

SPECIAL ISSUE ARTICLE

Parent-child contact problems: Family violence and parental alienating behaviors either/or, neither/nor, both/and, one in the same?

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Abstract

This article argues that in order to intervene effectively and ethically with children who are manifesting Parent-child contact problems (PCCPs) after parental separation, we begin by being mindful of what is normal about divorce transitions and use developmentally appropriate and culturally sensitive analysis to rule out children's common transitory reactions. It is then important to concurrently assess for both family violence (FV) and severe parental alienating behavior (PAB) on the part of both parents, which can co-occur in some cases. The article asserts that it is also important to consider common problematic parenting responses that may potentiate the PCCP but not necessarily rise to the level of abuse. FV is defined as a child's direct experience of physical, sexual, or psychological maltreatment and indirect exposure to sibling abuse and/or to intimate partner violence (IPV). PAB is defined as an ongoing pattern of unwarranted negative messages on the part of one parent that conveys that the child's other parent is disinterested, irrelevant, dangerous, and not to be trusted. Any one or all of these factors may contribute to a child's strident negativity and sustained rejection of one parent, these being defining features of a PCCP. This article proposes ethical principles and priorities for decision-making in these cases, considering the growing social science controversy about assessment and intervention for PCCPs. It concludes with

an analysis of recent, contrasting policy approaches to PCCPs (e.g., Kayden's Law and the Joint Statement of the AFCC and NCJFCJ) and their potential impact on family justice system professionals and the families they serve.

KEYWORDS

domestic violence, intimate partner violence, Kayden's law, parental alienating behaviors, parental alienation, parent-child contact problems

Key points for the family court community

- This article provides more precision in defining Parent-child contact problems, Family Violence, Parental Alienation, and Parental alienating behaviors.
- This article asserts that in addition to forms of violence in families such as sexual and physical abuse and IPV, severe PABs represent a form of FV akin to psychological maltreatment.
- We offer a framework that prioritizes the safety of child and victim parents, with a focus on safety in the face of parental conduct that is damaging, possibly abusive, not protective.
- Two recent public policy approaches to addressing Parent-child contact problems, Kayden's Law and the NCJFCJ/AFCC's joint statement are discussed.

Parent-child contact problems (PCCPs) refer to a spectrum of family dynamics that result in a child developing resistance and sometimes refusal to have contact with one of their parents. PCCPs occur on a continuum of severity, legal and psychological interventions have been developed to attempt to fit the nature and severity of the particular case (Fidler & Bala, 2020, Judge & Deutsch, 2016). Some common reasons for PCCPs developing can include historically limited marginal parental involvement in the child's life, poor parental attunement to the child's needs, and the poor handling of children's normal developmental adjustment to shared parenting arrangements (developmental and attachment issues, dissatisfaction with current parenting arrangements, etc.). Other common reasons include children's response to interparental conflict (aligning with a parent to cope with being caught in the middle of parental conflict), and children's response to severe problems in parenting and coparenting.

PCCPs can be a response to family violence (FV), which is an umbrella term for various kinds of violence that include child abuse, neglect, and intimate partner violence (IPV). Parental alienation (PA) is a type of PCCP where a child, for no adequate or justifiable reason, expresses negative attitudes, beliefs, and behavior toward one of his/her parents primarily due to the preferred parent's denigrating attitudes, beliefs and sabotaging behaviors. A finding of PA should only occur when the dominant single factor contributing to the child's resistance and refusal is a pattern of PABs by the preferred parent.

Multi-factor models of PCCPs assert that, although one factor may dominate its contribution to the PCCP, more typically, PCCPs stem from many, interacting factors that have contributed to the current situation (Drozd & Olesen 2004; Fidler & Bala, 2010; Johnston & Sullivan, 2020; Kelly & Johnston, 2001; Olesen, 2021). Therefore, effective assessment and intervention requires a multi-pronged understanding and approach to the problem that incorporates the entire family system.

PCCPs are increasing in prevalence in the family justice system, particularly in more adversarial processes such as parenting plan evaluations and litigation (Bala et al., 2010; Harman et al., 2022; Lorandos, 2020; Marques et al., 2020). This increasing prevalence is likely the result of several social/cultural and legal movements in the last half century, including advocacy movements to advance awareness and interventions to protect family members impacted by IPV, the father's rights movement and their efforts to advocate for more equal paternal involvement and shared parenting time, and the recognition that children's voices must be meaningfully considered in legal proceedings that impact them (Johnston & Sullivan, 2020). These advocacy movements, each one laudable in their primary intent, have collided in ways that create conflicts between groups. The conflicts have trickled down to social science researchers and practitioners in the family justice system who, in their efforts to understand the issues and support children and families in practice, have unwittingly, replicated conflicting advocacy stances. The tensions and conflict that begin by earnest attempts to redress inequities in the court system get further exacerbated by adversarial court processes, contributing to further polarization as well as actual and/or perceived victimization on all sides. The internet has widened the scope of the problem by way of unvetted sources of information, such as blog sites, personal narratives in the public domain through books, magazines, and social media. Parents have easy access to "unvetted information from unknown, often biased and irresponsible sources" (Johnston & Sullivan, 2020, p. 277). Further, search algorithms operate in ways that give priority to selective information based on the individual user's previous search history. Thus, individuals obtain information from sources that, without their awareness, reinforce their view in a feedback loop, contributing to the polarization evident in the professional context of high conflict parenting disputes. Inflamed by biased perspectives and misinformation, conflicts between parents get supported and heightened, leading to disputes that swirl around the children, increasing the risks of long-term negative sequelae for all family members.

MANY TYPES OF PCCPs

Despite the rapidly expanding research and clinical attention given to one subtype of PCCP, parental alienation (PA) (Lorandos, 2020; Sheehy & Lapierre, 2020), understanding how to differentiate dynamics occurring across the spectrum of distinct but interrelated PCCPs in vulnerable separating families and intervene accordingly is still an elusive enterprise in family law.

In the process of polarization, FV concepts are often pitted against those of PA, vying for endorsement as legitimate social problems. There is a strong social science base regarding the negative, often traumatic, impact of IPV and child maltreatment on children and parents who have experienced these types of Family Violence. The literature on PA phenomena is less robust but developing quickly. For example, Harman et al., 2022 reports a 40% increase in parental alienation research, defined broadly, since 2016. Similar trends have been reported by others (Lorandos, 2020; Marques et al., 2020; Templer et al., 2016). It is well accepted that strategic deployment of PABs manifest as extensions of male-controlling battering in domestic abuse situations with some frequency. Some authors hold that parental denigration of the other parent can be another form of FV, perpetuating ongoing coercive control in the coparental relationship through the children (Harman et al., 2021; Warshak, 2015). Others argue that PA, a specific form of PCCP where one parent consistently and emphatically undermines the child's relationship with the other parent, can be falsely alleged in court proceedings as a counterattack to allegations of Family Violence (Meier et al., 2019; Milchman, 2019). These polarizations mirror the myth that a child who resists or refuses contact with a target parent is either a victim of abuse by that parent or a victim of PABs by the preferred parent, but not

both (Johnston & Sullivan, 2020). Cases are frequently presented in court as false dichotomies in which the child's preferred parent is the alienator or PA perpetrator and the rejected parent is the innocent victim, or the child is resisting or refusing access to a parent because they have been a victim of maltreatment. In fact, the PCCP may derive from a complex interplay of multiple dynamics occurring within the family over time.

The confiscation inherent in definitions of PA juxtaposed against IPV is augmented by the fact that “concept creep”¹ has led to an ever-expanding list of behaviors and attitudes that are included in the definition of PA. As Harman et al. (2022) note, the research literature on PA appears to be less substantial than the volumes of related studies that capture the same phenomena using different terminologies (p. 1890). Allegations of PA are now used to explain false allegations of child abuse or neglect against a rejected parent; to counter evidence of IPV and/or child maltreatment; to label efforts by an abusive ex-partner; to maintain coercive control. It also responds to relocation petitions, parental abduction situations, and over-restrictive gatekeeping of an unfriendly, unsupportive, non-cooperative ex-partner. The lack of clarity is further confounded by the problem that no bright line exists addressing adverse parenting practices between abuse and non-abuse in parenting plan dispute cases in family courts. Despite agreement that a finding of IPV and/or child maltreatment precludes a finding of PA (Fidler et al., 2013), there are no universal criteria to define these distinctions. PA itself is an ambiguous term (Pruett et al., 2023), despite assertions otherwise by PA advocates (Bernet et al., 2010; Harman et al., 2022). Does it mean the parent is the alienator or the child is alienated, either or both? What is the relationship between PABs and PA? Imprecise language in the definition is problematic because it sets up tautologies (the name describes the outcome it is supposed to measure), and the lack of consensus in the field (Pruett et al., 2023) does not allow for the nuanced distinctions that would resolve the problems of ambiguous concept names created.

This article begins with the premise that PA/PABs and Family Violence are real phenomena—and that the scope, prevalence and developmental implications of these phenomena necessitate urgent empirical, clinical and public policy responses. For that to happen productively, the field must come together not in its beliefs, but in its definitions, understanding the relevance of science and differentiation of how these dynamics (individually and in combination) are imperative to assessment and subsequent delineation of appropriate interventions. Implications for assessment, intervention, and public policy will be discussed.

TOWARD A CALCULUS OF ETHICAL PRINCIPLES FOR INTERVENTION IN PCCP CASES

Mounting evidence exposes the developmental risks children face when one parent “shuts down” their relationship with another parent who has not been violent (Harman et al., 2018; Von Boch-Galhau, 2018). Moreover, children (especially very young children) benefit from having relationships with two or more good enough caregivers (Ryan et al., 2019). Apart from the risks to child well-being, the problem of PCCPs raises a myriad of human (civil) rights and ethical issues. The family courts have been accused of institutional gender bias and justice system practitioners of procedural injustice in their attempts to balance the needs, claims, and rights of disputing family members who are also victims of IPV (Meier, 2020). In these matters, accountability and transparency for case disposition follows where a consistent set of ethical principles that guide decision-making can be articulated, especially where relevant facts are ambiguous and social science evidence on the Best Interests of the Child (BIOC) is thin.

Family courts and dependency (juvenile) courts share several priorities in addressing IPV, child maltreatment, and PA cases pertaining to children (Johnston, 2016). First and foremost is to protect the child from abuse and violence. Second is to secure the child's relationship with at least one parent who offers emotional security and physical protection. This is enabled by protecting the denigrated parent's or victim's parent's security and autonomy to care

¹First described by Haslam (2016), concept creep refers to the expansion of a set of harm-related concepts over time. Semantic inflation results in the inclusion of an increasingly wide range of phenomena referring to one concept (also see Haslam et al., 2021). The “creep” often is motivated by political actors (Sunstein, 2018) wanting to strengthen their advocacy position by broadening the sense of its breadth and influence.

for the child. The third priority is to promote and protect the child's involvement with and access to both parents, assuming safety and security are in place (Johnston, 2016). Moreover, the courts in democratic societies must proceed to maintain the freedom and civil rights of all individuals, including children, from undue, unwarranted, or disproportionate state interference. A child-centered approach (BIOC) involves never relinquishing the first and primary priority. The second and third priorities are revisited when safety is achieved, with the goal of achieving parental inclusivity once safety and security are established or court orders and/or interventions are in place to support and monitor progress toward rehabilitation and repair. This hierarchy of child protection is impossible to achieve if practitioners and professionals are confused about the definitions and meanings of the terms and dynamics under consideration: yet recent research suggests that this is precisely the situation.

In a large study of family court professionals, the current authors found that among 1049 experienced family law professionals, respondents were evenly split in their belief that they understand the difference between PA-related terms (Pruett et al., 2023). Their consensus was that PA is a valid phenomenon with PABs a common occurrence. Demonstrating the endorsement of conflicting beliefs, PA was understood to co-occur with other types of Family Violence yet there was no consensus, and over half of respondents were undeclared about whether PA more often co-occurs in parenting plan dispute cases alleging IPV. In all, a third of respondents believe that PA is a flawed concept, and as an example of the confusion in the field, nearly half endorsed that PA can occur without the central defining feature of the concept (i.e., a parent who intentionally alienates a child from the other parent). The data indicated confusion about the role of this single dominant construct. Even with the current amount of writing and research about PA concepts, unfortunately there no prevalence data on what is a common PCCP case where a dominant single factor of IPV, child maltreatment, or PA is alleged and not found, so that ultimately other factors are contributing to the PCCP.

THE SINGLE-FACTOR PA THEORY

The dominant or single-factor version of PA arguments (Johnston & Sullivan, 2020; Joyce, 2019) offer a deceptively simple explanation and legal remedy: a child's unwarranted negative attitudes and behavior toward a target parent, with whom they had a previously good relationship, are primarily due to the PABs of the preferred parent. The *cause* (A) is systematic programming by a favored parent; the *effect* (B) is manifestations of programming in the child, and the *remedy* (C) in severe situations is change of parenting time to the target parent and isolating the child from the preferred parent. This transfer was reported as being "very effective" in "severe" cases of PA (Harman et al., 2022, Warshak, 2010), as were orders for the child to spend more time with the rejected parent (Warshak, 2019). However, the single-factor theory assumes that child abuse and IPV have been ruled out, as have alternative explanations for PCCPs. Yet clinical experiences reveal that PA and FV dynamics often exist in tandem, and court evaluations are rife with clinicians trying to separate the contributing factors to recommend interventions. In addition, many PCCP cases have no evidence of either FV or PA/PABs (even though one or both may be alleged). Clearly, the A-B-C theory does not adequately account for context, as does the multi-systemic theory below. Moreover, research is lacking that contains clear definitions of PA/PABs, showing there are not clear distinctions between the concepts and their concomitant behaviors and outcomes.

Problems arise when practitioners and legal professionals overstate the social science evidence under pressure of scholar advocacy for decisions, assume a deterministic rather than a probabilistic relationship among the variables contributing to A and B above, confuse association with causation, and confuse ideology with scientifically derived evidence. If this confusion is influencing the field, then we cannot expect better outcomes for the children and families with whom we are working clinically or legally.

THE MULTIPLE-FACTOR PCCP THEORY

The literature on PCCPs provide several multi-factor, system-based models that identify the complex interplay of many factors within individual family members (personality vulnerability in parents, child temperament, age),

between family members (interparental conflict, pathological parent–child attachment), extended family influences (grandparents, new relationships), and factors external to the family (involvement by mental health professionals, court, or social service agencies) that can contribute to PCCPs (Kelly & Johnston, 2001; Johnston & Sullivan, 2020). These models caution family justice professionals against making prior assumptions about any singular or dominant “cause” of a child’s rejection of a parent in any case. This is particularly when other specified factors are present and rather encourage an approach to these cases that systematically assesses all factors that contributed to the current family dynamics to effectively intervene in any particular case. Drozd et al. (2020), for instance, suggest a decision tree that includes consideration of normal developmental affinities for one parent over another at various ages and stages, responses to abuse (child, IPV, parent substance abuse), child vulnerabilities stemming from childhood experiences or problems, and parenting difficulties such as behaviors toward the child that are too rigid or lax, overinvolved and intrusive, mis-attuned, or denigrating of the other parent. Fidler & Ward (2016) describes factors that differentiate characteristics and severity of the PCCPs, and models for gathering and analyzing information garnered about a particular family in a structured and consistent manner. Another approach posits four primary factors that predict outcomes in treatment (Johnston & Sullivan, 2020).

According to this multi-factor theory, an array of developmental and problematic factors can combine to create an alliance with one parent against the other. PABs by the preferred parent is an important but not necessarily the dominant factor accounting for PCCPs characterized by children’s resistance or refusal of contact with a parent following parental separation. The context of behaviors and emotions of all family members include influences on children’s negative stance toward one parent deriving from child, parent, coparent, parent–child, sibling, and multi-generation (e.g., grandparent) characteristics.

Even in the more prevalent types of PCCP situations, for example where a child’s response to IPV or parenting problems, including maltreatment, is the dominant factor in a child’s resistance to contact with a parent compared to the less prevalent situation where the PABs by the favored parent is the dominant single factor in a child’s resistance to a parent, approaching cases with an “anchoring bias” is likely to lead to errors in accurately identifying critical case dynamics. An anchoring bias is an assumption or bias that we generate as our first impression of a case. It’s our initial “take” and sets up the likelihood of another common cognitive bias, confirmatory bias, where we selectively collect and evaluate information to confirm the initial bias (Simon & Stahl, 2014). Anchoring biases may dominate for a variety of reasons, including but not limited to insufficient professional training in assessment of all topics related to PCCP cases, professional practices that have a specific emphasis (particularly IPV and PA), personal experiences that impact views, media information sources that are biased, and an ongoing predominant association with advocacy positions or groups. This latter example is known as the “echo-chamber phenomenon”.² By participating in an echo chamber, people are exposed solely to information that reinforces their existing views without encountering opposing views, potentially resulting in an unintended exercise in confirmation bias. Echo chambers may entrench social advocacy positions and extremism, which trickle down to all of our social institutions, including the family justice system.

Preventing these source biases can be helped by assuming a multifactor approach to data collection and analysis with four recommendations: (a) approaching each case individually and testing multiple hypotheses while collecting information and considering both confirming and disconfirming data; (b) using structured protocols and checklists for screening and assessment (e.g., B-SAFER for IPV – Storey et al., 2014; Kebbell, 2019; Decision Making Trees for Parenting Plans and Custody Evaluations—Drozd et al., 2013; structured data collection for PCCPs—Fidler & Ward, 2016); (c) training in all areas of study relevant to PCCPs, especially those areas of subspecialty with which the professional is less familiar; and (d) engaging with professionals from other specialties that emphasize or advocate positions in the field.

²“... an echo chamber refers to situations in which beliefs are amplified or reinforced by communication and repetition inside a closed system and insulated from rebuttal”. Echo chambers limit exposure to diverse perspectives, and reinforce presupposed narratives and ideologies. [https://en.wikipedia.org/wiki/Echo_chamber_\(media\)#:~:text=In%20news%20media%20and%20social,system%20and%20insulated%20from%20rebuttal.](https://en.wikipedia.org/wiki/Echo_chamber_(media)#:~:text=In%20news%20media%20and%20social,system%20and%20insulated%20from%20rebuttal.)

In clinical roles, professional guidelines offer considerations for best practices, such as the Guidelines for Court Involved Therapy created by a Task Force of the Association of Family and Conciliation Courts (AFCC, 2009) and (also see the white paper article regarding the Guidelines by Fidnick et al., 2011). The Guidelines enumerate best practices that include assessing levels of court involvement, identifying professional responsibilities, maintaining advanced training and competency levels, avoiding multiple relationships that could represent a conflict of interest, making clear fee arrangements, obtaining informed consent, maintaining privacy, confidentiality and privilege, following recommended procedures and methods, keeping appropriate documentation, and paying attention to what is communicated to whom in a case. These guidelines attempt to support professionals acting in a child's best interests at the highest level of professional responsibility, that focuses on holding multiple hypotheses and engaging in procedures that are comprehensive, balanced, fair, and sensitive to ethical dilemmas rife in psycho-legal work.

CONCEPTUAL DISTINCTIONS BETWEEN PCCPs, PA, IPV AND CHILD MALTREATMENT

We have argued that PCCPs include a complex spectrum of issues that can result in a child developing resistance and refusal to have contact with a parent. PCCPs are not equivalent to PA, IPV, or child maltreatment. In fact, from our clinical experience, cases where a dominant single factor drives a PCCP, such as FV or PA, are not as prevalent nor as challenging to address as are cases where multiple factors contribute to the problem. Even more challenging and quite common are the PCCP cases where neither FV nor PA are “found,” and there is a mandate (by agreement of the parents or the court) to address the PCCP by working to reconnect the rejected parent and child. In these cases, children resist and refuse contact with a parent without an abuse-related reason, yet behave and express negative opinions adamantly and often vehemently. Whereas both parents can be assessed to support the child's relationship with the rejected parent, the child's well-being is pitted against the rejected parent's desire for a relationship, eliciting angst among all members of the family triad and professionals involved.

WHY THESE DISTINCTIONS MATTER

While debates about definitions and appropriate interventions swirl within scholarly circles, (Bernet et al., 2010; Meier et al., 2019; Milchman et al., 2020; Nielsen, 2018; Warshak, 2020; Harman et al., 2022, Fidler & Bala, 2020, Hardesty and Ogolsky, 2020) in the trenches of the family courts and with professionals who work in these complex, real-world cases, the impact of poorly managed increasingly intractable PCCPs on children are experienced in our daily work. Cases presenting with child maltreatment, intimate partner violence and parental alienation all create challenges, risk, and complexity to understanding and intervening in the case. Lost in these debates is that many types of PCCPs can contribute to extremely adverse child developmental impacts. A wrong decision can result in a child's loss of bonds to one or both parents (Warshak, 2019). Waiting too long to figure out what is happening in the family can lead to entrenchment of the child's avoidance of the rejected parent. Multi-generational consequences may include loss of extended kin relationships. At the severe end of the risk continuum, safety risks such as a child living in the exclusive care of a disturbed or abusive parent or death, highlight the ultimate potential risk to children in these cases (Meier et al., 2019). Also tragic are “parentectomy” outcomes where a parent and their side of the family are expunged from a child's life by the ongoing campaign of PABs perpetrated by another parent (Baker, 2005).

With so much at stake, it is imperative to maximize concept precision, accurate assessment, and treatment planning as early in the identification of PCCPs as possible. The likelihood of these pernicious outcomes is minimized when professionals correctly understand and assess the problem while recommending appropriate treatments. With overlapping characteristics in subtypes of PCCPs, the risk of assessment errors are high when referring a family for

PA intervention without recognizing that restrictive gatekeeping behaviors (Austin et al., 2013) can serve as the protective basis for one parent cutting off another from a child, and can risk doing further damage to the family. Similarly, in some cases, missing one parent's controlling and coercive behaviors that damage or severe a child's relationship with an adequate parent has damaging consequences that are very difficult to mend.

PARENTAL ALIENATION

We have asserted above that the definition of PA is often missing the context central to the concept. PA is used to refer to the alienating behavior of the parent, the characteristics of an alienated child, and a theory of how alienation occurs. PA refers to family situations where a child, for no adequate or justifiable reason, expresses negative attitudes, beliefs, and behavior toward one of his/her parents primarily due to the preferred parent's denigrating attitudes, beliefs and sabotaging behaviors (Baker, 2005; Bernet et al., 2010; Gardner, 2002). We argue that PA is a type of PCCP where the dominant single factor contributing to the child's resistance and refusal is a pattern of PABs by the preferred parent. When the PCCP has multiple contributions, these cases are not PA cases; they are another type of PCCP case. Similarly, child estrangement is a type of PCCP, where the dominant single factor contributing to the child's resistance and refusal to have contact with a parent is a response to the rejected parent's behaviors (past or current). These can be child maltreatment, intimate partner violence, or deficient parenting practices, including PABs by the rejected parent.

What are parental alienating behaviors (PABs)?

PABs are defined as “an ongoing pattern of observable negative attitudes, beliefs and behaviors of one parent (or agent) that denigrate, demean, vilify, malign, ridicule, or dismiss the child's other parent ... together with the relative absence of observable positive attitudes and behaviors, (affirming the other parent's love/concern for the child, and the potential to develop and maintain the child's safe, supportive and affectionate relationship with the other parent)” (Johnston & Sullivan, 2020, p. 283). Harman et al. (2018) further state that PABs are not discrete events, they are enacted over time and alongside other behaviors with the intent of hurting, damaging or destroying the child's relationship with that parental figure and/or that parental figure themselves.

PABs are observable behaviors by parents that can contribute to a child's emotional distancing or rejection of one or both parents. For example, in some cases, PABs have a damaging impact on the child's relationship with both parents (Rowen & Emery, 2019). In higher conflict shared parenting arrangements or in cases where the child has more of an alliance with one parent (stronger attachment, more dependency, more parenting time, etc.), the impact of parents who engage in PABs typically have a differential effect on the other parent-child relationship, creating an “unholy alliance” (Johnston et al., 2009). This further reinforces the child's negative view and rejection of the parent with whom the child is not aligned. Professionals in family law consider PABs to be emotionally damaging to a child (Pruett et al., 2023), which when severe, are a form of child maltreatment and FV characterized by coercive control (Von Boch Galhau, 2018; Harman, et.al., 2018; Harman, et al. 2020; Milchman et al., 2020).

WHAT IS FAMILY VIOLENCE (FV)?

In this article, we define Family Violence as child maltreatment (physical, sexual, emotional) and intimate partner violence (IPV) which has traumatic impact on the domestic partner and on the child both through direct and indirect exposure (AFCC Guidelines for Examining IPV, 2016; also see the Battered Women's Justice Project, <https://bwjp.org>). We further assert that in addition to these forms of violence, severe PABs occurring in parenting plan dispute

cases, is a form of FV akin to psychological maltreatment. The American Professional Society on the Abuse of Children (APSAC) defines psychological maltreatment as “a repeated pattern or extreme incident(s) of caretaker behavior that thwart the child's basic psychological needs (e.g., safety, socialization, emotional and social support, cognitive stimulation, and respect) and convey a child is worthless, defective, damaged goods, unloved, unwanted, endangered, primarily useful in meeting another's needs, and/or expendable” (APSAC, 2019). Legal definitions vary across states and may include both indicators of the perpetrator's behavior and the effects on the child, more often focusing on the child's outcomes.

Six subtypes of psychological maltreatment are identified, with the one most relevant to the present paper being *Exploiting/Corrupting*. This describes caregiver acts that encourage the child to develop inappropriate behaviors and attitudes (i.e., self-destructive, antisocial, criminal, deviant, or other maladaptive behaviors). Among others, these acts are characterized as modeling, permitting, or encouraging betrayal or being cruel to another person. These acts also subject the child to belittling, degrading, and rejecting treatment of parents, siblings, and extended kin, coercing the child's submission through extreme over-involvement, intrusiveness, or dominance, and manipulating or micro-managing the child's life (e.g., inducing guilt, fostering anxiety, threatening withdrawal of love, placing a child in a double bind in which the child is doomed to fail or disappoint, or disorienting the child by stating something is true/false when it patently is not). The acts may contain emotional unresponsiveness (ignoring) and *Isolating*, with the latter being caregiver acts that consistently and unreasonably deny the child opportunities to meet needs for interacting/communicating with peers or adults inside or outside the home (APSAC, 2019).

In accord with our own assertions, APSAC's definition suggests that severe PABs reach the level of child maltreatment. The pattern of regular denigration aimed at controlling the child's access to the other adequate parent and negatively impacting their affection for that parent exploits and corrupts that parent-child's relationship. Such parental behaviors are detrimental to the welfare of children. The implication of a child's rejection of a parent in response to PABs from the other parent are without basis for physical and psychological protection and are maladaptive. This must be handled by courts and practitioners as a situation of abuse.

What is the distinction between other subtypes of FV and PABs?

As noted, PABs are problematic and harmful to children because they promote enmeshment or other problematic parenting behavior but may or may not rise to the level of child maltreatment. These behaviors deprive children of positive parenting and create conditions in which children's sense of security to both parents is undermined. Children having two (or more) secure relationships to parents is more favorable than having one or none (Sagi & Van IJzendoorn, 1996; Lamb, 2021). Moreover, when parents are in conflict and adolescents feel caught between them, they are less likely to feel close to both parents, which is associated with poor adjustment (Buchanan et al., 1991). In this way, extreme patterns of PABs are part and parcel of child maltreatment. These PABs constitute a form of coercive control perpetrated against the other parent through the coparenting relationship. For example, false allegations of FV (IPV, child maltreatment and PAB's) can create turmoil and trauma in the family and contribute to the temporary disruption or permanent loss of an adequate parent. They are also a form of coercive control because they exploit the child as a tool of the perpetrator against their other parent (Harman, et al. 2018; Drew, 2022). But sometimes the false, distorted allegations against a co-parent are evoked by paranoid beliefs or delusions that the parent cannot separate from reality; more often than not, the child cannot separate them either. The damaging outcome calls into question whether a conscious, malicious motivation is a necessary condition of perpetrating FV in all its forms. The parent's behavior must be considered as an issue of abuse regardless of intent, so that outcome/impact is given precedence over intent.

Whether PABs reach the level to constitute FV depends not only on intent, but on severity and context. Not all parental behaviors that resemble PABs are indicative of FV and some can be protective of a child and a preferred parent (Milchman, 2021). However, PABs can be part of a coercive and controlling pattern with a co-parent and/or

coincide psychological maltreatment of a child. The problem exists most powerfully in the gray zone where no dominant single factor for the child's rejection of a parent is assessed. There are no clear demarcations about when the kinds of damaging parenting behaviors inherent in high conflict divorce or separations among psychologically vulnerable parents are frequent enough, severe enough, or impactful enough that the behaviors become a pattern that slips into the red zone of PA, IPV and child maltreatment. These are the cases in which controversy festers and reproduces time and again in the family courts.

CLINICAL IMPLICATIONS FOR ASSESSMENT AND INTERVENTIONS IN PCCP CASES

Differential assessment

Adding to the challenges and controversies of asserting that PABs can be a form of FV, parental behaviors alleged to be PABs can be protective of a child (Milchman, 2022). That is, the same observable parental behaviors, such as not supporting contact with the other parent, can have different intent and impact depending on the familial context in which they occur. The extreme examples of a parent filing a restraining order or making a report of child abuse exemplifies this issue. These actions can be appropriate and necessary on the part of a parent to protect themselves and their child from FV. That same action, particularly if malicious, can have a devastating impact on the other parent's contact and relationship with their child. In fact, the intent of the parent's action may be protective or well-meaning rather than malicious and coercively controlling, but such protection can be damaging. Take, for example, the parent who misinterprets the behavior of the other parent as dangerous or abusive due to residue of their own past trauma experience or the child's distorted reports of their experience with the other parent, what happens when that parent takes action with the court based on these distortions? With the child initiating or supporting the views of the parent engaging in that behavior, a determination that the behavior constitutes PABs is more challenging to prove. Family court professionals are faced with determining these crucial distinctions in cases where a PCCP is present, but its genesis is unclear. The possible mis-assessment of what type of PCCP is occurring puts the child's welfare at risk and complicates efforts of professional help working in the family courts, thus, increasing professional risk and exacerbating the conflict. (Warshak, 2020).

An additional challenge of differentiating PABs from protective parenting behaviors is that the child's voice, which is critical to the determination of their best interests, is typically aligned with the views of the parent alleging IPV or child maltreatment by the other parent. In these cases, it is our experience that the child's voice can have a biasing impact on child protective service involvement that favors a finding of those forms of FV. Finally, child protective service investigations typically make findings of whether abuse/neglect have occurred and rarely address false allegations as PABs that are emotionally/psychologically abusive to a child. This investigative bias can result in the greater likelihood of multiple false allegations by a parent and/or "forum shopping" as they receive no negative consequences for that psychological maltreatment of the child.

An encouraging approach that assists the differential assessment of parenting behaviors that contribute to PCCPs has been provided by Madelyn Milchman (2022). The author's protocol assists in the clinical and forensic assessment of the causes of parental rejection in parenting plan dispute cases. The Multidimensional Assessment of Causes of Parent Rejection (MAP) provides a schema to assist the interpretation of data collection to help differentiate protective parenting behaviors and PABs (Milchman, 2021). The MAP model lists behaviors that have been identified as PABs in the social science literature, asking the question, "What else could cause a parent to engage in that behavior?" It encourages a deeper investigation of parental behaviors that can help discern whether a particular behavior, such as contact interference, bad mouthing, or allegations of FV by a parent are PABs or protective parental behaviors. Similarly, it encourages an investigation to interpret whether child behaviors in a specific case, (such as making allegations of abuse, providing frivolous reasons or borrowed scenarios to justify their rejection of a parent),

show complete lack of ambivalence in their negative views of a rejected parent. Further, does the child ally with the preferred parent, or respond in a disproportionately rejective way? Is the child's behavior consistent with an abuse-related response, influenced by PABs, or in response to other factors impacting the child within or outside the family system? The MAP protocol has the benefit of providing assessment guidance for each potential cause of a PCCP, it organizes them sequentially, incorporates external evidence, and makes a review of the expert's evidence more transparent by requiring the weighing of corroborating and disconfirming evidence. This assumption supports a sequential approach to assessment in PCCP cases where IPV and child maltreatment is distinguished and prioritized over PABs in all cases. That anchoring bias does not acknowledge that in some cases, PABs can be extremely harmful and traumatic to children and abusive to the perpetrator's coparent, so individual case analysis of the presence, severity, and impact of PABs (which are by definition not protective), must be integrated into an analysis, even as safety is prioritized in assessment.

A challenge in the differential assessment of PCCPs of all types, particularly where none of the forms of FV (IPV, child maltreatment and PABs) are found, determines the presence and severity of multiple factors within and outside the family system that are contributing to PCCPs. For instance, even if non-abusive, adverse parenting practices on either or both parents' part, can be harmful to children and promote resistance to contact with a parent, thus contributing to PCCPs. The determination of their severity and impact is critical to designing appropriate interventions. Some current models provide useful differentiation of aspects of family system dynamics that are relevant to assessing the severity of the PCCP and the vital importance of maintaining a "safety first" stance throughout assessment and intervention (Johnston, 2016). These assist in determinations of prognosis and implementation of appropriate legal and psychological interventions.

Measurable aspects of individual behavior (parent and child), relationship patterns (parent-child, coparenting) along with other factors internal to the family system (the health/pathology of family narratives, extended family involvement, etc.) and external to the family (adversarial court involvement, the quality and effectiveness of clinical interventions), are identified in systematic assessment models by several authors (Judge & Deutsch, 2016; Fidler & Ward, 2016; Johnston & Sullivan, 2020; Drozd et al., 2013). These multi-factor models can make the assessment of PCCPs more accurate, which can help legal and psychological interventions better fit the subtype identified (Walters & Friedlander, 2016). Drozd and colleagues have provided a stepwise sequential approach to decision-making about PCCP, which puts child and parent safety first. This guards against anchoring biases in cases that are multi-determined. Moreover, it assists with the sequencing of interventions and highlights ongoing review of the focus of goals and objectives of interventions and its effectiveness (Drozd et al., 2022).

Clinical interventions

Some IPV advocates assert that even interventions that address the subtypes of PCCPs where IPV is not the dominant factor should not be undertaken (e.g., Mercer, 2021). They make the argument that these interventions lack any scientific support of safety and effectiveness necessary to intervene responsibly and ethically. We believe that this stance is flawed for a number of reasons. First, a standard that places a threshold for clinical intervention that requires evidence-based treatment and has randomized controlled trials (RTC) of specific intervention protocols with rigorously identified samples of patients that measure safety and effectiveness before they can be employed, is an unattainable standard for virtually all existing court-involved interventions (Boaz & Davies, 2019; Greenberg et al., 2019; Pruett et al., 2021; Drozd, et.al., 2022). If this standard was applied to interventions addressing the spectrum of PCCP cases, none, including those that are currently employed to cases of IPV, would meet those standards. Further, applying this standard would preclude the development and use of interventions in social science that are already accepted in our field but have not previously been applied to family court situations. These legal and clinical interventions are usually supported by evidence-based practices from other areas of practice that are then applied to the family law population. They are "evidence-informed" treatments.

While the interventions are not evidence-based for this new application, it is a step in the right direction for learning which of them are effective with family court populations. Greenberg et al. quote that the American Psychological Association definition of evidence-based practice (APA, 2021) is “the integration of the best available research with clinical expertise in the context of patient characteristics, culture and preferences.” This science-informed standard is the standard of practice for most, if not all, roles and interventions in the family justice system (Greenberg et al. 2019; Greenberg et al., 2021), including court-involved therapy, co-parenting counseling, parenting coordination, parenting plan evaluation, mediation and interventions with court-involved populations that present with trauma, interparental conflict, special needs children, substance misuse issues and FV. Though caution is prudent, including a rigorous risk/benefit analysis of intervening, prohibiting interventions for a large and vulnerable population because no evidence-base is yet established, is to make “the perfect” enemy of the good.

The development of clinical interventions specifically designed to address the spectrum of PCCPs is no exception to this common trajectory. They apply a variety of existing evidence-informed treatments, including interventions that are psychoeducational (Moran, et.al, 2019), trauma-informed (Deutsch et al., 2020), culturally informed (Harris-Britt, et al., 2021) coping or skills-based approaches such as family systems (Lebow & Reckart, 2007; Greenberg & Lebow, 2016; Faust, 2018), and child-centered conjoint therapy (Greenberg et.al, 2016).

Given the limitations and realities of research on legal and psychological interventions in the family justice system in general, responsible interventions for PCCPs should be tailored to fit proportionately to the severity and type of case. For example, unless the PABs are both determined not to be protective of the child and to have the severity of child abuse and psychological maltreatment, removing the child from the favored parent's care is not a proportionate response. Neither is intervening to protect the child in this situation as emotional harm is occurring, in which case a proportionate response at least initially, should be an evidence-informed family systems intervention (Judge & Deutsch, 2016; Walters & Friedlander, 2016).

A family-systems, strengths-based treatment model responds to the primary mission of family courts creating parenting plans that include both parents, but only after ensuring both physical protection and emotional security are in place for the child and at least one parent who can keep the child safe and secure. In fact, with the “Best Interests” of the child as the objective, principled decision-making involves pursuing four priorities in sequence: (1) protection of the child from harm, (2) security of the child's relationship with a non-offending parent, and (3) accountability and reparation of any violation of the child's lived-experience by an offending parent(s), before attempting (4) inclusion, that is reconciliation and reunification of the child with an offending parent.

There are controversies that inevitably arise from this task, as critiques of the approach assert that particular interventions cannot rely on a sufficient evidence-base to support the verification of successful practice. Yet, Johnston (2016), in reviewing the *Overcoming Barriers* treatment approach to situations where a child strongly and persistently resists or refused contact with one parent for little or no substantial reason states, “the approach draws upon the collective experience of well-seasoned clinicians and is informed by a wide range of research evidence and appears to be relevant to understanding and treating these kinds of problems” (p. 307). This is consistent with science-informed practice. We believe that careful analysis and grounding in evidence-based literature argues for cautious but forward movement, since “doing nothing” is usually too costly for children and families in need of immediate treatment.

Public policy implications

Two recent public policy approaches to the controversies in the family justice system as it struggles to address the challenges and complexity of PCCP cases are compared in this section. One is Kayden's Law (2022), which was a specific add-on language to the Federal omnibus funding bill called the Violence against Women Act (VAWA) of 2022. Kayden's Law prohibits funding associated with the bill for states that acknowledge Parental Alienation as part of the spectrum of types of PCCP. It is based on flawed premises which appear to originate largely from one

preliminary and controversial study (Meier, 2020; Harman & Lorandos 2021; Meier, et al. 2022) and a successful last-minute lobbying effort by a singularly focused advocacy group in Congress just prior to the bill's passage.

There are several problematic impacts of the bill's potential adoption at the state level. First, interventions that seek to address any other subtype of PCCP than those where IPV is present are precluded. The legislation further proposes that judges be prohibited from using their discretion of court-based interventions that have a goal of reunification to a rejected parent where domestic violence has been found to have been perpetrated by that parent at any time. It does not take into consideration the severity of the abuse, the impact of the abuse (precludes a trauma-informed approach), current or future safety issues, any relevant factors in the child's experience in the custodial parent's home (adverse parenting, mental health/substance misuse issues, attachment issues, etc.), and any meaningful positive changes in the abusive parent that may have occurred over time – perhaps as a result of effective treatment. Most concerning is that Kayden's Law mandates for federal funding of programs at the state level appear to extend to all child custody cases where PCCPs are present, not just those where domestic abuse is present. This ignores the huge variety and severity of cases, and contributing factors that we have detailed throughout this article.

Second, training in any topic areas relevant to PCCP other than domestic abuse is not permitted if states want funding. Not surprisingly, PABs are not acknowledged as a possible form of FV, and training in our current understanding of PA as a type of PCCP is mandated not to be included. Third, discretion of judges is limited in PCCP cases to both restrict the existing parenting time for the preferred parent, and to order interventions that address the problems in the family system. For all of these reasons, it is our view that if adopted by states, Kayden's Law will have an adverse effect—not just on cases of PA—but on all cases where families need legal or clinical interventions to address the broad range of PCCP types described in this article.

Another public policy approach was recently published in a joint statement by the Association of Family and Conciliation Courts (AFCC) and the National Council of Juvenile and Family Court Judges (NCJFCJ) (AFCC & NCJFCJ, 2022). In contrast to Kayden's Law, the statement was authored by a joint organization, multi-disciplinary task force, who took two years to finalize the statement. It was informed by a survey of 1049 members of both organizations (Pruett et al. 2023), integrated the available social science on PCCPs, and formally approved by the membership of both organizations.

The NCJFCJ/AFCC joint statement identifies some central problems in the family justice system's efforts to address PCCPs as hampered by “gendered and politicized assumptions that either parental alienation or intimate partner violence is the determinative issue” and “a lack of understanding of different perspectives, education among family law professionals and resources” (p. 1). It provides the following considerations and recommendations to family court professionals that are in contrast to the mandates of Kayden's Law and consistent with the points of this article:

1. In terms of prioritizing the safety of children and parents, “A paramount focus of practitioners working with parent-child contact problems should be to promote safety, interests, rights and well-being of children and their parents/caregivers at all socio-economic levels” Addressing the priority of safety: “Parent child contact issues, once identified, should be uniquely screened for safety and family risk factors, including the severity, frequency and impact”. The risk factors identified include PABs.
2. Addressing screening and assessment in PCCP cases, the statement supports the consideration of all factors that may contribute to PCCPs, and it includes PABs in safety assessment and in professional training to effectively work with families where a PCCP exists. It notes the limitations of relying on social science in the complexities of real-world practice and stresses the importance of examining each case uniquely, to intervene in an effective, child-focused manner.
3. With regard to interventions, the statement supports when referring, recommending or ordering services and interventions for PCCP cases, that they should be proportionate, accessible and accountable.

4. Relevant to professional training, the statement includes PA in a comprehensive list of topic areas relevant to increase the competence and specialized knowledge necessary to work with PCCPs.

CONCLUSION

As if PCCPs were not complicated enough to assess and treat, the lack of conceptual clarity within the field about their subtypes is a significant problem that hinders more effective progress being made to help families facing these painful, often intractable dynamics, with devastating consequences. Since concepts are tools to guide understanding and treatment, increasing their precision is critical to their utility. This article provides greater precision in the distinctions and overlaps between subtypes of FV (IPV, child maltreatment and PA/PABs).

A multi-factor approach to assessment that guards against anchoring biases is essential to the differential diagnosis of subtypes of PCCP. This concept development can help prevent the weaponization of these concepts that frequently occurs in the legal adversarial court contexts that address these issues. We believe it will deter the concept creep that blurs distinctions so that concepts can be argued to be true and false, especially because their definitions become so broad that exceptions and variations are easily identified in every circumstance.

The data is clear: PCCPs are prevalent, harmful to children, and vexing to the family justice system. A differential assessment is critical to designing and implementing proportionate, effective legal and psychological interventions in these complex cases. If PABs are severe, they, like other forms of harmful parenting behaviors, are psychologically abusive to children and can be coercive and controlling to the rejected parent. Therefore, efforts to better differentiate parental behaviors that are alienating or protective like those described in this article are critical.

This article focuses on the definitional clarity needed to support the development of appropriate assessment and effective intervention even when complex dynamics threaten to obscure the clarity sought. Professional understanding of the overlaps and distinctions between PABs, PA, IPV, child maltreatment needs to be augmented. Public policy support of research, practice, and training on all types of PCCPs, best serve the interest of children and families in the family justice system.

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