I received a Comment to my blog that I would like to respond to as a full post.

“Dr Childress, thank you for your generic letters to therapists and the child’s attorney. Have you written a generic correspondence to the judges in these cases?” – Jeff

There’s a problem in writing a generic letter to the Court that I think will be helpful to explain.

My professional background is not as an expert in “parental alienation.” My professional expertise is actually in Attention Deficit Hyperactivity Disorder, with a secondary specialty in early childhood mental health (ages 0-5) which necessarily includes an expertise in the neuro-development of the brain during childhood.

Before entering private practice I served as the Clinical Director for a children’s assessment and treatment center that primarily served children in the foster care system. My expertise in the attachment system comes from both my background in early childhood mental health, which is the period of active formative processes in the attachment system (although we use the patterns of the attachment system throughout our lives), and from also applying this attachment-related information directly with children in the foster care system who were the victims of parental abuse and neglect that created a variety of severe distortions with their attachment system.

My foundational expertise in ADHD and angry-defiant children focuses on older age children (school-age) and adolescents, although it also has applicability to preschool age children as well. This overlap was particularly prominent in my work at Children’s Hospital of Orange County where I served as the lead clinical psychologist on a collaborative project with the University of California, Irvine’s Child Development Center on the identification and treatment of ADHD in preschool-age children.

I know the impact of child abuse up close and personal. I’ve seen the results of child physical and sexual abuse and severe neglect. I’m not a “parental alienation” expert. I’m a clinical child and family psychologist.

I only ran across “parental alienation” when I entered private practice to begin writing my book solving ADHD and all aspects of parenting generally

And I’m being honest on that, I’ve got the non-medication solution to ADHD (most forms) and to nearly all.. no, I’d say all… parenting issues. These solutions represent the synthesis of my years of work with ADHD and the neuro-development of brain systems during childhood – look what I’ve done with “parental alienation” in a couple of years of focused effort, imagine what I’ve done with ADHD and parenting from a lifetime of effort. Solved it.

But I just can’t get to writing about it because I’m busy solving “parental alienation” first. But the reason I’ve been able to solve “parental alienation” is because I’ve first solved parenting generally, and oppositional-defiant children, and ADHD children, and healthy child development, and all the stuff related to parenting and childhood. I simply applied this knowledge to “parental alienation.”

I'm currently waiting for “parental alienation” to catch up to an attachment-based model and then I’m going to drop down one level deeper for mental health professionals into an understanding of “parental alienation” at some basic neurological levels, and in particular with a brain system called “intersubjectivity.”

For any mental health professionals who are interested in where this is going, read these two articles by Fonagy,


Fonagy is one of the leading figures in the field of attachment and intersubjectivity. His work is brilliant.

The problem in writing a generic letter to the judge is, what happens if it is actually the targeted parent who is the narcissistic parent, who may be inflicting emotional, physical, or psychological abuse on the child, or on the other parent through a history of severe domestic violence?

What if the favored parent is authentically trying to protect the child from an emotionally or physically or sexually abusing narcissistic parent, and the narcissistic targeted parent is manipulatively using the allegation of "parental alienation" against the favored parent to nullify the favored parent’s authentic efforts to protect the child from abuse?

What if the narcissistic targeted parent feels "entitled" to possession of the “narcissistic object” of the child and cannot understand why the child wouldn’t want to be with the magnificence of the ideal and perfect narcissistic parent, so that the narcissistic targeted parent is externalizing blame onto the favored normal-range and healthy parent for the child’s reluctance to be with the chronic empathic failures and nullification of the child’s self-authenticity experienced from the narcissistic targeted parent?

I know child abuse up close and personal. I will NOT participate in or collude with the ability of a narcissistic parent to emotionally, psychologically, physically, or sexually abuse the child and then avoid responsibility and nullify the protective efforts of the normal-range and healthy parent by alleging that the child’s allegations are simply a case of “parental alienation.”

The valid concern is that the narcissistic targeted parent will externalize responsibility by alleging “parental alienation,” thereby continuing the child’s exposure to emotional and psychological abuse from profound parental empathic failure and nullification of the child’s self-authenticity, physical and psychological control and intimidation of the child, or active sexual exploitation of the child, and if the child reports the abuse the narcissistic predator simply alleges that it’s a “false allegation” because of “parental alienation.”

In about 20% of the cases that come to me because of my expertise in “parental alienation” it turns out that the targeted parent who is alleging “parental alienation” actually turns out to be the narcissistic parent who is externalizing blame and responsibility for the child’s reluctance to be with the narcissistic parent onto the other parent by alleging “parental alienation” because the narcissistic targeted parent feels "entitled" to possess the child.

The Critics

This is the argument of the critics of “parental alienation.” They are deeply and rightly concerned that the construct of “parental alienation” defined by Gardner is so poorly formed that it will allow narcissistic predatory parents to continue their abuse, including the incestuous sexual abuse of the child and the psychological domination of the child (and spouse) through threats of violence directed toward the child and spouse.

I know child abuse up close and personal. The concerns expressed by the critics of “parental alienation” are entirely valid. The critics aren’t our enemy. And we should not be theirs.

They are absolutely correct in their heartfelt and authentic concerns for the well-being of children and families. As are we.

We should be joined together in a collaborative effort to accurately identify narcissistic parenting (i.e., psychological and other forms of child abuse) in 100% of the cases. We’re not adversaries, the critics and supporters of “parental alienation,” we are fundamental allies.

So why are we divided? Why do we see them as the enemy to be “overcome” and they see us as radicals that presents a “threat” to children and families?

Staff-splitting.

There is a well-established construct in working with borderline personalities referred to as “staff-splitting.”
It's called a “parallel process” in which arguments and divisions appear in the treatment team as a parallel process of manifesting the splitting dynamic (see Key Concept: Splitting post) inherent to borderline (and narcissistic) personality dynamics.

Remember, narcissistic and borderline personality organizations are simply external variants of an underlying borderline core. They are not two different types of personalities, they are two different expressions of the same type of underlying process.

Staff-splitting is described by one of the foremost experts on borderline personality processes, Marsha Linehan,

“Staff splitting,” as mentioned earlier, is a much-discussed phenomenon in which professionals treating borderline patients begin arguing and fighting about a patient, the treatment plan, or the behavior of the other professionals with the patient... arguments among staff members and differences in points of view, traditionally associated with staff splitting, are seen as failures in synthesis and interpersonal process among the staff rather than as a patient’s problem... Therapist disagreements over a patient are treated as potentially equally valid poles of a dialectic. Thus, the starting point for dialogue is the recognition that a polarity has arisen, together with an implicit (if not explicit) assumption that resolution will require working toward synthesis." (p. 432)


Notice the date... 1993. This is not a new concept. It is familiar to everyone who works with borderline personality dynamics.

It is not a coincidence that both sides in the “parental alienation” debate adopt an idealized self-attitude that “we” are the wonderful protectors of children, and that “the other side” is comprised of callous and insensitive people who are unconcerned about child abuse.

Splitting, pure and simple. Polarized extremes of perception in which “we” are idealized and “they” are demonized.

There are no sides. We all want exactly the same thing.

The critics of “parental alienation” aren’t our enemies, and we are not theirs.

All the critics want is to ensure that we protect children from child abuse. That’s entirely reasonable. The concerns expressed by the critics are that the Gardnerian PAS model is too poorly defined so that it allows narcissistic targeted parents to continue their abuse of children by evading protection efforts through alleging “parental alienation.”

That’s an entirely reasonable concern.

So let’s look at the diagnostic criteria for Gardnerian PAS, are they specific enough to ensure that narcissistic targeted parents cannot use the construct of “parental alienation” as a manipulative means to evade our child protection efforts?

Uhhhh, no, actually they’re not. The Gardnerian PAS diagnostic criteria, while possibly accurate for identifying cases of “parental alienation” in which the narcissistic parent is the allied and supposedly favored parent, do not sufficiently differentiate cases when the targeted parent is the narcissistic parent.

Diagnostic criteria must meet standards for “sensitivity” (correctly identifying the presence of something) and “specificity” (not misidentifying other things as being the thing we’re looking for).

The Gardnerian criteria may have sufficient “sensitivity” (and I’m conceding some on the “may” here), but they lack sufficient “specificity.” There is too great a risk that the Gardnerian criteria will be used by narcissistic targeted parents to evade our child protection efforts.
I am not a “parental alienation” expert. I am a clinical psychologist. I know child abuse up close and personal. I will not participate in or collude with the pathology of a narcissistic parent, whether that parent is the allied and supposedly favored parent or whether that parent is the targeted parent.

Over the past several years, I have actually withdrawn from cases of “reunification” because I was unwilling to participate in the restoration of the child’s relationship with a narcissistic targeted parent. So far, I’ve withdrawn from three cases for exactly this reason. In other cases where this has occurred, I’ve continued my work with an understanding that the reason for the child’s “protest behavior” was not “parental alienation” but instead represented valid child concerns.

If you’re a normal-range parent being falsely accused of “parental alienation” your best chance is probably to come see me. I know what “parental alienation” is, so I also know what it’s not.

And not everything is “parental alienation.” Sometimes the narcissistic parent is the targeted parent.

So I will not write a generic letter to a judge, because the risk is too high that a narcissistic targeted parent might use the letter to evade child protection efforts. I will ask therapists to consider the issues. I will ask minor’s counsels to consider the issues. Judges decide.

If it is helpful, I will offer my professional expertise to the Court when desired. I respect the Court. If I can help the Court produce a decision that will be in the child’s best interests in achieving healthy emotional and psychological development, I would be privileged to do so. But only if my expertise can help the Court make a proper decision in the specific case before it.

**Diagnosis**

Achieving synthesis in this unnecessary professional debate surrounding “parental alienation” requires listening to the constructive criticism of the other position.

The critics cited that the Gardnerian PAS model was insufficiently grounded in established psychological principles and constructs. So when I set about developing an actualizable solution to “parental alienation” I went back to the very foundations of the construct.

I first had to work out what the psychological structure of the pathology was. From this foundational understanding for the psychological structure of “parental alienation,” I then identified key diagnostic features of this structure that would,

1. Identify “parental alienation” in ALL cases (sensitivity)

2. **Not identify** anything else that wasn’t “parental alienation” as being “parental alienation” (specificity)

The three diagnostic indicators for an attachment-based model of “parental alienation” meet this standard.

That’s why **ALL THREE** of the diagnostic indicators must be present to make the diagnosis of attachment-based “parental alienation.” Any of the three individual diagnostic indicators may be present from other causes, but not **ALL THREE.** When all three diagnostic indicators are present, the only possible cause is an attachment-based model for the construct of “parental alienation.”

In my post, Diagnostic Indicators and Associated Clinical Signs, notice how many features didn’t make the cut, i.e., all of the associated clinical signs. All of these features are characteristic of “parental alienation” but they lack sufficient sensitivity or specificity to make the cut into being a formal diagnostic indicator.

That’s the process, the professional rigor, that Gardner should have adopted,

A) Identify the structure of the pathogenic process

B) Determine diagnostic indicators of sufficient sensitivity and specificity based on a foundational understanding for the pathogenic process
Instead, Gardner adopted what I consider to be an intellectually lazy approach of proposing a “new syndrome” without sufficient analysis, and then a proposed set of anecdotal diagnostic features that are inadequate to the task.

**Synthesis**

We are mental health professionals. You guys, you mental health professionals on both sides who have been engaged in this unnecessary “parental alienation” debate for 30 years, should be really embarrassed that you fell prey to the parallel process of staff-splitting… for 30 years. Oh my gosh. Thirty years.

When I first looked at the debate, it took me about 30 seconds to recognize the splitting.

“We are the wonderful protectors of children”

Whether this statement is made by the Gardnerians or by the critics.

“They are callous and uncaring about the suffering of children”

Whether this statement is made by the Gardnerians or by the critics.

“We are the righteous and noble. They are the enemy to be defeated.”

Again, whether this statement is made by the Gardnerians or by the critics.


“We” are idealized and “they” are demonized. Stop it.

All of you should be really embarrassed. How can you have succumbed to the parallel process of staff-splitting for so long? The only answer I can come up with is ignorance about working with borderline personality processes. Linehan’s identification of staff-splitting is from 1993. Twenty years ago.

If you don’t know about borderline personality processes, I would gently suggest that you may be practicing beyond the boundaries of professional competence if you are working with borderline personality processes.

But enough with my chastisement. The important thing now is to stop it. We are not idealized and they are not the enemy. On both sides of this unnecessary debate. The critics must also stop it. We are not your enemy. We all have the same goal. Protection of children 100% of the time.

Protection of children 100% of the time when the targeted parent is the narcissistic parent.

Protection of children 100% of the time when the supposedly favored parent is the narcissistic parent.

**ALL** children need to be protected from all forms of child abuse 100% of the time. There is absolutely no disagreement. There are no sides.

We need to start listening to a recognized expert in dealing with borderline personality processes, Marsha Linehan:

1. “The starting point for dialogue is the recognition that a polarity has arisen”
2. The disagreement represents a “failure of synthesis”
3. The disagreement is treated as “equally valid poles” in the dialogue
4. “Resolution will require working toward synthesis.”
The critics are rightly concerned that Gardner’s PAS model is too sloppily put together and will expose some child abuse victims to re-victimization. I’ve seen child abuse up close and personal. That’s a valid concern.

Our concern is that professional incompetence and ignorance results in the acceptance of superficial appearances that leads to a misdiagnosis of the severely pathogenic parenting involved in the child’s role-reversal relationship with a narcissistic/(borderline) parent as representing an authentic display of the child’s rejection of the targeted parent, and that the pathology involved in attachment-based “parental alienation” rises to the level of a DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed.

From our position advocating for the construct of “parental alienation,” achieving synthesis involves expending the necessary effort to define the construct of “parental alienation” from entirely within standard and established professional constructs, so that we can develop strong diagnostic indicators that are both sensitive AND specific, and that can be used in 100% of the cases to accurately differentiate when the narcissistic parent is the targeted parent and when the narcissistic parent is the supposedly favored parent, so that we can protect 100% of the children 100% of the time.

From the other side, movement toward synthesis represents the acknowledgement that an attachment-based model for the construct of parental alienation represents an accurate description of the clinical phenomenon and warrants a DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed when the three diagnostic indicators of attachment-based “parental alienation” are present. Synthesis. Solution.

There are no sides. We are all on the same side. I invite the Gardnerians to join us in synthesis. I invite the critics to join us in synthesis. You are not our enemy, and we are not yours. We all want exactly the same thing. To protect children from the abuse inflicted on them by a narcissistic parent.

When mental health speaks with a single voice, we can achieve a solution to “parental alienation.” It is time for a solution.

Craig Childress, Psy.D.
Psychologist, PSY 18857