The American Professional Society on the Abuse of Children™
Strengthening Practice Through Knowledge
apsac.org @The_APSAC

In partnership with THE NEW YORK FOUNDLING
nyfoundling.org
@TheNYFoundling

POSITION STATEMENT
Effective Date January 22, 2022

APSAC Position Statement

Assertions of Parental Alienation Syndrome (PAS), Parental Alienation Disorder (PAD), or Parental Alienation (PA) When Child Maltreatment is of Concern

Background

In 1985, the late Richard Gardner, a child psychiatrist, first posited an alternative explanation to a child's disclosure of sexual abuse in the midst of a divorce and a custody dispute: parental alienation syndrome (PAS). Gardner stated the child would collude with the preferred parent, who 90% of the time was the mother, to make allegations against the less preferred parent, who 90% of the time the father, of various transgressions, culminating in an allegation of child sexual abuse. Gardner described PAS as a collaboration between the alienated child and the preferred or alienating parent. In addition, Gardner asserted that the mother might enlist the aid of clinicians, whom he pejoratively entitled validators, in asserting that the child had been sexually abused. Gardner further stated that the vast majority of incest cases were true, but the majority of allegations of sexual abuse in divorce were false (Gardner, 1992). Gardner provided no data to support these opinions.

That said, Gardner's description of PAS and his proposal of PAS as an alternative explanation for sexual abuse allegations in divorce gained traction among those accused of sexual abuse and their advocates. Later, the concept of PAS was expanded to include allegations of domestic violence and other types of child maltreatment made during divorce and custody/visitation disputes.

In 2008, PAS was reconfigured as parental alienation disorder (PAD). PAD is defined as a child disorder-that is, taking place within the child-and there is no assumption of collusion with the preferred parent. In addition, this version explicitly states that if the less preferred parent has maltreated the child, the situation is not a case of PAD. This reconfiguration was undertaken in an effort to get PAD included in the DSM-5 and later in the ICD-11 (Bernet et al., 2010). These efforts have not been successful, but parental alienation (PA) advocates continue their efforts to legitimize PA as a diagnosis (e.g., Bernet, 2010).

Moreover, PA proponents have formed an international advocacy group, entitled Family Access-Fighting for Children's Rights. Not only has Family Access formed a network of supporters of PA as the explanation for child resistance, refusal, and fear of contact with the less preferred parent, but Family Access provides ongoing presentations by PA advocates to buttress the legitimacy of the PA explanation.

The current configuration of PA places blame on the preferred parent. PA asserts that the preferred parent has engaged in and continues to engage in acts and statements that result in the child (or children) being alienated from the less preferred parent.

Thus, the theory of PA began as a theory of collusion between the child and the preferred parent, sometimes aided and abetted by therapists (PAS), became a theory of a disorder found in the child (PAD), and has now again become a theory that places responsibility on the alienating or preferred parent, who engages in parental alienating behaviors (PAB). Of serious concern is that PA advocates are describing PAB as a form of family violence and recommending children be separated from the preferred parent and placed with the less preferred and allegedly abusive parent (Harman, Bernet, & Harman, 2019).

APSAC's Position on PAS, PAD, PA, PAB

APSAC's position is that **child safety from abuse and neglect (as defined by law) takes priority over parental right to contact.** Child safety issues may emerge when there are allegations of interpersonal violence (whether child maltreatment or intimate partner violence) in an intact family, when there is parental divorce or relationship dissolution, and after the parental relationship has been dissolved and there are custody/visitation issues. Children often are reluctant to describe their maltreatment or exposure to family violence for a number of reasons (Faller, 2020), but when the family has dissolved and the child is at risk during visitation, the child may make disclosures.

At its core, PAS and the associated concepts of PAD, PA, and PAB are offered as an explanation for a child's resistance, refusal, or fear of contact with the less preferred or alienated parent. It is APSAC's position that professionals who are trying to determine the cause of this resistance, refusal, or fear of contact must conduct a careful evaluation of the child and parents as described in the *APSAC Position Paper on Allegations of Interpersonal Violence in Divorce/Relationship Dissolution* (APSAC, 2016). Professionals should consider multiple explanations for this resistance, refusal, or fear. They should rule out explanations other than parental manipulation before concluding that the child's behavior is caused or is mostly caused by the preferred parent's actions. Other explanations include, but are not limited to the following:

The child has been maltreated by the "alienated parent" (less preferred parent) and the child does not want or fears contact. This maltreatment may be physical, sexual, or psychological abuse. It can also include neglect of the child.

1. The child has witnessed physical, emotional, or other abuse by the less preferred parent of the more preferred parent, of siblings, or of other loved objects (e.g., pets).

APSAC 590 Avenue of the Americas, 14th Floor New York, NY, 10011
(P) 614-827-1321 | (F) 614-251-6005 | (Toll Free) 877-402-7722 | www.apsac.org | apsac@apsac.org

2. The child has witnessed or is aware of other bad acts on the part of the less preferred parent, including substance abuse.
3. The less preferred parent is mentally unstable.
4. The less preferred parent has historically had a poor relationship with the child.
5. The less preferred parent has failed to support the family financially.
6. The less preferred parent has disparaged the more preferred parent in the child's presence.
7. The less preferred parent has been uninvolved in the child's life and/or emotionally unavailable.
8. The less preferred parent is an incompetent parent.
9. The less preferred parent lacks knowledge of child's developmental needs compared to the more preferred parent.
10. The more preferred parent is more sensitive to the child's culture than the less preferred parent.
11. Gender, race, ethnicity, and preferred activities may impact the child's resistance/refusal/fear.

Professionals need to be aware that there may be **multiple causal factors acting simultaneously** to cause the child's resistance, refusal, or fear of contact with the less preferred parent.

The Fundamental Weaknesses of the PA Explanation

Although there are many articles, treatises, and even some books about PAS, PAD, and PA, these tend to be advocacy and opinion writings by mental health professionals who testify in court and lawyers who make the argument in court that PAS, PAD, or PA is causing children to resist, refuse, or fear contact with less preferred parents.

The research on PAS, PAD, and PA is weak (Saini et al., 2016). Saini and colleagues found, in a comprehensive review of the research on alienation, that the studies generally used small, non-random samples with no comparison group.

Finally, in its publication*, A Judicial Guide to Child Safety in Custody Cases*, the National Association of Juvenile and Family Court Judges specifically warns against allowing PAS testimony in court, noting:

> "C. [¬ß3.3] A Word of Caution about Parental Alienation
>
> Under relevant evidentiary standards, the court should not accept testimony regarding parental alienation syndrome, or "PAS." The theory positing the existence of PAS has been discredited by the scientific community. In Kumho Tire v. Carmichael, 526 U.S. 137 (1999), the Supreme Court ruled that even expert testimony based in the "soft sciences" must meet the standard set in the

APSAC 590 Avenue of the Americas, 14th Floor New York, NY, 10011
(P) 614-827-1321 | (F) 614-251-6005 | (Toll Free) 877-402-7722 | www.apsac.org | apsac@apsac.org

> Daubert case. Daubert, in which the court re-examined the standard it had earlier articulated in the Frye 37 case, requires application of a multi-factor test, including peer review, publication, testability, rate of error, and general acceptance. PAS does not pass this test. Any testimony that a party to a custody case suffers from the syndrome or "parental alienation" should therefore be ruled inadmissible and stricken from the evaluation report under both the standard established in Daubert and the earlier Frye standard." (Bowles et al., 2008, p. 13)

Despite the opinion of the National Association of Juvenile and Family Court Judges and the lack of scientific evidence required by Frye and Daubert legal standards[1] (Cappellino, 2021), PAS, PAD, and PA have continued to be employed in court proceedings related to custody and visitation to support a conclusion that allegations of interpersonal violence are false. PA advocates have used the assertion that these allegations of maltreatment are false to gain leverage in custody disputes. This is a tragic situation for unprotected children and their protective parents.

APSAC stands opposed to the use of PAS, PAD, and PA as a presumptive explanation for child resistance, refusal, and fear of contact with the less preferred parent in contested child custody cases. Science and careful evaluations of the causes of child resistance, refusal, and fear of contact in particular cases should guide investigations by Child Protective Services and evaluations by child custody experts.

References

APSAC. (2016). *APSAC position paper on allegations of child maltreatment and intimate partner violence in divorce/parental relationship dissolution.* http://apsaclibrary.org/positions_all.php#

Bernet, W. (2010). *Parental alienation: DSM-5, and ICD-11.* Charles Thomas Publisher.

Bernet, W., von Boch-Galhau, W., Baker, A. J. L., & Morrison, S. (2010). Parental alienation, DSM-V, and ICD-11. *The American Journal of Family Therapy*, 38(2), 176-187.

Bowles, J. J., Christian, K. K., Drew, M. B., & Yetter, K. L. (2008). *A Judicial Guide to Child Safety in Custody Cases.* National Association of Juvenile and Family Court Judges. https://www.ncjfcj.org/wp-content/uploads/2012/02/judicial-guide_0_0.pdf

Cappellino, A. (September 7, 2021). *Daubert vs. Frye: Navigating the Standards of Admissibility for Expert Testimony.* Expert Institute. https://www.expertinstitute.com/resources/insights/daubert-vs-frye-navigating-the-standards-of-admissibility-for-expert-testimony/

APSAC 590 Avenue of the Americas, 14th Floor New York, NY, 10011
(P) 614-827-1321 | (F) 614-251-6005 | (Toll Free) 877-402-7722 | www.apsac.org | apsac@apsac.org

Faller, K.C. (2020). The child sexual abuse disclosure controversy: New perspectives on an abiding problem. *Child Abuse & Neglect: The International Journal*, 99(1), 104285.

Harman, J. J., Bernet, W., & Harman, J. (2019). Parental alienation: The blossoming of a field of study. *Current Directions in Psychological Science*, 28(2), 212-217. https://doi-org.proxy.lib.umich.edu/10.1177/0963721419827271

Gardner, R. (1992). *The parental alienation syndrome, 2nd edition*. Creative Therapeutics.

Saini, M., Johnston, J., Fidler, B., & Bala, N. (2016). Empirical evidence of alienation: Updated review. In L. Drozd, M. Saini & N. Olesen (Eds.), *Parenting plan evaluations: Applied research for the family court (2nd edition)*. Oxford University Press.

---

[1]Daubert and Frye are two trial court standards for deciding the reliability of expert testimony for admission. Both standards require the testimony to be relevant to issues in the case and assist the trier of fact, and the expert must be qualified in the area of testimony. Frye was adopted nearly 100 years ago.

APSAC 590 Avenue of the Americas, 14th Floor New York, NY, 10011
(P) 614-827-1321 | (F) 614-251-6005 | (Toll Free) 877-402-7722 | www.apsac.org | apsac@apsac.org