

PARENTAL ALIENATION AND THE IMPORTANCE OF DETECTING IT IN CASES OF MINOR CHILDREN CUSTODY DISPUTE

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ABSTRACT. This document aims to highlight the importance of early discovery in parental alienation cases that arise in situations of divorce with minor children, in order to succeed in eliminating alienation devastating effects on children. In addition to the serious effects of divorce itself children face, in some cases, alienation trauma and although it doesn't appear as a distinct syndrome in DSM V, it is being recognized as an emotional abuse on the child by the College of Psychologists from Romania and the European jurisprudence.

KEYWORDS: child, parental alienation, emotional abuse, divorce, alienating parent

1. THEORETICAL FRAMEWORK

1.1 Definition

According to the request of the College of Psychologists from Romania, on the 25th of February 2016, the Official Monitor introduced the description of the alienation phenomenon as follows: it recognized the phenomenon of parental alienation as a severe form of psychological (emotional) abuse on children consisting in systematic denigration of a parent by the other parent, with the intention of alienating the child's other parent (CDPSI 2016).

In Article 2 of the Protocol between the Romanian Association for Joint Custody and the Institute of Forensic Psychology, parental alienation is defined as a negative interference in developing specific parent-child relations, relations of mutual attachment between child and parent, caused by either parents, grandparents or any other person living permanently with the child or exercising parental authority or guardianship in loco parentis, with the aim of alienating the child from his parent (called target parent or alienated parent) to prevent construction and maintaining specific parent-child relations between the minor and his/her parent. (CDPSI 2016)

According to art. 3 of this protocol the following may be included in the practice of parental alienation, which can be accomplished either directly by the alienator parent or through third parties:

- conducting campaigns to denigrate the way the target parents exercise their parental rights and duties;
- prevent in any way and with any excuse to exercise parental authority and maintain, construct and develop relationship of mutual attachment between parent and child;
- obstructing contact between the child or adolescent and alienated parent (the target parent);
- obstructing the legal right to exercise family relationships;
- deliberate restricting the access of the alienated parent (target) to on time relevant information about the child or adolescent, including information regarding school and extracurricular activities, relocation of the child in other places, the medical status or changes of home address;
- filing complaints against the other parent, against family members or against grandparents and other persons from the alienated parent family, to hinder, impede or jeopardize their presence in the life of the child or adolescent;
- change the child's residence without justification in a remote location in order to make more difficult for the child or adolescent to interact with the other parent, his family or grandparents.
- change the child's school or family doctor without the target parent's agreement, taking into consideration that he is available. (CDPSI 2016)

1.2. The history of parental alienation

The parental alienation phenomenon, considered as a form of emotional abuse on children who cannot defend themselves was launched by Gardner. Richard A. Gardner (1931 - 2003) was a psychiatry professor at the Department of Child Psychiatry of the Columbia University - USA, from 1963 until his

death. He published over 40 books and 250 articles in a variety of child psychiatry areas.

His main area of interest was how children were affected by parental divorce. Gardner wrote the first book of self-help for children affected by divorce, which was printed in several editions and has offered a new way of psychotherapy for these children.

In 1985, prof. Gardner introduced the concept of Parental Alienation Syndrome (PAS). Gardner defines PAS as a disorder that primarily occurs in the context of establishing child custody between parents and acts as an unjustified denigration campaign, in front of the child, of one parent by the other. In other words, one of the parents performs a brainwashing action, “bad-mouthing” the other parent to the child, the real effect being an emotional abuse. (Houchin et al., 2012)

Richard A. Warshak (2001), Ph.D., clinical psychologist and professor at the University of Texas South-western Medical Center, referring to the essential elements of the syndrome, believes that the attitude within PAS is persistent and not just an occasional episode so the rejection is unjustified, for example, alienation is not a reasonable response to the alienated parent's behaviour. The phenomenon of parental alienation is a form of emotional abuse on children before which they cannot defend themselves. Parental alienation syndrome is considered a form of emotional abuse because its outcome is depriving the child of a loving relationship with a parent. Attitudes and behaviours are as follows:

- an alienating parent conditions his child, he gives care depending on the claimed behaviour;
- an alienating parent withdraws his affection for his child when the child doesn't want to participate in the denigration campaign;
- an alienating parent has unrealistic expectations for his child; it is not natural to expect a child to cooperate in the denigration campaign against the other parent. The risk is that the child becomes confused, tense, frustrated;
- empowering premature responsibility onto the child; he or she claims to memorize a variety of drawbacks suffered by parents to bring false allegations of abuse;
- over-protection of children; the child is made to believe that any contact with the other parent is dangerous, it creates anxiety and emphasizes his/her dependence to the alienating parent (Warshak, 2001)..

In this moment of family crisis, the child may adopt the roles of “parental child” or “child- husband / wife, which has negative effects on him/her. The child is asked to act as parent, to be an accomplice and the confidant of the alienating parent that creates a

premature growth (the care taker of the depressed parent) and not least even become an active part in the family disagreement.

Stockholm syndrome often occurs in alienated children cases. Children often identify themselves with the alienator because of a defence mechanism, because of fear or, in the case of young children, the fear of losing parents to whom he/she is emotionally attached.

A child's reaction to alienation may be different depending on his/her stage of development. The initial reaction towards separation is anxiety: the rupture of ordinary life framework, one parent leaving, uncertainties about the immediate future, conflict and distress. Generally, the child reacts by blaming him/herself.

The following symptoms appear: either a behaviour failure (school failure, behavioural disorders, and self punitive behaviour) or a depressed mood. Most often, a premature growth phenomenon occurs, often children whose parents divorce “take care of themselves”, have an extreme adaptation, they don't demand much from adults, play little or not at all. Yet this premature growth positive in itself can be a source, during adolescence, of misfit reactions (paranoid and/or antisocial tendencies).

The other alternative is an instable behaviour, a manifestation of suffering by accusing others, violence. Blackmail and manipulation are also specific: some children seem to do everything to extend and augment parental conflict or to create conflict around them.

Persistence and duration of the conflict seriously endanger the mental health of parents and the psychological development of children. Under the pretext of fighting on behalf of the children, for them, the parents cause severe emotional distress to the exact same children for whose protection and welfare they are trying to achieve. It is psychologically harmful for children to be deprived of a healthy relationship with one of the parents. (Warshak et al. 2001).

Joan B. Kelly and Janet R. Johnston (2001) proposed a reformulation focused on the alienated child; these children are clearly distinguished from other children, who oppose or refuse contact with a parent following separation or divorce for a variety of reasons.

Relations between parents and children after separation and divorce could be conceptualized along a continuum from positive to negative, from positive relationships with both parents to the most negative relationship namely estrangement/alienation.

Positive relationships with both parents are those in which both parents are equally appreciated and

obviously kids want to spend time (often equal) with each parent.

Affinity relationships with one of the parents: considered positive and healthy at the end of the continuum are those parent-child affinity relationships with one of the parents. These are based on affinities in terms of temperament, gender, age, interests, preferences towards parenting practices between the child and one of the parents but the child continue to show affection and desire for substantial contact to the other parent as well. It is important to note that these affinities may change over time or with changing developmental situations or needs. Although these children may occasionally express a preference for one parent, they want relationships with both parents.

Children who ally: express their obvious consistent preference for one parent during marriage and during separation. Usually, after separation, these children want to limit contacts with the parent who is not preferred. They have an exaggerated relationship with a parent, due to common activities and exhibit ambivalent feelings towards the other parent that include anger, love, sadness and resistance to contact. This can be confused most often with parental alienation, but the ambivalence is the one that reveals it is a relationship of alliance and not alienation (Kelly & Johnston, 2001).

Children who are estranged: they alienate realistically towards one parent due to a history of abuse, neglect or parental deficiencies caused by alcohol, drugs, psychiatric problems or parenting style characterized by anger, rigidity or restrictions. This action of estrangement is the child's healthy response to an abusive parent.

Alienated children: expresses their rejection towards one parent and flatly refuse contact with him/her without expressing ambivalence; they rejected parents have no severe parental deficiencies, they were not abusive to their children and therefore the child's perception is unrealistic, exaggerated and distorted significantly.

The alienated child defined here is the one who freely and persistently expresses negative feelings and beliefs (such as anger, hatred, rejection, and/or fear) towards the alienated parent feelings that are found to be unreasonable to the actual experience of the child with that parent (Kelly & Johnston, 2001)

In 2010, Dr. William Bernet, a professor of psychiatry at Vanderbilt University School of Medicine, an expert in child psychiatry and forensic psychiatry, along with a number of mental health professionals from 11 countries, including the US, Canada and most European countries, defined parental alienation disorder (parental alienation

disorder - PAD) and proposed its inclusion in DSM V - Diagnostic and Statistical Manual of Mental Disorders - the fifth edition (Diagnostic and Statistical Manual of Mental Disorders, published by the American Psychiatric Association).

Although parental alienation disorder does not appear as such, DSM V now includes new diagnoses of "psychological abuse on the child" and "child affected by stressed relationship between parents" which is a huge step in the issue of "parental alienation". For the first time, mental health professionals in the US recognize concepts that help diagnose children who are experiencing Parental Alienation, strengthening pressure on parents who strive to alienate the children during divorce.

1.3 Recognition in jurisprudence

Although parental alienation is not recognized as a syndrome there are several rulings of the Romanian courts and of the ECHR that recognized the phenomenon. "It was argued by the applicant that the constant opposition of the mother complained to the existence of personal ties between him and the minor is typical behaviour for 'parental alienation syndrome'. (Civil Judgment no. 2969 of 21.03.2008, case no. 9267/197/2006, Brasov Court)

"The child has the right to have two parents that should be left to love without fear and without feeling guilty towards the other parent, to develop independently a quality relationship with each of the two parents, to not be exposed to contradictory discussions worn by parents or of being put to choose which of the two parents is right, not to be exposed to comments or negative behaviour from a parent about the other parent, to be protected by remarks, alienating tactics about the other parent and attitudes that do not respect the other parent, not be forced to talk about the activities in which they engage with the other parent or to be forced to spy on the other parent or the new family of the other parent. "

"The abusive exercise by one parent of his/her rights that have been conferred regarding the child entrusted to the other spouse liable to hinder or endanger the growth, education, training thereof, entitles the court that received the request of the other parent to impose restriction, suspension or even removal of this right of the parent, depending on the nature and seriousness of the breaches found. "(39500/300/2011 – Bucharest, 2nd Sector Court House - Civil Chamber) Romania is the first European country to recognize parental alienation in a protocol concluded by the Institute of Forensic Psychology and Romanian Association for joint custody on February the 1st, 2016, following which the Board of Directors of the College of Psychologists from Romania ordered

parental alienation to be recognized as a form of emotional child abuse.

The decision published in the Official Monitor states that “recognizing the phenomenon of parental alienation as a form of severe psychological (emotional) child abuse consisting in systematic denigration of one parent by the other parent, with the intention of alienating the child from the other parent.

2. CASE STUDY

2.1. Overview of case

The study described below involves a family who is in the process of divorce, the exact moment being the custody dispute and the X minor, 7 years old residence establishment; the parents are separated in fact, the child X lived at her mother’s until a year ago, when the father refused to allow it any further.

There were conflicts regarding the minor visiting program, including criminal complaints, physical aggression. X girl has no somatic and psychosomatic diseases reported. The X child’s mother tells that she had a healthy, affectionate relationship with the minor during her stay at her house, she allowed the child to spend time with her father, and now, after taking the minor, he restricts her relations with the girl, she can only see her daughter in the presence of the father or during the school breaks.

She brings psychological abuse allegations against her ex-husband. The mother says that during the marriage and also now her husband was and is extremely strict with the girl and all the time the girl or she is not up to his standards he address them invectives like you’re stupid, you’re not good for anything, you are very bad. And now since the little girl lives at her father’s home, she does not want to see her.

2.2 Objectives

The objectives in this case are:

1. Competence assessment of X child to differentiate between truth and false statements;
2. Linguistic competence evaluation of the child X;
3. Identify parenting styles of both parents;
4. Assessment of relations between the minor and the parents and the consequences of parental conflict on child caused by her parents’ divorce.
5. If the child shows behaviours and symptoms caused by psychological abuse, whether in this case the girl X suffers of parental alienation.

2.3. Methods and techniques used

- Clinical Interview
- Clinical observation

- Kelly & Johnson Interview regarding children adapt separation and divorce
- The truth / lie identification protocol (Pivniceru & Luca, 2009)
- Baumrind parental styles questionnaire
- Anatomical Charts
- Family drawing (Jourdan-Ionescu, Lachance, 2003)

2.4. The psychological examinations results

In the interview with the girl’s mother, the subject recognizes she has small weaknesses and flaws, she is ready to act, she is sympathetic and malleable and has a tolerant attitude.

Her way of thinking is predominantly rational although automatic negative thoughts appear: negative forecast scenarios based on past data regarding situation in which she is not being able to exercise her parent role, leading to catastrophic situations overview that lead to weeping.

She wants to communicate with her daughter even in the presence of her husband.

In relation to ex-husband she manifests anxiety, hyper-vigilance taken as a result of strong conflicts and the lack of her daughter, but she has increased tolerance to frustration even in situations when she is censured or her daughter avoid approaching to her. Her behaviour is assertive, including the non-verbal one.

The child’s mother works as a cosmetician, she obtained her job after the separation from her husband.

The father tells that the mother has not took good care of the child, has neglected and emotionally abused her, she is not looking to see her, and the minor runs and that the girl refuses to live with her mother.

The father argues that the mother has not optimal living conditions for the child development and that she is not an appropriate model for the girl, but rather a negative influence.

He also provides information about the mental state of his ex-wife family, without bringing evidence, only pejoratively.

The father is an economist and works in banking and has a busy schedules, he goes home every day around 18.

During the meeting with the father he behaved reluctant and ostentatiously to the mother, the coherence of the communication was altered frequently by updated negative emotions, slanderous to the wife, he exhibited irritability and contempt when speaking about her, his attitude and communication manner were unchanged, including in the presence of the minor.

The interview with father revealed negative scenarios and hyper-vigilance, non-assertive behaviour, including non-verbal. The father shows a tendency to domination, no tact and weighted attitude, he is not malleable, he has an inflexible attitude towards his wife, permissive with minor during interviews. Declaratively, the subject says that he wants his daughter to have a healthy relationship with the mother, but only in his presence, being excluded the possibility for the minor to stay at her mother's home. Paternal grandmother's stories are identical to those of the father. She takes care of the child while her father is at work.

When asked what is the girl's favourite meal and at what age she started to walk, all three adults: mother, father and grandmother gave the same answer.

From teacher reports we learn that the girl X does well at school, is not very sociable, being only friend with her desk colleague that she knows from kindergarten. The teacher noticed that often the girl X is absent, abstracted from the class activities, she does not hear unless she is shouted at, she believes that at this age.

The girl is increasingly aware of her family situation. Teacher also informs us that both the father and the girl's mother are interested in her performance at school and at parent meetings only the father is now present, at the festivities organized by the school both parents are present.

From the telephone conversation had with the mother of the girl friend from school, I learned that the father accompanied the little girl on the trip organized in kindergarten, accompanied her also to birthday parties, that he socialize with the other mothers present, inquiring about the issues related to extracurricular activities recommended for the child's age, the recommended games, etc.

When she lived with her mother the girl remained withdrawn at the playground, she refused to get involved in any game with the mother: doll role play, with the kitchen set, nor in the one with coloured pencils. After 15 to 20 minutes, however, she begun to approach and play with her mother, but remains somehow expectant, not completely involved.

During the first interview and meeting with both parents, the girl was sitting next to father, she urged his approval before each answer, hugged him and held him tightly by the hand.

She jumped to kiss him, complained that her mother is bad because she visits her at school and squeezing her in her arms. Also the girl mentioned that she never sleeps alone, she only sleeps with her father and does not want to see her mother without being accompanied by her father.

Objective 1

By applying the truth/lie identification protocol we discovered that the girl X has the ability to distinguish between truth and false actions and statement (Pivniceru et al., 2009).

Objective 2

From the clinical interview and clinical observation we concluded that the child has normally developed for her age (Papalia et al, 2010). Her physical appearance is normal (X child is 33 kg and 146 cm height).

From a cognitive point of view – the child is at a concrete operation stage (can certainly use a map, knows the physical attributes of objects, she can sort objects into categories and range upward or downward, she knows how to count and do simple calculations)

The language development is normal (has the ability to understand and interpret oral communication and make herself understood, sentence structure being complex).

After Anatomical Charts were applied, we could observe that the child distinguishes between sexes and that she has specific anatomical knowledge, without giving evidence of reticence, embarrassment or adverse reaction to the drawings.

Objective 3

From the Baumrind questionnaire regarding parenting styles, one can conclude that the child's father has a predominantly authoritarian parenting style. According to this parenting type, children must strictly follow the rules set by parents.

Typically, the failure in complying to rules leads to punishment. Asked to explain why he imposed a certain rule, the parent might answer, "Because I said so." These parents have high expectations from their children and are not responsive to their needs. As a consequence children are obedient and proficient, but they have low confidence and self-esteem.

The child's mother has a permissive parenting style. Such parents have little expectations from their children, which is why rarely happens that this type of parents discipline their child.

According to Baumrind, permissive parents are more receptive to requests from the child, not impose its mature and responsible character and avoid confrontation.

Typically, indulgent parents adopt the status of a friend in front of the child, not of a parent. These types of parents often raise children prone to problems with authority and with not very efficient school results.

Objective 4

The girl is a normally developed child, the father took care of education and to fulfil the responsibilities of a parent, has a close relationship with the girl, however, beyond these unquestionable, qualities he became a possessive hyper-protective parent, who takes decisions alone, and that developed fear of possible danger that an irresponsible labelled mother would assume.

Currently, the child was turned into the father's confidant, the father communicates his resentment to the child, maintains a false conflict between the child and her mother.

The mother didn't have the opportunity to network with the minor authentically through daily care activities, walks, lessons, meals etc. during which to be perceived as a mother and to minor to be able to create her own perceptions.

Objective 5

"My mother has a negative influence on me", "My mother is bad, she comes to school and squeeze me in her arms, I don't like it", "I do not want to go to my mother's!", "Mother does not have normal living conditions! " are child X words expressing rejection towards her mother and flatly refuse contact with her. On the other hand the mother proves no parenting deficiencies, was not abusive behaviour to the child and the child's perception is therefore unrealistic and distorted significantly, the child's vision is extremely negative and she has exaggerated reactions.

Also the language of the little girl is not specific for her age nor for her general communication style "Mother has a negative influence on me," "mother does not have normal living conditions", and even more, these are phrases borrowed from her father's speech. The anxious behaviour of the child that we observed is not consistent with her father's description of facts, he claims that the child is sociable, talkative and without symptoms of separation anxiety when going to school or other places, the child behaves so only when she is to be taken to her mother's and also shows neuro-vegetative symptoms (spots or skin irritation) when she gets in contact with her mother.

As a conclusion the following statements can be distinguished:

- The girl distinguishes between truth and falsehood.
- The level of child development and psychosomatic language is normal for a child of her age.
- The father's statements regarding the general mental state of the child does not fit with the observations resulting from the interview and

from teacher reports, the child shows an anxious behaviour.

- The daughter refuses any contact with the mother, although the mother does not prove parental deficiencies and was never abusive with the child
- The language used by the girl when she express her disagreement with the mother is not age-specific nor it is similar to her general way of communication style, but coincides to confusion with the expression of the father.
- The father became a possessive parent, hyper-protector, who takes decisions alone, afraid of the possible dangers that an irresponsible labelled mother would entail.
- Mother turns out to be a good parent, but without a portfolio.

Thus one can speak, in this case, of parental alienation, the girl's father proved to be an Alienating Parent.

Parental alienation has been found, so the girl X is psychological abused. Psychological abuse is "a way of behaviour that affects the child's emotional development or self-esteem" (Luca, 2014)

3. CONCLUSIONS

Long-term consequences of parental alienation as of any other forms of psychological abuse are:

- "Anxiety, depression, low self-esteem, negative view of life and suicidal ideation"
- "Emotional instability, instability Borderline, impulse control problems, indifference, substance abuse and eating disorders"
- Problems with social skills and antisocial behaviour including attachment disorders, behavioural self-isolation, social skills scarce, low empathy, addictions, indiscipline, maladjustment sexual aggression and violent behaviour, delinquency and crime;
- Learning: Problems regression of mental competency evaluation and lower intelligence, lack of impulse control, learning problems, poor school results, impaired moral reasoning;
- Impairment of physical health: psychogenic allergies; asthma or other respiratory disorders, hypertension (as cited in Luca 2014).

Given these severe consequences of long term emotional abuse, one can believe it is in the interest of the girl to benefit from the presence of optimal balanced, models in her life, thus individual and family psychotherapy is recommended in this case, to rebuild the relationship between parents and between the girl and her mother, to the best interests of the

child and in order to avoid the serious consequences that parental alienation may have on long-term.

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