents take the idea that the child would be better off without the other parent to an extreme. Clawar and Rivlin found that would-be abductors often felt frustrated in their efforts to gain access to their child through the legal system and felt "forced" to abduct the child (7). Sometimes, they became so convinced of the terrible scenario they were broadcasting about the target parent that they felt no "choice" but to flee with the child and go into hiding. In order to win the child's cooperation in maintaining concealment, the abductor must continue to brainwash the child with fear of the target parent and what would happen if the target parent should find the abducting parent and child.

CONCLUSION TO PART I

Review of this first portion of relevant literature and research indicates that Gardner's concept of PAS has been increasingly discussed and referred to since he introduced the term in 1985. Research on divorce since the early 1980s has been progressively converging with Gardner's work. Johnston's studies of high conflict divorce in particular suggest that it is not sufficient to lump PAS with high conflict divorce in general. In its more severe forms, PAS is clearly distinctive. It is also more destructive for children and families and can be irreversible in its effects. As the section on alienating parents indicates, the divorce population includes a significant proportion of parents who have psychological problems and disorders. The degree to which such problems are expressed in efforts to alienate the child from the other parent has to be evaluated in the total divorce context, including psychological factors of the child and character and conduct of the target parent. Severe PAS is destructive irrespective of the gender of the alienating parent.

Part II attempts to integrate Gardner's work on PAS with the relevant literature and research under the following topic headings: The Child in PAS; The Target/Alienated Parent in PAS; PAS and its Third Party Participants; Attorneys on PAS; Forensic Evaluation and PAS; and Interventions for PAS, including strategic combinations of court orders and therapeutic interventions, appointment of a Special Master, appointment of a Guardian ad Litem, changing custody, use of hospitalization and other transitional sites to facilitate custody changes, and the

appropriate application of sanctions to help certain programming parents to better act in their children's best interests.

Whether or not one chooses to use Gardner's terminology, the problems posed by these cases to families, professionals and the courts are very real. Reluctance to consider Parental Alienation Syndrome by name, along with the diagnostic and interventions it entails, tends to contribute to the perpetuation of the problem in a variety of ways. Like any other label, that of PAS has the potential to be misapplied and misused. Whether or not it is the appropriate diagnosis in a given instance must be determined based on facts of the case, corroborated historical evidence and data from multiple sources. An appropriate diagnosis of PAS, including level of severity as Gardner recommends, can make the difference between allowing a case to go beyond the point of no return or intervening effectively before it is too late.

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