BEST PRACTICES FOR ASSESSING PARENTAL ALIENATION: PERSPECTIVES OF CLINICAL PSYCHOLOGIST'S WORKING AS EXPERTS IN A SOUTH AFRICAN SETTING

by

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submitted in accordance with the partial requirements
for the degree of

MASTER OF ARTS

in the subject

CLINICAL PSYCHOLOGY

at the

UNIVERSITY OF SOUTH AFRICA

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YEAR OF FINAL REGISTRATION 2022

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I declare that the above dissertation is my own work and that all sources that I used or quoted have been indicated and acknowledged by means of complete references.
I further declare that I submitted the dissertation to originality-checking software and that it falls within the accepted requirements for originality.
I further declare that I have not previously submitted this work or any part of it for examination for any other qualification or at any other higher education institution.

Vernon Shunmugam	22/09/2022

ABSTRACT

The occurrence of parental alienation and its associated traits have long been discussed in literature. The pathological alignment of a child with a parent in a high-conflict divorce has been independently studied and characterised by several clinicians. Richard Gardner first used the term parental alienation syndrome (PAS) in the 1980s, and he defined PAS as a child's obsession with criticising a parent caused by indoctrinating behaviour of the other parent. The criticism against PAS includes that it is a contentious, poorly understood, and researched construct that is mostly employed in the context of child custody battles. It is claimed that it takes the form of a "child's campaign of denigration against a parent" (Gardner, 2001)This study has found this criticism to be frequently exaggerated and unfounded, as findings show that in high-conflict divorces, the alienating parent does engage in conscious and unconscious behaviour that shapes the child's perception of the alienated parent unfavourably; and this does impact on the child's emotional wellbeing as well as that of the alienated parent. This indicates that PAS is an avenue for further research considering its prominent influence on family dynamics in South Africa..

A qualitative study was undertaken to explore best practices for assessing parental alienation. It addressed the perspectives of mental health professionals working as experts in a South African setting. The study took place in the Gauteng province of South Africa. The expert participants were selected using purposive sampling, and data was gathered using semi-structured interviews. The data obtained was analysed using qualitative content analysis.

According to the expert participants in this study, in order to identify PAS, the evaluator needs a grounded understanding of the conceptualisation of parental alienation and should be able to differentiate parental alienation from the concepts of gatekeeping and estrangement, which may co-occur with parental alienation. A series of clinical interviews,

psychometric assessments and parent-child observations have to be conducted, and the evaluator should collect collateral to further strengthen the assessment procedure. The most common instruments used in the evaluation for adults were the MMPI-3, MCMI-IV and PAI and the most common assessments used to evaluate children were the Draw-A- Person, Kinetic Family Drawing, Bene Anthony Family Relations Test and the Childrens Apperception Test. This study provided to be useful to novice evaluators as this can serve as a guideline for the assessment of parental alienation for the novice evaluator. This study only included clinical psychologist, further studies should include all mental health professionals that deals with parental alienation for a richer and more comprehensive output. A compilation of an assessment for parental alienation and common training for the legal professionals and psycho-legal professionals will be beneficial to this divisive field.

Key terms: High-conflict divorce, parental alienation, parental alienation syndrome, assessment of parental alienation, recommendations for parental alienation assessment, alienated parent, alienated child, alienating parent

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LIST OF ABBREVIATIONS

AGG	Aggression
ALC	Alcohol problems
ANT	Antisocial features
ANX	Anxiety
ARD	Anxiety-related disorders
AUT	Autonomy
BOR	Borderline features
CBCL	Child Behaviour Checklist
COM	Communication
CS	Comprehensive system
CYN	Cynicism
DEP	Depression
DOM	Dominance
DRG	Drug problems
FML	Family problems
IMP	Impulsivity
INF	Infrequency
INV	Involvement
IPA	Interactional Pattern Analysis
JCP	Juvenile conduct problems
LIM	Limit setting
MAN	Mania
MCMI	Millon Clinical Multiaxial Inventory
MIM	Marschack Interaction Method

MMPI	Minnesota Multiphasic Personality Inventory
NIM	Negative Impression
NON	Non-support
PA	Parental alienation
PAI	Personality Assessment Inventory
PAR	Paranoia
PAS	Parental alienation syndrome
PCRI	Parent-Child Relationship Inventory
PIM	Positive impression management
PSI	Parenting Stress Index
ROL	Role orientation
RPAS	Rorschach Performance Assessment System
RXR	Treatment rejection
SAT	Satisfaction with Parenting Scale
SCZ	Schizophrenia
SOM	Somatic complaints
STR	Stress
SUB	Substance use
SUI	Suicidal ideation
SUP	Parental Support Scale
WRM	Warmth

ACKNOWLEDGEMENTS

I would like to thank the following people that made this journey possible:

My loving parents, sister and niece who motivated me and encouraged me to finish this journey. Their undying love, support and care made it possible when I did not have the courage to push through.

My supervisor, Dr F.N. Van Zyl, thank you for having faith in me, pushing me out of my comfort zone and further igniting my passion for the psycho-legal field. You are certainly a role model to me.

My participants for making this dissertation possible; without your professional input, this would not have been possible.

To the examiners – thank you for taking the time to mark this dissertation; I hope you enjoyed the marking process as much as I enjoyed the writing process.

AN OPEN LETTER TO ALIENATED PARENTS FROM AN ADULT-ALIENATED CHILD

Published on VictimToHero.com

"I was alienated from my father. I refused contact. I parroted my mother's words since I was a child about how horrible a man he was. Despite all the education and life experiences, I never stopped to reexamine what it was that was so bad about my father. In fact, there was no evidence at all, other than the fact that my parents divorced and I only met him twice briefly in my life. But the whole time, I looked for signs and hoping that my father loved me. He moved very far away but occasionally I would meet someone who knew him and they would say how much he talked about me. He was an amateur poet and once in a few years there would be a poem that he published in the newspaper and I would secretly go through every word, trying to see if it was a reference to me. I needed him. I needed to know that he cared.

There was a dual reality that I lived, one where I openly supported my mother's view that he was a monster, and another in secret where I looked up to him, admired him, and wishing I had enough courage to run to him. I knew he was successful in his career and was a well-respected figure in his community.

Then he passed. People contacted me and told me and I told myself that nothing changed in my life since he was never there anyway. Then one day, a relative contacted me and said she couldn't hold the secret anymore. She needed to meet me and tell me all the details of what my mother had done to prevent him from being in my life. We haven't had that meeting but it was enough for me to know. I then searched and found a secret website he created for me. With writings, poems, bits about his life that I never knew.

I want to share this because I want you to know that your children need you. They need your love even when they reject you. With today's technology, they will be secretly searching for you, so leave your digital footprint. Keep reaching out because even when they refuse contact, they need the assurance that you haven't given up. Live a fabulous life so they can look up and admire you. Don't stay in a place of a victim because your children need you to be the hero. You can do it. Sending you love."

CHAPTER 1: BACKGROUND AND RESEARCH PROBLEM

Hatred is not an emotion that comes naturally to a child. It has to be taught. A parent who would teach a child to hate the other parent, represents a grave and persistent danger to the mental and emotional health of that child. ~ The Honourable Justice John Gomery of Canada

1.1 Introduction

This chapter describes the research problem and rationale for the topic under study. The research questions that developed from the research problem and rationale for the topic under study are outlined, followed by the research objectives for the research topic and by the thesis structure.

1.2 Research problem

Divorce is a multifaceted societal issue with far-reaching consequences for families. Children's exposure to inter-parental conflict and the quality of the parent-child relationship are the two most important determinants of their adjustment (Burke et al., 2009). According to statistics on divorce rates in South Africa, divorce affects around one out of five couples (Smit, 2021), and in the year 2020, 8 826 (or 54,8%) of the 16 097 divorces recorded involved children younger than 18 years (Statistics South Africa, 2022). Furthermore, the most susceptible period for divorce is between the fifth and ninth years of marriage, which is also when young children are likely to be involved (Bessette, 2008). Research has also shown that children are often in the middle of their parents' fights, especially during divorces where dispute rates are elevated or where conflict is high (Bessette, 2008).

The term "high-conflict" divorce is no longer a misnomer – it is a widely accepted term in the psycho-legal field. Over the past 20 years, judges have frequently used high conflict divorce to refer to divorce proceedings in which the parties are at odds. In these instances, the courts determine what is in the child's best interest when it comes to care, contact, needs, and safety (Birnbaum & Bala, 2010; Dale, 2014). When children are involved in high-conflict divorces, the

emotionally detrimental stakes in the divorce are high. These children are often subjected to toxic communication patterns, poor or lacking problem and conflict resolution skills, protracted legal battles, and domineering or aggressive behaviour of their parents (Fidler & Bala, 2010; Fidler et al., 2013; Malcore et al., 2010).

Parental alienation is categorised as a separate form of parental dispute that may arise in high-conflict divorce cases (Bessette, 2008; Ben Ami & Baker, 2012). Children who have been alienated from a parent are frequently forbidden or urged not to communicate with their non-residential parent (Bessette, 2008).

Bessette (2008) and Moné et al. (2011) confirm that parental alienation can manifest during or after the parents' divorce or separation and is prominent in high-conflict divorce cases. Efforts to alienate the child from the non-residential parent include the residential parent restricting their children's time with the other parent or sharing inappropriate or negative information with their children to draw them into the parental dispute. In these instances, parents often use their children as pawns. Authors such as Rand (1997), Eddy (2010), and Evans and Bone (2011) support the view that parental alienation is common in high-conflict divorces and the children are often involved in the disputes. Prolonged high-conflict divorces and disputes over custody and contact arrangements in the judicial system create a fertile ground for parental alienation (Stahl, 2011).

Psychologist Richard Gardner, who coined the term "parental alienation," found that 90% of contested care and contact cases exhibited evidence of parental alienation (Moné & Biringen, 2012). The expert participants in the study further confirmed this; however, the extent of parental alienation differs, and some milder forms of parental alienation cases are unnoticed.

1.3 Research rationale

For more than 20 years, parental alienation has been a controversial and divisive topic among academics (Gardner, 2001). According to Rand (2011), there has been considerable debate over parental alienation and parental alienation syndrome (PAS) among legal and mental health professionals, particularly in regard to the nomenclature and aetiology of this phenomenon. Bekker et al. (2004) and Bernet et al. (2010) are in agreement when expressing that parental alienation has sparked debates around how it is defined and viewed by different professionals, and the meaning of parental alienation is unclear due to the inconsistent conceptualisations of this phenomenon.

Parental alienation causes considerable problems in family courts and has dominated the discourse on the psychological effects of divorce on children (Ellis, 2008; Fidler & Bala, 2010; Gardner, 2002; Meier, 2009). Family courts, child custody evaluators, attorneys, and judges agree that even though parental alienation is a popular legal strategy employed by parents in many divorce cases, it is often disregarded or goes unnoticed because each professional has a different view or emphasis on the phenomenon (Bow et al., 2009). Despite the widespread agreement that children can develop pathological alienation, no approved standard assessment and diagnostic tools for PAS have yet been created (Baker & Darnall, 2007; Whitcombe, 2014). Moore & Ordway (2013) corroborate the above statement when agreeing that assessing for parental alienation can be quite challenging as many professionals have different views on parental alienation and would therefore assess for parental alienation differently. Given the above evidence, this study was conducted to address the following gap that emerged from the literature: to explore how mental health professionals conceptualise parental alienation and, based on this conceptualisation, how they assess for parental alienation.

1.4 Research questions and objectives

The following research questions were formed for this study:

1) How do mental health professionals conceptualise parental alienation theoretically?

2) Based on their theoretical conceptualisations of parental alienation, what procedures and practices do mental health professionals employ to assess for parental alienation?

The following research objectives were formulated to achieve the objectives of this study:

- To gain an in-depth understanding of South African mental health professionals' conceptualisation of parental alienation.
- To gain a clear understanding of the concepts gate keeping, parental alienation, and parental estrangement from the perspectives of mental health professionals and to know when it is appropriate to use such terms.
- To gain an in-depth understanding of mental South African health professionals' opinions of problems or poor assessment practices concerning parental alienation.
- To gain an in-depth understanding of South African mental health professionals' assessment practices regarding parental alienation.
- To explore any specific assessment techniques used to aid in assessing parental alienation.

1.5 Definition of key concepts

Parental alienation

Bernet et al. (2010) describes parental alienation as an emotional state in which a child whose parents are in the middle of a hostile divorce aligns him- or herself with one parent and dismisses the other parent without legitimate cause. Parental alienation is instigated by one parent as an emotional tactic to 'injure' the other parent, as one parent will take various measures to estrange the child and the other parent.

Parental alienation syndrome

Gardner (2002, p. 95) defined PAS as

> a childhood disorder that arises almost exclusively in the context of child-custody disputes. Its primary manifestation is the child's campaign of denigration against a parent, a campaign that has no justification. It results from the combination of a programming (brainwashing) parent's indoctrination and the child's own contributions to the vilification of the target parent.

Estrangement

Estrangement refers to behaviour that interferes with the alienated parent's relationship with their child (Brandes, 2000). The child does not play a part in the alienation; however, there is reasonable evidence or grounds for the child's denial of the alienated parent's care and refusal of contact (Gardner, 2002).

Alienating parent

In this study, the alienating parent is the one who instigates parental alienation without legitimate reasons and interferes with the relationship between the child and the alienated parent (Bernett, 2010).

Alienated parent

In this study, the alienated parent is the subject of parent-child alienation and a disrupted relationship with the child. These parents are often undermined during care and contact (Bernett, 2010)

The alienated child

The child who experiences alienation will frequently reflect the parent's persistent negative views of the other parent. The alienating parent will make substantially disproportionate, discrediting claims about the alienated parent in front of the child. Hostility, resentment,

dismissive behaviour, and/or fear of a parent may influence emotions and instilled beliefs (Kelly & Johnston, 2001).

Gatekeeping and types of gatekeeping

Gatekeeping refers to the opinions and behaviour of one parent who controls the type of relationship and levels of engagement of the other parent with the child (Austin et al., 2013).

Parental gatekeeping consists of sets of beliefs and conduct by either parent that interfere with the standard and level of the other parent's involvement in the parent-child relationship (Austin et al., 2013). There are four types of gate-keeping behaviour, according to Austin et al. (2013), and these are discussed below.

Maternal gatekeeping – Women who are maternal gatekeepers do not believe in a collaborative effort in family life. Accordingly, they restrict the other parent's opportunities to see the child, believing they are incapable of taking care of a household and children.

Protective gatekeeping – The reasons for limiting the other parent's involvement in care and contact matters are usually valid, usually the risk of the child being harmed.

Facilitative gatekeeping – This is one of the healthier gatekeeping behaviours in which both parents have a healthy relationship with the child.

Restrictive gatekeeping – This is a dysfunctional form of gatekeeping that usually stems from high conflict between the parents and their parenting styles. Typically, one parent limits care and contact from the other parent, resulting in a higher degree of conflict between both parties and subjecting the child to more maladaptive behaviour and trauma.

1.6 Structure of the thesis

Chapter 2 – literature review: This chapter explores the concepts of parental alienation, PAS and the history of parental alienation. The chapter further addresses various methods for

assessing for parental alienation and the best practices from available literature and research.

Chapter 3 – research methodology: This chapter focuses on the research methodology and design. Social constructionism and assessment theory were the paradigms selected for this study. An exploratory and contextual research design was adopted to explore the best practices for assessing parental alienation according to expert participants. The data was analysed using content analysis.

Chapter 4 – Data analysis and discussion: This chapter presents the themes that emerged from the expert participants on the best practices for assessing parental alienation. The themes are synchronised with theory to support or critique the participants' excerpts to solidify the data that the study produced.

Chapter 5 – Conclusion: This is the concluding chapter and presents the study's recommendations, strengths, and limitations.

1.7 Conclusion

Parental alienation and its accompanying features have been reported in the literature for over 20 years. According to the literature on parental alienation, the legitimacy of parental alienation as a phenomenon and the subject of how it is characterised has been the source of much debate. The notions of parental alienation, PAS, and how to assess for parental alienation in custody disputes under mental health specialists concerned with the wellbeing of divorced children will be unpacked in the next chapter.

CHAPTER 2: LITERATURE REVIEW

Sometimes, my mum would smile and wave at me. I wouldn't wave back. I didn't know what my dad will say if he caught me, but I knew it wouldn't be good.
(Heather)

2.1 Introduction

This chapter reviews and discusses literature from various scholars on the topic under study. The chapter opens with the context of parental alienation, followed by a historical overview of parental alienation and parental alienation syndrome (PAS), the key features or criteria of PAS and the critique of PAS.

Next, types of parental alienation and the strategies employed for addressing parental alienation are reviewed, followed by a discussion on the outcomes of parental alienation for the alienating parent, the alienated or targeted parent, and the alienated child. A list of differential diagnoses (though not exhaustive) is also reviewed, given their importance in assessing parental alienation and identifying PAS in a relationship. Lastly, the assessment of parental alienation, the role of mental health professionals and the possible problems that can be encountered during the assessment of parental alienation are highlighted. The chapter concludes with a discussion of best practices in the assessment of parental alienation, followed by a summary.

2.2 Setting the stage for parental alienation syndrome

PAS, a term first described by Gardner in 1985, refers to a "pattern of emotional and behavioural symptoms he observed among children and their parents who were involved in divorce procedures" (Moore & Ordway, 2013, p. 1). Child involvement in divorce proceedings worldwide has become common; a substantial amount of those divorces could result in conflicts of litigation. A high-conflict divorce is characterised by the parties exhibiting verbal

and/or non-verbal aggression, litigation, and disputes concerning contact and care of the child (Bessette, 2008).

The parents are often so absorbed in the litigation process that they overlook past solutions such as mediation and parenting plans (Blank & Ney, 2006 as cited in Moore & Ordway, 2013).

Rand (1997) adds that high-conflict divorces are further characterised by persisting severe conflict and hostility accompanied by verbal and physical aggression, strategies of sabotage, and deception between the parties post-separation. As such, divorce is an intensely emotionally straining process for parents, children, and extended families, and the on-going conflict between the parents affects children's emotional wellbeing, especially those whose parents use them as leverage and cause estrangement. Sometimes the friction between the two parents may subside after divorce, while other parents are unable to overcome their differences. The continuous fighting between the parents is a more painful process for children than the divorce itself, especially when children are used as weapons to punish the other parent (Jaffe et al., 2017).

Jaffe et al. (2017) explain that with parental alienation, the child is manipulated into distancing themselves emotionally from the other parent and dismissing the other parent. Lengthy divorce litigation and long-term court involvement make parental alienation more likely and more prominent in different forms.

During high-conflict divorces where parental alienation is present, a child will suddenly dismiss a parent with whom they were once close. In some cases, the alienating parent will misconstrue information about the alienated parent by pointing out their problems and shortcomings in the failed marriage (Moné & Biringen, 2012). This degrades the bond between the alienated parent and the child (Jaffe et al., 2017).

2.3 Parental Alienation

Parental alienation was documented for the first time in court proceedings around 200 years ago and in mental health literature about 60 years ago (Bernet et al., 2010). Researchers found a group of children of divorced parents who grew estranged from one parent by no obvious cause in a variety of qualitative and quantitative investigations. The estrangement in these situations was not caused by the rejected(alienated) parent's abuse or neglect.

In 1945, psychoanalyst Wilhelm Reich wrote about parents who defended themselves against narcissistic injury emanating from the high-conflict divorce by battling for custody over the child and using the child to disparage the other parent, thereby protecting the self. The child is normally harmed in the process (Lorandos et al., 2013). Emery et al. (2005) found that the term parental alienation had been used in relation to non-custodial parents whose children, in most cases, refused contact with them. The non-custodial parent would be left with little option but to fight for custody and launch a barrage of accusations that the custodial parent had been alienating the children from the non-custodial parent. The noncustodial parent will use parental alienation in the hope of being awarded primary custody of the child. Evidently, sometimes fighting for custody of the child is merely a pretence for the noncustodial parent to alienate the other parent and exact revenge. The custodial focus is on attaining the child with a purpose of power rather than love for the child. These parents tend to punish each other through the child (i.e. using the child as leverage) and develop a sense of false healing by believing that the child is solely theirs to raise.

Parental alienation has also been characterised as a war in which, in most cases, the child's feelings are disregarded or pushed to the periphery, often injuring the child the most. Foa et al. (2007) pointed out that usually, a parent who has lost contact with their children as a result of parental alienation will accuse the other spouse of brainwashing the children and side-lining or ignoring the children's affection for the other alienated spouse. This lack of regard for the child's wellbeing manifests itself in the failure to recognise the child's affection

for the other parent. This usually results in child injury that stems from measures to exact revenge against the other spouse; in these cases, the child is often overpowered rather than loved (Bernet et al., 2010).

According to Baker and Eichler (2016), parental alienation is defined as any constellation of behaviours, whether conscious or subconscious, that may trigger a disruption in the connection between a child and the other parent. Bernet et al. (2010) further define it as a mental condition in which a child whose parents are in a high-conflict divorce, strongly identifies with one parent and rejects a relationship with the other parent without reasonable cause and this has consequences on the alienated child.

O'Donohue et al. (2016) showed that some alienated children completely shut out the alienated parent because of the view instilled that said parent's behaviour is offensive, harmful or immoral. Baker et al. (2018) concur when stating that there is a great desire on the part of the one parent to break down the child's affection for the other parent for various reasons. In some instances, the reason may be validated by previous violent behaviour towards the mother (or father) or children or committed a crime.

The need to sever any ties between the child and the other parent (alienated) arises from feelings of abandonment in the child-which is instilled upon by the alienating parent through fabrication. Alienating behaviour offers little respite for the parent who engages the alienating process and is only harmful to the child. As has been noted by Bernet et al. (2010), it simply feeds the resentment and misunderstanding that causes so much anguish for parents and children after a divorce.

Some researchers consider parental alienation as emanating from pathologies such as personality disorders, including paranoid, borderline personality, and narcissistic tendencies in the alienating parent, which cause dysfunctional interpersonal dynamics. For instance, psychologists Kelly and Wallerstein (1976) described an unholy alliance between a narcissistic parent and a vulnerable child or adolescent (leverage) in an effort to injure and

punish the other parent (Ackerman & Pritzl, 2011). These discordant partnerships, according to Johnson and Kelly (2001), are a result of a failed separation-individuation process in susceptible adolescents who have been exposed to widespread dysfunctional interactions in their early years.

2.4 Parental Alienation Syndrome

For more than two decades, many formulations and concepts have been used to explain the phenomenon of parental alienation and its associated features in literature. Various clinicians researched and identified the same phenomenon – a pathological alignment of a child in the context of divorce (Bernet et al., 2010). They discovered that often in divorce disputes, parents attempted to win their children's sympathy and support and use them as leverage against the other parent, thus pathologically aligning their children with their own interests. The other parent will normally be deprived of contact with the child and denigrated and villainised by the alienating parent. The alienating parent thereby wins the child's affection and loyalty and succeeds in excluding the other parent from the child's life.

Richard Gardner, a psychiatrist associated with Columba Medical School in the early 1980s, compiled data from his counselling and divorce parent patients (Gardner, 1985; Meier, 2009). He claimed that 90% of children in custody battles had suffered from a disorder known as PAS. Gardner also claimed that the most common reason for a child's rejection of a parent was false abuse allegations made by either the mother or the child (Meier, 2009). Gardner (1985) continued to define PAS as a disorder that arises primarily in the context of child custody disputes, with its primary manifestation being the child's unjustified "campaign of denigration" against the one parent (p. 55). It results from the combination of brainwashing, parental indoctrination, and the child's own contribution to the vilification of the target parent. When true parental abuse or neglect is present, the child's animosity may be justified, and so PAS is not always the cause of the child's hostility toward the parent.

Gardner hence classified parental alienation syndrome under eight criteria, namely:

> a campaign of denigration of the [non-custodial] parent, a lack of sense of guilt, the presence of borrowed scenarios, absurd reasons for the behaviour, independent opinion of the child, reflexive support of the resident parent, extension of the hostility to the family of the [non-custodial] parent, and lack of ambivalence. (Viljoen & Van Rensburg, 2014 as cited in Jaffe et al., 2017, p. 3)

A distinction between PAS and parental alienation is that PAS encompasses complex interactions between interpersonal and intrapersonal modes of human functioning, defining it is a difficult undertaking. Behavioural and cognitive components, relationship dynamics, emotions, and experiences of multiple people are all part of the phenomenon of PAS. Whilst, parental alienation as an occurrence is one of several factors that contribute to estrangement, indoctrination, animosity, and lost contact between a parent and child after a divorce (Bernet, 2010).

Another distinction between parental alienation and PAS is that PAS usually constitutes the belief that one of the parents has deliberately encouraged the child to fear and shun the alienated parent (Bernet, 2010). This description of PAS refers to a phenomenon where a child constantly exhibits certain traits and behaviour as highlighted below (Bernet, 2010).

A child suffering from PAS may constantly and unfairly criticise the alienated parent (sometimes called a “campaign of denigration”). In some instances, the child does not have any strong evidence, specific examples, or justifications for the criticisms, only false reasoning for their alienating behaviour against the alienated parent. PAS is also observed from the child’s expressed feelings about the alienated parent, which are not mixed but instead all negative, a trait sometimes called a “lack of ambivalence” (see 2.3.1).

The child, having been influenced by the alienated parent, will often claim that the criticisms they utter are all their own conclusions based on their own independent thinking, (while, in reality, the alienating parent “programs” the child with these ideas) and has unwavering support for the alienator.

The child feels no guilt about treating the alienated parent poorly and uses language that sounds borrowed from adult language when talking about situations and feelings because what they are saying does not stem from their own experiences, memories or even feelings. The child's resentment against the alienated parent subsequently progresses to include other family members related to that parent (for example, grandparents or cousins).

The phrase PAS also indicates the presence of a causal element, namely the alienating parent (Bernet, 2010). It is worth noting that, while the term parental alienation has gained popularity, the term parental alienation syndrome has sparked controversy and criticism (will be discussed in the section below).

In summary, parental alienation refers to a strong alliance between one parent and an unjustified rejection of a relationship with the other parent, whereas PAS is a more complex concept that refers to a child who exhibits some or all of Gardner's (2001) eight characteristic behaviours.

2.4.1. Features or criteria and Critique of PAS

Gardner (2001) identified the following behavioural patterns of PAS

1. **A campaign of denigration**- In a denigration campaign, the relationship between the alienated parent and the child will shift seemingly overnight. Where there was once a positive relationship, the child now directs constant hostility and criticism toward the targeted parent. While it is true that no parent is perfect – some may lose their temper or yell at their children, and children may, from time to time, get mad at their parents – these behaviours and character traits are heightened in children suffering from PAS. As mentioned, the alienated parent is constantly subjected to scorn by the alienating parent and, eventually, the child. Any positive emotions associated with a positive encounter with the alienated parent will subsequently prompt the child to withhold this or keep it a secret from the alienating parent for fear that the positive experience will be short-lived or somehow discredited.

2. **Weak, frivolous and absurd rationalisations**- The child utters poorly informed or absurd rationalisations against the alienated parent. When confronted about why a child feels negatively toward the alienated parent, the child is unable to provide a suitable justification for these feelings. In most instances, the reasons provided are fictitious or unfounded, biased by the alienating parent's motives.

3. **A lack of ambivalence-** Generally, an absence of normal ambivalence can occur when the child idolises and adores the alienating parent while treating the alienated parent with contempt. A child suffering from PAS will see no redeeming qualities in the alienated parent, and their feelings towards the alienated parent will be wholly negative and critical.

4. **The "independent thinker" phenomenon**- Although the alienating parent will have brainwashed the child into hating or fearing the alienated parent, the child will present their reasons for this hatred as based entirely on their own reasoning. The child will deny having been influenced in any manner by the alienating parent and will maintain that their thinking is independent. In most cases, the child will argue that the rejection and alienation the parent experiences is the fault of their own and the result of a conscious decision on the part of the alienated parent to limit contact with the child.

5. **An absence of guil**t- Children with PAS typically do not experience feelings of guilt or regret about their harsh behaviour toward the alienated parent; they will show no regard for or discomfort about the alienated parent's feelings. Most of the time, the child will display signs of ingratitude, spite or coldness toward the alienated parent. For example, the child will be unimpressed by any gifts or financial support offered by the alienated parent.

6. **Support for the alienating parent**- In these circumstances, the child tends to side with the alienating parent and, during parental disagreements or conflict, the child will be unwilling or refuse to be impartial to hear out the alienated parent. This behaviour is characterised by extreme "black-and-white" thinking. In these instances, every action of the alienated parent is received with negativity by the child and every action of the alienating

parent with positivity. Any form of negativity or fault in the alienating parent will be overlooked by the child.

7**. Borrowed phrases and scenarios**- Alienated children often "borrow" adult or incomprehensible language or ideas from the alienating parent. There may be instances in which the child mirrors the alienator's false and unfounded accusations against the alienated parent or refer to events that never occurred. Alienated children often portray actions that imitate the alienating parent's behaviour and words concerning the alienated parent.

8. **Rejection of extended family and friends**- The child's resentment of the alienated parent, in certain instances, may also extend to the alienated parent's relatives and friends.

2.4.2. Critique of the parental alienation syndrome

There is mounting evidence indicating that statements or theoretical claims made about PAS are usually unsupported. With PAS, the biased assumption is often made that the mother of the child will pathologically program their children to hate their fathers and invent claims of abuse merely for reasons of vengeance. However, some research has indicated that non-custodial fathers are more likely to fabricate child maltreatment claims against the mother of the child (Meier, 2009). Furthermore, statistics from a study by Aloia and Strutzenberg (2019) showed that 43% of false claims of abuse were intentionally reported by non-custodial parents (often fathers) of the child, whilst only 14% of intentionally false claims were reported by the child's custodial parent, typically mothers.

PAS also falls short in another key criterion for the definition of a syndrome, as the term "syndrome" is used to describe dysfunctional family dynamics such as those involved in PAS cases. A syndrome is defined as a cluster of symptoms that occur together that characterise a specific disorder whereas, parental alienation does not always embody the same set up of symptoms. Parental alienation can range from mld to severe.Furthermore, because there is no universal official diagnosis for PAS, there is space to misuse the concept in clinical and

legal contexts. This discrepancy threatens the phenomenon's integrity as a recognisable and valid construct. According to the literature, PAS has failed to garner support for its classification as a syndrome in the scientific community of the American Psychiatric Association (APA) (Aloia & Strutzenberg, 2019).

PAS has been described by some scholars as a controversial, poorly defined and researched construct used mainly in the context of child custody disputes. It allegedly manifests through a "child's campaign of denigration against a parent" (Gardner, 2001). This supposed campaign of denigration has no rational justification and instead is purported to result from the combination of a parent's brainwashing and indoctrination regarding the vilification of the target parent.

In light of the poorly defined criteria of PAS and the uncertainty surrounding its definition, aetiology, and clinical description – as well as its misdiagnosis and misuse within the judicial system – aspects of the concept's validity and reliability have been a topic of scholarly debate. Its description has evolved into a custodial warfare strategy that includes making false claims of abuse and neglect in order to retain custody of a child. Meanwhile, the non-custodial parents are said to exploit fraudulent claims of PAS and associated symptoms to reclaim custody of their children (Ellis,2008).

Although Gardner's concept of parental alienation syndrome PAS has been criticised, it has long been acknowledged that children may be alienated from a parent because of the influence of the other parent. Despite its shortcomings in terms of criteria for PAS, there is evidence that parental alienation as a phenomenon does exist. Regardless of parents' justifications for parental alienation, the fact remains that there are many instances where unjustified estrangement occurs between children and their non-custodial parents. Therefore, effective evaluation and intervention for such instances of parental alienation is a crucial research focus area (Rand, 2011; Gardner, 2002).

2.4.3. So, is it parental Alienation or parental alienation syndrome?

Both "Parental Alienation Syndrome" and "Parental Alienation" have occasionally been used to refer to the same phenomenon. The term "parental alienation syndrome" was coined by child psychiatrist Richard Gardner in 1985 to describe a psychological disorder seen in some children who were "obsessed with deprecation and criticism of a parent" they formerly adored for "unjustified and/or exaggerated" reasons (Gardner, 1985, p. 3). According to research on parental alienation syndrome, exposure to parental alienation behaviors and brainwashing methods as a child is the most frequent source of the phenomenon (Baker & Darnall, 2007).

Additionally, Darnall explained the distinction between parental alienation syndrome and parental alienation when he wrote:

“The distinction between the two is that parental alienation focuses on how the alienating parent behaves toward the children and the targeted parent. Parental alienation syndrome symptoms describe the child’s behaviors and attitudes toward the targeted parent after the child has been effectively programmed and severely alienated from the targeted parent” (Darnall, 1998, pp. 3-4).

Thus, the term "parental alienation" describes both the actions made to mentally influence a child into hating or rejecting a beloved parent as well as the symptoms of parental alienation syndrome that appear once the alienation has taken effect in the child's mind. When a child has been subjected to one or more parental alienation strategies and/or brainwashing techniques, parental alienation can be recognized (Baker & Darnall, 2006).

2.5. Types of parental alienation

Parental alienation can be grouped into the following categories as proposed by Gardner (2004):

Mild: This type of alienation is minimal; these children mostly co-operate during visits with the alienated parent but will occasionally criticise the alienated parent and be resentful as a result of false allegations and negative comments the alienating parent may have shared with the child.

Moderate: This form of alienation is more concentrated. The child tends to be more disrespectful towards the alienated parent than in the aforementioned mild category and experiences difficulty with adjustment.

Severe: This form of alienation is intense in its manifestation. In these instances, the child's unwarranted hostility towards the alienated parent makes visitation impossible. The child constructs serious accusations (abuse, violence) against the alienated parent that are unfounded as a result of the alienating parent's gross misrepresentation of them. The following strategies have been employed by alienating parents that caused their children to often refuse to visit the alienated parent (Gardner, 2004).

2.6. Alienating strategies

2.6.1. Badmouthing

With this strategy, the alienating parent misrepresents the alienated parent by disclosing misleading and degrading information about the other parent to the child. The alienating parent will share information about the divorce case and expect the child to support them above the other parent. The child is "programmed" to think in an unloving way about the alienated parent (Baker & Darnall, 2007; Lowenstein, 2015).

2.6.2. Interfering with parenting time/visitation and contact

Tactics to interfere with the other parent's time with the child are used when the alienating parent withholds the child or does not follow through on planned visits. For example, the alienating parent will arrange fun activities during the planned visits to dissuade the child from spending time with the alienated parent (Baker & Darnall, 2007).

Another strategy is when the alienating parent allows the child to choose whether or not to visit, even if a court order prescribes that the child must not be in the position to make that decision (Baker & Darnall, 2007).

2.6.3. Limiting/interfering with email and phone contact

The alienating parent may withhold the alienated parent's calls, messages and visitation for the child and may even change the telephone numbers or allow telephone calls to the child only on the alienating parent's personal telephone. In some situations, the child is not permitted to have private conversations with the alienated parent, and the alienating parent will supervise telephone calls or place them on speakerphone to overhear their conversations (Baker & Darnall, 2007).

2.6.4. Limiting/interfering with symbolic contact

This tactic is used when the alienating parent returns gifts to the child from the alienated parent or allows it to disappear intentionally. The alienated parent may be accused of buying the love of the child. The child develops a distorted knowledge about the history between the alienated parent and the alienating parent. The alienating parent will accuse the alienated parent of abusive behaviour or absenteeism. Sometime the child will be forbidden from speaking with or about the alienated parent and destroy or remove any images of the alienated parent to reinforce the alienating parent's relationship with the child at the other parent's expense (Baker & Darnall, 2007).

2.6.5. Interfering with information

Pertinent information about the child is withheld, often deliberately by the alienating parent, from the alienated parent as a result of the interference (i.e. changing, withholding) pertaining to information about school, doctors or other social activities and will often deliberately neglect to communicate such information (Baker & Darnall, 2007).

2.6.6. Emotional manipulation

Emotional manipulation occurs when the alienating parent unscrupulously influences the child to reject the alienated parent by sharing misleading information about them. Other forms of emotional manipulation may include making the child feel guilty about their relationship with the alienated parent and expressing loyalty only to the alienating parent. The alienating parent becomes angry when the child displays positive behaviour towards the alienated parent (Baker & Darnall, 2007).

2.6.7. Unhealthy alliance

Unhealthy alliances are created when the alienating parent requests the child to observe the alienated parent's actions and report everything that happens during the child's visitation to that parent. This is usually done through secret telephone calls or messages (Baker & Darnall, 2007).

2.6.8. False accusations

A severe form of parental alienation is present when a child makes false claims of assault against the alienated parent based on the other parent's indoctrination without there being any evidence of such conduct (Lowenstein, 2013).

2.7. The effect of parental alienation on children

According to Lowenstein (2015), parental alienation signs are present when the child avoids or declines contact with the parent who is rejected. Through time, the alienated parent's good memories are buried and rendered practically irretrievable in the memory of the older

child or unexpectedly turned into a bad experience by the alienating parent. In extreme cases, the child does not recall the absent parent's appearance; the custodial parent may change the child's surname to theirs and employ other measures to remove the other parent from the child's life.

In 2005(a), Baker conducted studies with adults who had been the subject of parent-child alienation and identified feelings of depression caused by the alienation and a feeling that they were unworthy of love. Some participants in the study felt they had been robbed of a loving parent relationship once they realised the truth (that they had been alienated through deliberate actions on the part of the other parent), which led to feelings of self-guilt. Children are affected for years to come once they come to the realisation that they had been used (as weapons) against the other parent and experience feelings of guilt about alienating the parent and failing to consider the (alienated) parent's views (Hands & Warshak, 2011).

In a study conducted by Lowenstein (2013), children who were exposed to the long-term effects of parental alienation suffered from behavioural problems at school. They had difficulty trusting people, enjoying close relationships later in life, and may have developed hampering psychological issues such as low self-esteem, depression, increased alcohol and drug use, and possibly end up also getting divorced. High rates of low self-esteem and self-hatred were reported; in fact, seventy percent (70%) of the participants suffered from significant episodes of depression, and about thirty-three percent (33%) reported using alcohol and drugs to escape feelings of pain and loss. Sixty-six percent (66%) of adults who were the victims of parental alienation got divorced (Lowenstein, 2013). In the alienating process the one parent models aggressive and resentful attitudes to alienated children, who grow to believe that such alienating behaviour is acceptable in a relationship and that frequent hostility, irritation, deception, and wrongful actions are normal parts of a relationship they will also employ. This eventually causes strain in their relationships leading to them being shunned later in their lives (Lowenstein, 2013).

2.8. Effects of parental alienation on the alienated parent

Vassiliou and Cartwright (2001) found that alienation had severe emotional and financial implications for the alienated parents. Furthermore, the alienated parent finds the process of working through alienation a very difficult process, and they are often dissatisfied with the services rendered in the psycho-legal field. Vassiliou and Cartwright (2001) further found that cases of parental alienation that involved mental health professionals were often overlooked due to a lack of sufficient knowledge on parental alienation in the psycho-legal field; professionals did not collect relevant information in this regard until conclusions had been drawn or the alienating parent noticeably distorted facts.

The alienated parent is sometimes further alienated from the child by coalitions built around the alienating parent-child relationship. These coalitions may include teachers who assist the alienating parent in keeping the child from having contact with the other parent based on unfounded claims. Friends and relatives of the alienating parent and child, who succumb to the alienation, and even counsellors and psychologists, may contribute to the child's alienation from the parent. Additionally, court delays further strengthen the alienation process (Lowenstein, 2013; Vassiliou & Cartwright, 2001).

The alienated parent is not allowed to have any part in the child's education or to provide direction and guidance to the child. The alienated parent, like the child, feels sad because they cannot spend time together and feels helpless in such situations (Lowenstein, 2013). The alienated parent endures unjust rejection and has to determine whether to "give up" on the child or continue lawsuits and other tactics to reverse the alienation, which can be an emotionally turbulent journey. If the alienated parent decides to withdraw, they must "keep the door open" for the alienated child for possible future attempts at contact (Lowenstein, 2013).

2.9 Effects of parental alienation on the alienating parent

Due to the time-consuming nature of the constant game of deception, the alienating parent misses the establishment of a real, caring relationship. They open themselves to possible future hostility from the child in the event that the child learns that they(alienated parent and child) had been manipulated and harmed emotionally (Warshak, 2010).

2.10. Differential diagnosis

Parental alienation syndrome is a divisive concept amongst mental health professionals and the legal professionals. Parental alienation behaviour has consequences on the alienating parent, alienated parent and alienated child. Furthermore, there are also consequences for incorrectly identifying parental alienation syndrome. The differential diagnosis provided below have some similarities to parental alienation syndrome. It is important for the evaluator to be aware of such syndromes(not exhaustive) before identifying parental alienation syndrome. A campaign of denigration against one parent is common in the below mentioned syndromes and parental alienation syndrome, if a campaign of denigration is identified with the child, the evaluator should not rush into labelling parental alienation syndrome and should rather look at the cluster of syndromes that closely resembles parental alienation syndrome and then rule out the ones that doesn't fit the clinical picture.

2.10.1 False memory syndrome

The primary symptom of false memory syndrome (FMS) is the persisting belief that the patient had been sexually abused, without factual justification. Typically this disorder presents itself during the early adulthood years of women. In FMS, the participant supports a denigration campaign against a parent, close relative or acquaintance of sexual harassment in childhood (Gardner, 2004). On the other hand, PAS is a childhood condition where allegations and accusations other than that of sexual assault are made against the parent and used in the denigration campaign against the alienated parent.

In all PAS and FMS cases, the child claims their opinions and decision to refuse the alienated parent were their own. In fact, with PAS, both the alienating parent and the child criticise the other parent. Parallels between the two syndromes include a lack of remorse over the parent's rejection and the rejection of whoever supports the alienated parent or individual's position. This may apply to family members, elders, counsellors, or other individuals seeking to intervene (Gardner, 2004).

In FMS, the rationalisations for the alienated parent's deterioration are focused on perceived sexual exploitation in childhood. Furthermore, in FMS cases, the lacking ambivalence is restricted to and stems from the victim's memories. Meanwhile, with PAS, the child's lack of ambivalence manifests from the skewed views of one of the parents and its rationalisation for the targeted parent's denigration is far broader (Wakeford, 2001).

2.10.2 Threatened mother syndrome

Threatened mother syndrome (TMS) is an extreme reaction by a mother, father or primary caretaker to a perceived danger or threat to the relationship or connection between them and their child. According to Klass and Klass (2005, p. 189), "anger, shouting, coercion intolerance, irritability and even aggressiveness" are some of the responses these individuals exhibit. Normally these intense reactive behaviours subside when the immediate danger is removed, and they are episodically impulsive and episodic (Weigel & Donovan, 2006).

De Jager (2008) argues that these types of behaviour can fuel the suspicion of PAS and that differentiating between PAS and TMS is crucial, particularly because the actions displayed by the mother in both instances are similar. The short-lived nature of the behaviour of parents with TMS is uncharacteristic and motivated by the sole purpose of protecting and maintaining the bond with their child (Klass & Klass, 2005). In PAS, the alienating parent's

behaviour is often intended to maintain their relationship with the child, but their action may also strategically alienate the child from the alienated parent (Baker, 2005b).

In PAS situations, the alienating parent makes the child an accomplice and includes other significant persons in the alienation process. In TMS, the actions and rage of the mother do not necessarily harm others or the child (Weigel & Donovan, 2006). Even though PAS and TMS may seem similar, research on TMS is limited in comparison and has had little support in research.

2.10.3 Divorce-related manipulative parent syndrome

Divorce-related manipulative parent syndrome (DRMPS) is another condition closely linked to PAS. This was originally referred to as divorce-related malicious mother syndrome in 1995 but was changed to divorce-related malicious parent syndrome (DRMPS) in 1999 to better reflect the gender-neutral nature of the condition (Weigel & Donovan, 2006). The four primary DRMPS parameters as provided by De Jager (2008), Turkat (1995), and Wakeford (2001) are the following:

A parent who punishes their ex-spouse unjustifiably by:

- Intentionally alienating the ex-spouse from the mutual child
- Involvement of others in directing malicious actions against the ex-spouse
- Participating in excessive litigation concerning the ex-spouse.

The parent attempts to:

- Interrupt the ex-spouse's visitation with the child
- Inhibit telephone contact with the ex-spouse
- Interfere with the participation of the ex-spouse in school life and extracurricular activities.

The conduct of the parent includes negative actions towards the ex-spouse, including:

- Lying to the children
- Lying to the ex-spouse
- Violating rules.

According to Turkat (1995), parental attacks and animosity towards the targeted parent in DRMPS are far more violent and aggressive than in PAS and may escalate to violence. Weigel and Donavan (2006) cautioned that DRMPS's acceptance after the addition of a condition that overlaps with PAS could further complicate the definition of PAS meaning and its acceptability. DRMPS empirically validated knowledge seems scarce, and the syndrome is generally best described by Gardner's extreme form of PAS.

2.10.4. Medea syndrome

The primary symptom of Medea syndrome is that one parent will go to great lengths to harm the other parent. In most cases, these individuals injure their children or commit infanticide to injure the spouse (Colman, 2001). During a divorce between two people with severe personality disorders, Medea syndrome may present as follows: One parent's behaviour is usually characterised by selfish, self-centred, egocentric and even anti-social tendencies with little regard or insight for the others' feelings. These parents may abandon their partners for a younger and more desirable person without any ensuing guilt or regret (Wallerstein & Kelly, 1976). In these situations, the other partner may respond with intense feelings of rejection that can present with depression, anxiety, suicidal thoughts, extreme weight loss, and even psychosis. Such parents have been observed to lash out at their partners in response to the extreme rejection and disdainful treatment by harming their children and damaging belongings. These individuals consider such conduct acceptable because children and other significant individuals are a narcissistic extension of themselves (Raso, 2004). In

the case of PAS, the parents' actions are motivated by the desire to protect their relationship with their child by alienating the parent; the intent is not to inflict physical harm (Wakeford, 2001).

2.11. Assessing parental alienation

Parent-child alienation caused by severe emotional, physical or sexual assault is not usually or necessarily instigated by the other parent. In this case, the hostility toward the estranged parent is justified, so PAS is not valid (Hands & Warshak, 2011; Lowenstein, 2013). On this point, Ellis (2008) describes estranged children as children experiencing anxiety or resentment toward the estranged parent due to alcohol abuse, domestic violence, emotional abuse or lack of contact because of geographic distance.

Ellis (2008) recommends that the following questions must be answered during history taking when conducting an evaluation for parental alienation:

- Does the alienation have a readily identifiable reason?
- Does the claims against the parent appear to be false or highly exaggerated?
- Is the child's sense of rejection deep, having gone without appreciation from that parent and their love and affection?

If the answer is "No" to question one and "Yes" to questions two and three, then there is a high possibility of parental alienation (Ellis, 2008).

2.11.1 Interviews and observations with parents

When conducting the history taking, the evaluator should enquire about the child's living arrangements and relationship with both parents, regardless of what the parent perceives as the child's presenting problem (Moore et al., 2013). Any periods of parent-child separation, as well as the reasons for the separation, should be noted by the evaluator. With separated

or divorced parents, the evaluator should seek a copy of the most recent court order (Moore et al., 2013).

Where the court order stipulates that the parents are required not to disparage one another in front of the child, or the court order imposes fines on one parent for bad judgment or improper behaviour that is harmful to the child, clauses should provide the evaluator with information on parental behaviour outside of the evaluation session (Moore et al., 2013). Evaluators should monitor both divorced parents' relationships with their children while working with them. According to Moore et al. (2013), the following should be taken into consideration or noted when interviewing parents: Is the parent making disparaging comments about the other parent in front of the child? When talking with the evaluator, some parents may use harsh language or try to discredit the other parent's reputation (Moore et al., 2013). Instead of projecting blame, evaluators should strive to keep the presenting parent focused on observations and concerns directly connected to the child, which might exacerbate emotions of antagonism in the relationship.

2.11.2 Interviews and observations with children

Moore et al. (2013) pointed out that children who have been estranged from a parent may respond in a coached or scripted manner. These children may show minimal emotion or guilt while expressing sentiments of fury, fear, or anger (Gardner, 1989). When sharing their anxieties about their relationship with the alienated parent, they may not be able to offer specific details (Gardner, 1985; Gardner, 1989).

The behaviour displayed in the session or in the waiting area may also be inconsistent with the child's vocal disclosures (Moore et al., 2013). For example, the child may report experiencing persistent emotions of rage and despair, yet in the waiting room, the child may appear cheerful and carefree. Furthermore, if the child is brought to therapy by the alienated

parent, the child may engage affectionately with the parent in the waiting room yet express a desire to stop seeing the alienated parent during the session.

According to Moore et al. (2013), many alienated children make unfavourable comments about the alienated parent because the alienating parent frequently encourages or rewards them for doing so. Some children feel so obligated to the alienating parent that they make derogatory remarks about the alienated parent, even if they do not agree with such remarks (Gardner, 1985; Gardner, 1989). Making these admissions causes alienated children to experience cognitive dissonance, resulting in intense distress and bewilderment (Moore et al., 2013).

While interviews and observations might provide useful information for an evaluator, seeking to gain a complete picture of an alienated child's emotional problems is important (Bow, 2006), as they also have limitations. For example, a child may be reluctant to make disclosures in cases of severe parental alienation or may reflect the alienating parent's feelings and words verbatim (Fidler et al., 2012; Gardner, 1985; Gardner, 1989).

An evaluator may also identify a strained relationship between the alienated parent and the alienated child. The evaluator may be unaware that the child wishes to have a relationship with the alienated parent but is reluctant to voice it because of strong loyalty to the alienating parent (Baker, 2005b).

More formal assessment measures may be required when evaluators suspect PAS or have identified a high-conflict divorce case where there is a risk of parental alienation in order to get an objective understanding of the child's emotional difficulties and determine the best course of action for the child (Moore & Ordway, 2013).

2.12. Assessing for the presence of estrangement

Parental alienation has been described as a spectrum ranging from moderate to severe. In hybrid alienation, both parents' actions contribute to the child's alienation (Burrill, 2006;

Fidler et al., 2012; Rand, 1997). In fact, situations involving intimate partner violence, substance abuse, long-term mental health concerns, past safeguarding, and child protection issues frequently complicate matters. When a child refuses to see a parent, strongly rejects them, or exhibits severe anxiety or fear around them, it is *critical* to assess whether or not the child's behaviour is reasonable and justifiable by considering the child's whole history with that parent.

Established assessment, evaluation, and intervention approaches in this area, as well as limited knowledge of alienation, frequently lead to the assumption that a child's resistance or fear is legitimate. Incorrect evaluation and formulation can be harmful, increasing estrangement and, in certain cases, leaving a child in the care of a psychologically abusive parent. Lack of knowledge and awareness can lead to an unwitting collaboration in the alienation process, especially if information and history are gathered solely from one parent's perspective (Garber, 2011; Kelly & Johnston, 2001).

The assessment can turn to the evaluation of a wider range of variables regardless of whether the conduct of the child satisfies the requirements describing an alienated child. If the child appears alienated, the evaluation must differentiate between alienation and practical estrangement or decide if the clinical appearance is a mixture of the two accounts(Hybrid cases) . Possible risk factors for potential alienation must be evaluated if the child does not present as an alienated child. Evaluators may find Kelly and Johnston's (2001) conceptualisation of parent-child relationships useful, wherein the child's relationship with both parents is shown to exist on a spectrum between positive and negative and involves the principles of attachment, ambivalence, alignment, estrangement, and alienation. A key consideration will be whether the child has been traumatised by physical abuse, sexual abuse, significant neglect on the part of the rejected parent, or as a result of witnessing domestic violence in order to differentiate alienation from realistic estrangement. The evaluation of both parents, the investigation of abuse allegations, and the assessment

of the child's relationship with each parent should be completed in the evaluation (Kelly & Johnston, 2001).

2.13. Assessing the family context

To formulate the dynamics of the family and distinguish between estrangement, alignment, and alienation, the evaluator should weigh up the possible contributions of the aligned parent, the alienated parent, as well as the child's vulnerabilities. A child's actions can only be understood in the *context* of the family. Therefore, evaluations must be child-focused and parental actions should be described in terms of their effect on the child and the child's experience from their individual perspective (Lee & Olesen, 2001).

According to Lee & Olesen (2001), when evaluating a family context, the evaluator should consider that the child's alienation is a product of the associated parent's toxic brainwashing or by an abusive parent as well, since these are independent variables. It is also likely that an abuser who denigrates the victim parent may identify the child with the aggressor and thereby cause alienation. All applicable variables must be considered in any given situation to arrive at a complex description of the family's dynamics that will result in suitable recommendations (Lee & Olesen, 2001).

When evaluators are unfamiliar with the dynamics of high-conflict divorces, there is a risk of emotional harm to children and families. Many families will not tell the evaluator if they are in the middle of a custody dispute (Moore et al., 2013), and because alienated children are unlikely to identify and therefore disclose the signals of an alienating parent to an evaluator, they may miss that the high-conflict divorce is affecting the child in this manner (Moore et al., 2013). What is more, when an evaluator is uninformed that the family is going through a high-conflict divorce, the evaluator may end up siding with the child (whose views have been

biased by the alienating parent), thereby inadvertently increasing parental alienation (Fidler et al., 2013; Moore et al., 2013).

2.14. The importance of collateral information

Collateral information can be defined as all data that is gathered that is not directly from interviews, observations, and psychological test data. Collateral data can include the material sent from attorneys as well as additional resources submitted by one or both of the parents. This information will include court reports and declarations, medical and therapeutic reports, and school reports, among other information that provides important material related to the evaluation (Stahl, 2011).

Martindale et al. (2007) delve with considerable length into collaterals. The model standards declare, among other things, that a thorough evaluation necessitates the use of reliable collateral source information. Evaluators must be aware of the significance of obtaining data from a variety of sources in order to investigate different hypotheses about topics relevant to the evaluation properly. Evaluators must understand the necessity of obtaining information from secondary sources that, in the evaluators' opinion, are likely to have access to relevant and essential information. When uncorroborated material is used in the development of an evaluator's conclusion, the evaluator must disclose these materials unless it is impossible. Evaluators should seek information from other sources to corroborate or disprove participant reports on any pertinent issue while assessing the reports of participants in the evaluation. When using collateral sources, evaluators should look for information that can help them validate or disprove the hypotheses they are considering.

The evaluator must report all collateral sources contacted unless otherwise stipulated in the order appointing the evaluator other than statutorily supplied sources. The evaluator must inform collateral sources that the information shared between the evaluator and the collateral sources is not confidential and can be used for psycho-legal purposes.

2.15. Psychological assessments used for assessing parental alienation

Evaluators employ psychological assessments as an integral component of their evaluations; however, it is important to note that the results should not be used in isolation or taken out of context. A selected number of assessments that are common in child custody evaluations are discussed in this section.

2.15.1. Interactional pattern analysis (IPA)

Since the 1970s, the Interactional Pattern Analysis (IPA) – a structured clinical technique for systematically describing behavioural patterns – has been widely explored in the South African setting. Based on observable behavioural patterns, the IPA gives a thorough description of the style of interaction (Vorster, 2003, 2011). Vorster's approach includes certain essential variables in describing observable behavioural patterns (2011). The variables can be applied to the alienating parent, the alienated parent, and the child and are discussed below.

2.15.1.1. Definition of the relationship

Vorster (2003, 2011) offered noteworthy contributions to the clinical aspects and dynamics of relationships. As people engage with others in their environment, several types of relationships arise: individuals either lead, follow, constantly battle for control, or function as equals. These also apply to relationships between parents and their children. Individuals are continually defining relationships through their interactions. According to Vorster (2003, 2011), evaluators can categorise any relationship as parallel (between equals), complementary (with a leader and a follower), or symmetrical (constant power struggle). Example, in parental alienation cases, the evaluator might see a complementary relationship between the alienating parent and alienated child and a symmetrical relationship between the parents.

2.15.1.2. Emotional distance

Individuals maintain a certain emotional distance in all interactions, including those with their family members. Verbal and nonverbal behaviour determine emotional distance. A person who maintains a close emotional distance is one who speaks freely and openly, shares intimate personal details, and is transparent in their interactions with others. Aspects like eye contact and an open body posture can further emphasise the sense of closeness. The closeness is further characterised by reciprocity. The reciprocity principle states that in a relationship, the pace at which each individual grows closer to the other should be the same (Vorster, 2003, 2011). In parental alienation cases, there is a large emotional distance between the alienating parent/alienated child and the alienated parent, while that between the alienating parent and alienated child is close (enmeshed).

2.15.1.3. Clarity of self-presentation

This IPA variable describes how a person is seen as 'visible' during contact. The person may speak too quickly or stutter, making it difficult to hear or understand what he or she is saying. In light of this, the variable of self-presentation clarity has significant consequences for the quality of an individual's interpersonal interactions, particularly those between parents and children. As a result, the clarity of self-presentation may be used to describe the quality of a connection. When someone succeeds in painting a clear image of themselves, they are rewarded with pleasant interpersonal experiences (Vorster, 2003, 2011). This variable also speaks to the way each parent is presented to the child during the other's absence. This presentation determines the quality of the connection between the child and their respective parents. Example, in parental alienation cases, the alienating parent will fabricate and brainwash the child about the alienated parent.

2.15.1.4. Effectiveness of expression of needs

Whether an individual expresses their needs successfully within an interpersonal setting substantially affects that individual's self-actualisation and, ultimately, mental health. Not expressing any requirements at all may be just as unproductive as expressing needs in an over-demanding and prescriptive way (Vorster, 2003, 2011). This variable can be seen in the child and the alienating parent's relationship, for example, not expressing needs in front of the alienating parent and parroting words from the alienator to the alienated parent.

2.15.1.5. Confirmation

When a message from the environment confirms that an individual is a unique or outstanding person valued for their individualism, they feel validated. A message of confirmation may be success and achievement, which is subsequently praised by someone else, like a parent reacting to a child's school report. The individual's feeling of value and emotional well-being are affected significantly by whether or not they receive reinforcement and encouragement from their social surroundings (Vorster, 2003, 2011). This variable also speaks to the way in which the parents talk about each other during interviews – are the parents able to see the strengths and weaknesses, or can they only focus on weaknesses and mistakes? For example, not being confirmed in the parental relationship, leads the alienated parent to feeling invalidated.

2.15.1.6. Control

An individual may be in relative control of their circumstances and surroundings or be overwhelmed by the environment's effect (internal and external locus of control). Punctuating oneself as in control or as a helpless victim has significant consequences for one's self-esteem and mental health (Vorster, 2003, 2011). This can also be seen when the alienating

parent blames the alienated parent when something is wrong within their environment and the parent-child dyad.

2.15.1.7. Degree of interpersonal flexibility or rigidity

An ideally functioning individual should demonstrate acceptable behaviour in specific circumstances that demand a degree of style flexibility (Vorster, 2003, 2011). For example, in order to comprehend and respond to a child's requirements correctly as they progressively move from childhood to adolescence, a parent must be flexible in changing to the child's needs and not remain rigid for their own personal gains. This can be seen when the alienating parent uses the child as leverage for as long as the child remains brainwashed due to the rigidity of the alienating parent's views.

2.15.1.8. Potential for eliciting rejection or acceptance

Interpersonal manoeuvres may be classified into two categories: those that elicit acceptance and those that elicit rejection as individuals engage with one another. As a result, individuals either create a caring, loving atmosphere or a hostile, rejecting environment. Constructive growth will be promoted if a child, or any individual, lives in a loving or welcoming setting, but if a person lives in hostile social surroundings or is rejected, it will certainly have important repercussions on his or her mental health (Vorster, 2003, 2011). This variable also speaks to the atmosphere created by one parent for the other. If a hostile and fearful environment is created by the alienating parent for the alienated parent, the child will reject the alienated parent's environment.

2.15.1.9. Linear or circular approach

Individuals can take either a linear or a circular view of the world, where behaviour is either a one-sided phenomenon or a circular and interacting process. Individuals with a linear perspective of the environment are less likely to recognise their "part" in interaction processes and are more likely to blame others for what they dislike in their relationships. As

a result, inefficient and frequently harmful interactional patterns are repeated in a relationship, such as a parent-child relationship, to the detriment of the individual's mental health, particularly the child. This happens when a decision is made for a child based on a linear style of thinking (Vorster, 2003, 2011). This can also be seen in the way in which the parent describes the other parent and the history of their relationship.

2.15.1.10. Skills to meta-communicate

Meta-communication refers to communicating about communication, and it is a crucial ability for sustaining a harmonious relationship. This ability is especially useful when attempting to resolve interpersonal disagreement, as it allows the parties to take a "helicopter viewpoint" of their actions and dialogue to resolve the conflict (Vorster, 2003, 2011). This can be observed in the way the parent speaks about the other parent in the interview and whether they adopt a circular view of the problem or can see their own contributions to the problem and are able to reflect on this view appropriately without blaming.

2.15.1.11. Adequacy of problem-solving

Daily coping with environmental demands requires a level of competence in handling a wide range of difficulties, which might vary from job obligations to disciplining a child effectively. As a result, it is crucial to examine how an individual controls their surroundings, for example, how a parent handles unforeseen environmental difficulties when communicating with a child and how the child reacts to such solutions and the environment (Vorster, 2003, 2011). This variable can be seen during the interview and interactions between the parent and child, specifically the way the parent and child deal with instructions, limitations, and challenges posed during the evaluation.

Using the abovementioned variables to describe patterns of interaction between individuals thoroughly has proven to be useful in the clinical context, and a significant correlation between an individual's IPA profile and their degree of mental health has been empirically

demonstrated (Van den Berg, 2008). As a result, the IPA was included as a diagnostic procedure in the study.

2.15.2. Minnesota Multiphasic Personality Inventory 2/3

The MMPI is a widely used test in cases involving child custody as well as personal injury, malingering, aggression and risk assessments, competence to stand trial, and substance addiction concerns. Many of the items are intertwined. The MMPI has been restructured to incorporate the MMPI-RF (restructured form) scale (Ben-Porath & Tellegen 2020). One of the most common complaints about the MMPI is that it is too lengthy, with 557 true-or-false questions.

This lengthy questionnaire is used to collect data on three major aspects of psychopathology: emotional externalising dysfunction, cognitive dysfunctions, and behaviour externalising dysfunction. There are validity scales – such as the F Scale for evaluating faking, the L Scale for examining lying, the K Scale for showing defensive reflexes, and various other scales – for assessing characteristics that may affect the validity of the test being administered. Neurotic tendencies, somatic complaints, aggression, antisocial behaviour, paranoia, obsessive-compulsive tendencies, unorthodox schizoid views, lack of impulse control, and introversion/extroversion are all assessed on the test.

The MMPI/MMPI-2 has remained the most commonly used adult objective personality test in custody examinations, with the Millon Clinical Multiaxial Inventory-II/III (MCMI) increasing in favour (Rand et al., 2013).

The MMPI-2 was compared with two groups of parents undergoing child custody evaluations. Siegel and Langford (1998) hypothesised that parents who engage in alienating behaviour would have significantly higher scales of L and K and a significantly lower scale of F than parents who do not participate in such behaviour. The parent who engages in alienating behaviour employs primitive defences such as denial and projection (as cited in

Gordon et al., 2008). The authors further found that parents obtain modestly elevated scores designed to assess underreporting (Scales L, K, and S) that suggest[ed] an accurate portrayal of positive emotional adjustment. However, at increasingly elevated levels, the K and S scales suggest defensiveness, denial of any problems, and unrealistic claims of superior adjustment (Semel, 2016).

According to Semel (2016), parents tend to adopt a test-response style in which they portray a favourable image of themselves as being well-adjusted, virtuous, and free of any mental health problems. Semel further noted that there should be elevations in the clinical Scales 3 (Hy: Hysteria), 4 (Pd: Psychopathic Deviate), and 6 (Pa: Paranoia) for parents who engage in alienating behaviours. Moschos et al. (2021) posit that the high values on the scales of paranoia (Pa) and cynicism (Cyn) reflect a cautious attitude in answering by the parents and the suspicion of elevated PAS.

While the MMPI-2 can be used in custody evaluations, Rowlands (2018) identified limitations from issues concerning scale construction (i.e. item overlap; high inter-correlations among scales; clinical scale content reflecting multi-dimensional variables that, in some cases, lack clear definition) that impact psychometrics and raise interpretive challenges. Other shortcomings were that the clinical scale names are misleading or confusing because they reflect traditional diagnostic categories (for example, schizophrenia) or outdated terms like hysteria, and their content does not translate directly to current disorder classification systems (Rowlands, 2018). Further limitations still of the MMPI-2 include the test's lengthiness and the fact that although multiple demographic variables (for example, age, ethnicity, and education) may impact interpretation, the onus is on the evaluator to take such factors into account. Therefore, it is suggested that moderate scale elevations must be interpreted with caution.

Notwithstanding the abovementioned limitations of the MMPI-2, utilising the instrument has its strengths, including the fact that it offers substantive value for professionals. Lopez et al.

(2014) have pointed out that its administration is straightforward; it may be done via pencil and paper or computer software. Moreover, computer scoring and interpretation options are also available with the parental inventory.

Rand (2011) suggests that, where stamina or time is a concern, the MMPI-2 is a shorter version that still allows for the interpretation of clinical scales and code types. Furthermore, with its revision, re-standardisation, and introduction of new scales and indices and the development of the RC Scales, this test continuously evolves to meet practical needs, thus allowing it to remain a user-friendly and easy-to-administer option.

Other arguments in support of the MMPI-2 test dictate that this test can be translated into more than 50 languages. Multiple studies have indicated that MMPI-2 testing is commonly used across the world in different cultures, reiterating its user-friendliness. Following the above, it can be concluded that the advantages of MMPI-2 testing outweighs its disadvantages.

It is important to note that the MMPI-3 is the most recent version of the Minnesota Multiphasic Personality Inventory MMPI. The MMPI-3 is a broad-brand assessment of personality, psychopathology, and interpersonal functioning, similar to its predecessors. The primary goals for designing the MMPI-3, according to Ben-Porath and Tellegen (2020), were to improve the content of the MMPI-2-RF, which was limited to the MMPI-2 item pool, and to update the 30+-year-old MMPI-2/ MMPI-2-RF norms.

Updated versions of Family Problems (FML; originally an Interpersonal SP Scale), Cynicism (CYN; formerly RC3), and a new scale, Impulsivity (IMP), accompany improved versions of the existing externalising SP Scales, Juvenile Conduct Problems (JCP), Substance Use (SUB), and Aggression in the MMPI-3 (AGG). The MMPI-2-RF's activation (ACT) has not been changed.

A study conducted by Hall et al. (2022) concluded that the MMPI-2-RF and the MMPI-3 are psychometrically equivalent. The scores derived from the MMPI-3 can be interpreted by using the MMPI-2-RF.

2.15.3. Millon Clinical Multiaxial Inventory-III/IV

The Millon Clinical Multiaxial Inventory Third Edition (MCMI-III) is another frequently used objective personality measure in custody evaluations. The MCMI-III informed professionals on how psychological disorders, including personality disorders, present. The MCMI-III is a psychological assessment instrument with 175 true/false questions used in clinical settings on individuals who are 18 years and older (Stolberg & Kauffman, 2015)

The MCMI-III has been highly useful in the child custody arena. According toStolberg and Kauffman (2015), low BR scores across most MCMI-III scales are common in custody evaluations. Elevations on severe personality (i.e., Scales S, C, and P) and severe clinical syndrome (i.e., Scales SS, CC, and PP) scales are uncommon in such evaluations, as it does not favour the parent undergoing the evaluation. However, the above authors stress the importance of the evaluator to pay attention to elevations in Scale Y (social desirability), Scale 4 (Histrionic), 5 (Narcissistic), and 7 (Compulsive) and low scores on Scale Z (Debasement). Lenny and Dear (2009) also noted the elevation in the above scales and stated the reasons for the elevated scales is due to the parent wanting to portray themselves as sociable, capable, orderly and meticulous. In a separate study, Strack (2008) posits that elevated Scales 4, 5 and 7 generally ascribe positive qualities to the parent involved in the evaluation and allows them to be seen as the most fitting parent.

One of the greatest strengths of using the MCMI-III is that it is theory-based. It has been highlighted by Garber (2011) that an important feature of the MCMI-III is that its author (Theodore Millon) is a leading and renowned theorist in the categorisation and diagnosis of personality disorders. This attests to the fact that the test is grounded in theory, since the

author is an individual who possesses a complex and diverse understanding of personality disorders, implying the same.

According to Garber (2011), the MCMI-III also has the advantage of using personality prototypes which align with the manner in which clinicians think, thus implying that the test scales are aligned with the Diagnostic Statistical Manual-IV (DSM-IV).

It is worth noting that MCMI-III testing is short compared to the other parenting inventories. The MCMI-III contains only 175 items, whereas the MMPI-2 has 576 items, which makes the administration of the MCMI-III easier because it can be done within a relatively short period of about 25-30 minutes.

Although the foregoing highlights the strengths of MCMI-III testing, it is imperative to emphasise the shortcomings of the test. The argument made by Ben-Ami & Baker (2012) is that it is unclear as to how many traits are required for this test to adequately represent a personality. This uncertainty may influence the final results, which leads to an inaccurate outcome during the use of the MCMI-III.

In addition to the above disadvantages, another shortcoming of the MCMI-III testing is that it may include an infinite and indefinite amount of categories since every person possesses a different personality and is different from the next.

It is important to note that there is an updated version of the MCMI-III. Evaluators consider using the MCMI-IV for numerous reasons. One is the use of BR scores instead of the more conventional T-scores seen on other widely used personality tests (e.g., MMPI-2-RF, PAI). In contrast with T-scores, which assume a comparable distribution for all illnesses and presentations, a BR score will evaluate the distribution for a given diagnosis or presentation. As a result, a BR score takes into consideration the various rates of diagnoses and clinical presentations to help evaluators employing the MCMI-IV as part of an evaluation make more accurate differential diagnostic decisions (Eastin et al., 2021).

When using the MCMI-IV, the evaluator should be mindful of the high-risk factor of over-pathologisation. This is due partly to the way the MCMI-IV has been normed. Considering the way the assessment is normed, it is suggested that the MCMI-IV be used only by those who have a psychiatric history (e.g., substance use disorder, mood disorders) (Eastin et al., 2021)

2.15.4. Rorschach performance assessment system (R-PAS)

Custody evaluators' surveys reflect that the Rorschach has been widely used in custody evaluations (Ackerman & Ackerman, 1997, Hagan & Castagna, 2001). The literature suggests that the Rorschach is useful for detecting disturbances in thinking and, to an extent, interpersonal dependency. Critics of Rorschach such as Erickson et al. (2007a, 2007b) have acknowledged the usefulness of the Rorschach in detecting thought disturbances and interpersonal dependency.

Custody evaluators who prefer the Rorschach report that it produces data that is qualitatively different from other self-report instruments, such as empathy and the ability to cope with stress and conflict, which are characteristics of loving and supportive parenting. Gerard (2005) further argues that the Rorschach can be a useful method for exploring particular custody-relevant questions such as how parents are likely to hold up in stressful and emotionally painful circumstances, respond with warmth, sensitivity, and empathy to children's emotional demands, demonstrate effective interpersonal skills in co-parenting, and form realistic expectations for themselves and others.

According to Calloway (2005), the Rorschach adds rich and nuanced understanding to the descriptions of the individuals within the family and their interactions; it further explores the family dynamics and allows for the description of individuals in a uniquely personal way.

The above authors further believe that with the Rorschach, it is more difficult to "fake good" than with other objective personality tests, and self-report parenting measures are one of the

stated benefits of the assessment. Although some research supports this claim (Grossman et al., 2002), it has been suggested that attempts simulating the Rorschach may result in exactly the opposite kinds of bias (i.e., less-than-favourable protocols and higher rates of pathology on some variables when approval seekers try to show their “capabilities” with long, elaborate responses).

The R-PAS has been commended for using standardised scores instead of raw scores, which makes it notably more efficient and credible, as its interpretations are based on the response process.

Different evaluators' styles can significantly affect some pertinent Rorschach variables when using CS administration and coding guidelines, particularly the complexity of a person’s responses and the degree to which the objects s/he sees fit the blot contours, which is used as a measure of reality testing (O’Donohue et al., 2016). In order to ensure that both steps are undertaken with more consistency and reliability, R-PAS made numerous improvements to reduce ambiguities in administration and coding, and such improvements have gone a long way in ensuring that child custody evaluations are more credible and authentic.

2.15.5. Child Behaviour Checklist (CBCL)

One of the main advantages of the Child Behaviour Checklist (CBCL) is its versatility. Meier (2009) has argued that Checklists offer a simple evaluation method that can be used repeatedly. A custom behaviour checklist can be constructed to meet specific objectives for the evaluation. Original checklists can be tailored in accordance with the changes required for a given evaluation. This type of assessment is quick to complete since the evaluator only needs to check whether or not the child exhibits the behaviour on the list.

Moreover, a checklist is advantageous because it allows for evaluating specific traits in a child's behaviour. Baker et al. (2018) suggest that instead of general observation, the evaluator can hone in on what that child is doing and focus on those particular behaviours or

traits for a targeted assessment. The detailed traits steer the checklist evaluation in a direction that will allow the evaluator to focus on one or more narrow behavioural aspects. Because the checklist spells out exactly what the evaluator is looking for, different people can administer the evaluation with similar results.

However, it is worth noting that CBCL has been criticised for its narrow view; while specific behaviours listed on the checklist can give the evaluation focus, it can also limit the assessment scope, thus, resulting in an incomplete evaluation of the child's behaviour. A checklist leaves no interpretation for children who might exhibit a particular behaviour only in certain situations or only partially demonstrate each trait. Therefore, it is the opinion of Aloia and Strutzenberg (2019) that the checklist fails to take into consideration things such as the amount of time it takes the child to exhibit the behaviour or environmental factors which may affect the actions of the child.

Furthermore, behaviour checklists generally lack attention to detail. It has been argued by Meier (2009) that while specific in the traits a checklist evaluates, this assessment method does not provide supporting evidence and details about the specific trait. In a checklist, the evaluator simply checks whether the child exhibits each behaviour on the list. The evaluation generally excluded specific descriptions of behaviours or anecdotal records of specific incidents. In other words, if another adult reviews the completed checklist, s/he would get an idea of what the child can do. However, there will be an absence of the causes of those behaviours or actions emanated by the child.

2.15.6. Parenting Stress Index-4 (PSI-4)

The fourth version of the popular PSI tool is a 120-item inventory designed to assess the amount of stress in the parent-child system. It focuses on three key categories of stress: child characteristics, parent characteristics, and situational/demographic life stress.

However, the PSI-4 has been criticised for its lack of reliability and validity studies (Lopez et al., 2014). Although parental inventories may be useful in generating information that is essential in comprehensive evaluations, they often yield inconsistent results (Rand, 2011). Few studies have measured the interrelationship between high-conflict divorce and parental alienation and focused primarily on the PSI-4 and its strengths and weaknesses in relation to parental alienation. Most of the studies conducted in the avenue of divorce relate to the child's overall level of adjustment and lack a strong theoretical base (Rowlands, 2018). Studies have further relied on interviews and observations as the primary data source, but the instruments used lacked reliability and validity studies.

Emery et al. (2005) critiqued that the PSI-4 relies overly on parents' reports of their children's behaviours and that it is not designed for the dynamics of divorced families. With parental alienation cases, each parent may have a contradicting perception of their child's behaviour. Parents may seem amenable, put themselves in a favourable light, and grossly exaggerate or minimise the child's symptoms. Despite its shortcomings, Hynan (2014) argues that PSIs have the potential to help identify sources of stress in the family system that raise concerns about potential harm to the child. In cases where there are issues of partner violence, child maltreatment, alienation, and parental dysfunction co-occur with a mental illness or substance abuse.

As with any other instrument or assessment procedure, findings should be combined with data generated from other evaluation methods.

2.15.7. The Marschack Interaction Method (MIM)

The MIM is a structured method for monitoring and evaluating the overall quality and type of caregiver-child relationships. It consists of a series of basic activities meant to elicit behaviours in four key areas in order to assess caregivers' ability to (Bernet et al., 2010):

- Set limits and maintain a properly ordered environment (Structure);

- Interact with the child while remaining aware of his or her mood (Engagement);
- Attend to the child's attention, calming, and caring requirements (Nurture);
- Assess and enable the child's capacity to respond to the caregivers' efforts and support and encourage the child's attempts to accomplish at a developmentally appropriate level (Challenge).

The MIM is often used as a clinical tool to observe and assess the nature and quality of the parent and child's relationship and determine the necessity of an intervention to improve the relationship. The MIM is often used to determine the quality of the parent-child relationship, the parent's caring capacity for the child, their capacity to form a relationship, and the quality of the current relationship (Bojanowski & Ammen, 2011)

Bernet et al. (2016) argued that interactional patterns can be used to observe and understand both the alienating and alienated parents' attachment to the child. Moreover, Monson et al. (2014) aver that MIM allows evaluators to observe authentic interaction between the alienating parent, child, and alienated parent. Patterns reflecting the quality of the relationship and its dynamics can be identified using the MIM and may offer clues about the quality of the attachment between the child and the divorced parents. It has been further argued that in parental alienation cases, the way the child speaks about the parent (alienated) and the nature of their interaction with the same parent (alienated) are often at odds (Monson et al., 2014).

2.15.8. Parent-Child Relationship Inventory (PCRI)

The PCRI is a self-report instrument with 78 items. It can be done electronically or by hand. The PCRI's purpose is to assist in the assessment of a parent's feelings or attitudes toward becoming a parent to his or her children (Gerard, 1994). This evaluation test should be used in conjunction with other measures and should not be used alone for making crucial decisions about family relationships. This 78-question instrument takes approximately 15

minutes to complete; however, there is no time restriction. Respondents respond to questions by choosing ‘strongly agree’, ‘agree’, ‘disagree’, or ‘strongly disagree’ on a four-point Likert scale (Gerard, 1994).

The PCRI contains seven content scales: Parental Support Scale (SUP), Satisfaction with Parenting Scale (SAT), Involvement (INV), Communication (COM), Limit Setting (LIM), Autonomy (AUT), and Role Orientation (ROL). Twenty-six (26) questions are keyed in a positive way, which means that a participant's response of strongly agree or agree will be scored as a higher number. Forty-seven (47) questions are keyed negatively, meaning that a response of disagree or strongly disagree will result in a higher numerical score (Hynan, 2014).

According to Gerard (1994), the Parental Support Scale assists evaluators in determining how much physical or emotional support a parent should receive. The Parenting Satisfaction Scale is used to evaluate if a parent enjoys being a parent. The Involvement scale measures how involved a parent seems to be in his or her child's best interests and activities. The Communication scale assesses a parent's ability to communicate with their child in a variety of contexts and situations. Questions concerning the parent's disciplinary style with their child are included on the Limit Setting Scale. The Autonomy scale assesses a parent's willingness to help their child become independent. Lastly, the Role Orientation scale assesses how parenting duties are shared with the other parent as well as whether the parent feels that mothers and fathers have distinct gender roles in childcare.

According to Chung et al. (2020), high scores on the PCRI indicate a positive attitude towards parenting and good parenting skills, while low scores are associated with poor parenting skills. The social desirability indicator built into the measure is effective at detecting the attempt to present an overly favourable image of the parent-child relationship, which is common in custody evaluations (Gerard, 1994). Hynan (2013) further argues that

the SOC scale should be paid attention to as parents can represent themselves unrealistically.

2.15.9. Personality Assessment Inventory (PAI)

Semel (2016) positions the Personality Assessment Inventory (PAI) as the “assessment of a broad range of clinical variables and interpersonal functioning in clinical and forensic settings” and states that it has been identified as the “second most frequently utilised instrument in the evaluation of adults” by forensic psychologists, followed by the self-report measure in the assessment of parents undergoing child custody evaluations (Semel, 2016, p. 4).

According to Semel (2016), the PAI includes a number of validity scales, three of which are the Infrequency (INF), Positive Impression Management (PIM) and Negative Impression (NIM) scales. The INF and PIM scales correspond to the MMPI-2’s F and L Scales. The NIM scales measure the tendency of the respondent to malinger, while the PIM scale measures defensiveness. Hynan (2013) and Semel (2016) argue the importance of the PIM scales in custody evaluations as evaluators need to strongly consider the extent to which parents are trying to present themselves in the best possible light.

There are 11 clinical scales, namely the Somatic Complaints (SOM), Anxiety (ANX), Anxiety Related Disorders (ARD), Depression (DEP), Mania (MAN), Paranoia (PAR), Schizophrenia (SCZ), Borderline features (BOR), Antisocial Features (ANT), Alcohol Problems (ALC) and Drug Problems (DRG) scales. Further, there are five treatment consideration scales, namely the Aggression (AGG), Suicidal Ideation (SUI), Stress (STR), Non-support (NON) and Treatment Rejection (RXR) scales. Further added to the above scales are three interpersonal scales, namely the Dominance (D0M) and Warmth (WRM). Each Clinical scale is further broken down into sub-categories (Toop et al., 2019).

In the child custody evaluation context, there tends to be a pull for positive response distortion during clinical interviews and psychological testing. According to Hynan (2013) and Semel (2016), it is not uncommon to find elevations on MAN, particularly MAN-G (Grandiosity), and in some cases on ARD-O (Obsessive Compulsive) in situations that pull positive response distortion. This suggests that some items in the MAN-G and the ARD-O subscales used in child custody evaluations can be associated with positive functioning and are thereby susceptible to positive response distortion. According to a separate study by Kurtz et al. (2015), parents undergoing custody evaluations are likely to yield the impression that they are highly virtuous (PIM), have no psychological dysfunction and a high level of self-esteem and confidence (MAN-G) (suppression of clinical scales with the possible exception of MAN), orderly and organised qualities (ARD-O), leader-like abilities to be assertive, effective, able to take charge (DOM), whilst also being warm, empathic, sympathetic and patient with others (WRM). Such parents would be thought to possess positive parenting qualities.

According to Kurtz & Blais (2007), the PAI has much strength. The four-point scale prevents respondents from being forced into choosing an answer that does not truly reflect them. The scales are also economical, with only 344 items and are easy to understand. Furthermore, the PAI shows statistical strength and discriminant validity.

One of the instrument's most notable weaknesses is that it is a self-report inventory and relies on the honesty of the individual, making accuracy questionable as individuals need to show a level of self-insight. Hence, the author argues that the PAI should be supplemented with other inventories, such as the MMPI-2 (Kurtz & Blais, 2007). In light of the above, the PAI Plus as context-specific norm-groups, i.e., child custody evaluations and additional indices to detect under-reporting or over-reporting, can be used to aid in the analysis of the PAI in child custody evaluations (Psychological Assessment Resources | PAR, Inc., n.d.)

2.16. Roles of mental health professionals in parental alienation

According to Rand (1997), specialists in mental health may be involved in contentious custody/visitation disputes in various roles such as evaluators, clinicians, counsellors, mediators, case managers, educators and/or advisors to parents or their legal representatives.

Mental health professionals can assist in the parental alienation field by recognising the needs of the alienated child, evaluating the parenting strengths and weaknesses of each parent, providing effective ways to reduce parental conflict, and providing courts with their recommendations on what would be in the best interest of the alienated child.

In most cases in South Africa, clinical psychologists and sometimes social workers assume the role of expert witnesses in child custody evaluations. The strong dependency on psychometrics and emphasis on formulating the dynamics of the family system is often cited as reasons as to why these practitioners take on the role of an expert witness. It should, however, be noted that psychiatrists are by no means prohibited from assuming the role of an expert witness, and they may be required to do so from time to time (Townsend, 2017). In such matters, an expert witness is usually appointed either by the Court or at the joint request of both parties. The expert witness is an objective party with no previous relationship with either party and has no vested interest in the matter, thus allowing the expert witness to concentrate solely on a legal outcome unfettered by commitments of partiality or treatment of everyone involved.

Expert witnesses are permitted to initiate contact with fact witnesses and to seek collateral details about the parties (to complement their own psychiatric interviews, home observations and psychometric data). A fact witness must refrain from commenting on the custody of the child but rather their own duty in providing factual information and knowledge to assist the expert witness (Townsend, 2017).

2.17. Problems in assessing for parental alienation syndrome

There are various concerns associated with assessments on alienation. Many assessments, as defined by Gardner (1985), lack scope and completeness and cease at the simplistic finding of PAS. That is, one parent is regarded as engaging in alienating behaviour and/or visits are refused by the child. This conclusion infers causality and contributes to the policy of a fixed intervention. It is reasoned that when one decides that a child is alienated, it follows that a parent is engaged in brainwashing in the most troubling circumstances of PAS. The recommended alternatives are to place the child with the "alienated parent" or, instead, punish the "alienating parent." through sanctions. In other instances, assessments fail to distinguish alienation from other types of parental rejection, such as realistic estrangement, a natural, developmentally anticipated one-parent alliance, and a partnership between a child and a parent. The interventions appropriate for one case may be counterproductive in another (Lee & Olesen, 2001).

In family law cases, the contentious issue of PAS has often posed inherent dangers which emerge for evaluators when they make an assumption that alienation is likely to be false because such claims are widespread, common and strategically beneficial (Lee & Olesen, 2001). Another troubling inference is that the child is immediately treated as alienated if the observation is that a parent has engaged in alienating conduct. This may cause an evaluator to overlook other important issues and problems. It also leads the evaluator to assume unnecessarily that, even though that may not be the case, the child rejects a parent because the child is being alienated (Sullivan & Kelly, 2001). A common mistake occurs when the alienated parent presents with problematic parenting and immediately eliminates the likelihood of alienating processes playing a role in the rejection. Finally, the presumption may be that if the child does not refuse visitation, they are not at risk. This latter statement fails to

consider the possible harm of ongoing alienating processes and the vulnerability of the child, who may be alienated at a later stage.

False allegations, unlike unsubstantiated allegations, are deliberate fabrications made in the hope of influencing the justice system, seeking retribution against an abusive former spouse, or may be the consequence of the reporter's emotional distress. Where there is deliberate fabrication, it is thus necessary to differentiate whether it is a parent who takes the lead in the fabrication or whether the child is lying without the adult's influence. Allegations that are explicitly unsubstantiated or false should also be differentiated from those where violence is suspected but unable to be substantiated (Oates et al., 2000).

A particular challenge in alienation evaluations is when there has been no parent-child interaction for an extended period of time. It is a common procedure for the assessor to evaluate the child together with each parent in child custody assessments (Moore & Ordway, 2013). If the child is scared and phobic about interaction with a parent, the possible trauma of that interaction may be inaccurately determined as possible alienation.

Although the role of the evaluator does not require comprehensive and specialised training for such interaction, the decision to compel such interaction against the wishes of both the child and the alienated parent must be balanced heavily with the need for a full assessment and understanding. Insisting on a parent-child observation might result in the child becoming traumatised, and the evaluator could lose rapport with the associated parent. The issue of traumatising or overwhelming the child is heightened when the child is not engaged in ongoing care (Moore & Ordway, 2013). It is important to note that the inability to assess the parent and child together severely weakens the results of the assessment.

Generally, during the assessment process, it is crucial that communication between the child and the alienated parent is maintained. The purpose of such communication is two-fold, as it helps the evaluator to obtain important information on the parent-child relationship, and it

may prevent the rejection of the parent by the child from being more ingrained (Gould, 2004; Stahl, 2011).

2.18. Recommendations for best practices in response to assessing parental alienation

According to Farkas and Anthony (2006, p. 28),

> best practices can be inclusive of both evidence-based and value-based practices. Best practices are empirically based practices that have impacted recovery outcome variables and that have been tested in a variety of geographical settings with a diversity of populations. Best practices also are value-based practices that have recovery values underlying the practice; the values should be able to be described and measured.

According to WHO (2008), best practices involve judgement that requires prior analysis based on the following criteria:

- Effectiveness- This criterion is fundamental in the definition and implies that practice must work and achieve results that are measurable.
- Efficiency- The proposed practice must produce results with a reasonable level of resources and time.
- Relevance- The proposed practice must address the priority and specific topic.
- Ethical soundness-The practice must respect the current rules of ethics for dealing with human populations.
- Sustainability- The proposed practice must be implementable over a long period of time without major changes.
- Possibility of duplication- The proposed practice, as carried out, must be replicable.

By definition, best practice should meet the criteria of effectiveness, efficiency, and relevance in addition to one or more of the other criteria. A “best practice” does not need to meet all of the above criteria as it entails anything that works to produce results without using excessive resources and that can be useful in providing a duplication of the practice.

2.19. Best practices in the assessment of parental alienation as outlined by Templer et al. (2017)

Assessments should be impartial, thorough, and expeditious. Assessments can only be performed by court-ordered, impartial assessors with specific authority and court instructions. Even if the parents provide for the assessment, their agreement should be formalised in a court order. Experts employed by each parent independently are very likely to polarise the situation further. Allegations also concern the child's protection and welfare; thus, these assessments must be thorough and rigorous to prevent the risks of superficial conclusions and hasty recommendations.

Evaluations should be concluded as soon as possible. Failure to include a nuanced, thorough assessment with accompanying recommendations can also result in delay after the release of the report, which may contribute to the solidification and strengthening of the child's alienation.

A large spectrum of family dynamics is included in cases concerning the issue of alienation (Ellis, 2008). The evaluator must differentiate between families in which realistic estrangements and normal or developmentally anticipated interests, alignments, and attachments occur, as well as those in which a child is alienated from a parent psychologically or where the child is separated from a parent for reasons of child abuse, domestic violence, or incompetent or poor parenting. While the actions such as unwillingness or total inability to spend time with a parent occur mutually, the alienation that is produced is, really, true estrangement.

Some of the recommendations that are made internationally and in South Africa are as follows:

- Ordering that the child be left with the alienated parent while the parents undertake individual and/or family therapy (Sullivan & Kelly, 2001);
- Setting in place strict visitation schedules;

- Threatening with court sanctions to motivate parental compliance to court orders;
- Altering custody or residency arrangements; (Baker & Darnall, 2007; Gardner, 2001).

This is known as the bridging programme in South Africa.

2.20. Conclusion

In summary, this chapter considered the context of parental alienation and provided an overview of parental alienation and PAS. The model describes PAS as a disorder that arises chiefly in child-custody dispute contexts. Its manifests in the child primarily in a campaign of denigration against the parent, which has no reasonable justification. This chapter also reviewed the different aspects and features of parental alienation and looked into the evaluations available in literature. This evaluation revealed and weighed the strengths and weaknesses in the current PAS literature. The assessment of parental alienation was reviewed and discussed at length.

CHAPTER 3: RESEARCH METHODOLOGY

"Parental Alienation is an emotional act of violence
That is aimed at an adult, but critically
Wounds a child".
STEVE MARABOLI

3.1. Introduction

This chapter discusses the research methodology and design that were used in this study. It then presents the research approach and philosophy adopted in this study, followed by the sampling method, data collection instrument, data analysis strategy, and ethical considerations, as well as other research techniques used in this study.

3.2. Research paradigm

Haradhan (2017) defines a research paradigm as philosophical perspectives or a set of assumptions or beliefs on how knowledge is generated or developed. There are various paradigms in social science research, including but not limited to the following: social constructivism, positivism, and Interpretivism. Social constructivism was adopted in this study to explore the best practices for assessing parental alienation, with a focus on the perspectives of mental health professionals working as experts in a South African setting. Social constructivism maintains that "reality is a social construct and the interests of humans are vital for research purposes and knowledge is generated or constructed through social interaction" (iNtgrty, 2016, par. 4).

According to Fouche and Schurink (2011), constructionists do not believe in one reality but rather that reality can only be familiar to those who encounter it subjectively. Andrews (2012) posits that the social constructionist approach questions the idea of one truth.

Schwandt (2003) (as cited in Andrews, 2012) notes that constructionists perceive truth and knowledge as created or developed and not discovered by the mind. The construction of

knowledge and socialisation takes place through the means of language, which provides one with the basis to create and structure thoughts and concepts. It also enables the individual to engage in conversation, providing one with the means to maintain, modify and (re)construct reality based on their personal experiences (Andrews, 2012). Thus, people constantly define and transact reality through social interactions and experiences considered neither objective nor fixed but rather true to a certain context, event, or situation within time (Andrews, 2012). This paradigm or philosophy was appropriate for this study as it views the participants as agents who actively construct their realities through the language they use to conceptualise parental alienation. The participants' conceptualisation of the reality of parental alienation is informed by the theories and frameworks they employ to understand it, and this will affect the methods they will use to assess for it. For example, a mental health professional whose reality and understanding of parental alienation are informed by an ecosystemic framework will likely perceive parental alienation as a dynamic interactional phenomenon that is formed and maintained through alliances, coalitions and triangulation. On the other hand, a mental health professional whose reality is informed by a psychodynamic framework will likely perceive parental alienation in terms of intrapsychic motives and relational expressions. Professionals from a psychodynamic framework may be more interested in assessing underlying motives, childhood traumas, and subconscious fears, while those from the ecosystemic framework will assess interactional styles.

From a social constructionist perspective, gaining knowledge of participants' preferred ways of conveying their reality of parental alienation through their theoretical perspectives is as important as their actual methods for assessing parental alienation. This study explored the best practices for assessing parental alienation based on mental health professionals' conceptualisation of parental alienation.

3.2. Assessment theory

This study also incorporated assessment theory as an underpinning theory in the assessment of parental alienation. The reason for including assessment theory as an underpinning theory is to ensure that certain sound practices or guiding principles are followed with all assessment procedures used by professionals. Each professional will assess for parental alienation according to his or her own framework, and these frameworks will be informed by their conceptualisation of parental alienation.

According to Kline (2000), assessment is implemented to help comprehend and foresee the behaviour of the testee. Lovler et al. (2010) observe that assessment can generally be conducted in various ways, including but not limited to the following: history taking, family interviews, behavioural observations, and standardised assessments. The evaluation process consists of collecting, reviewing and synthesising specific family background data, not only to recognise pathology and problems but also to assess strengths, weaknesses, and means (Thomlison, 2009). Thomlison (2009) further maintains that various methods and principles are employed during assessment procedures. These principles are outlined below:

3.2.1.1. Assessment principles

Four key principles of assessment should be applied to the assessment process (Thomilson, 2009). These are:

Validity- An assessment is valid only when it assesses what it claims to assess. It is achieved when the assessment used is related to the outcome or the reason for referral. It further demonstrates that the performance criteria have been met and are sufficient to cover the requirements of the reason for referral. For example, if the evaluator received a referral to assess personality functioning, the evaluator would need to choose an assessment that

meets the referral outcome. The evaluator could use the MMPI-2 instead of the JSAIS, as the MMPI-2 is known to assess personality functioning and not the JSAIS.

Reliability- An assessment is reliable when it interprets the outcome effectively and can be consistently applied from case to case. For example, the MMPI-2 can be used in the assessment of personality functioning and parental alienation consistently. In a study by Burla et al. (2019) and Roma et al. (2020), the personality functioning of parents involved in child custody evaluations was investigated using the MMPI-2, an inventory which is frequently used in forensic contexts and provides a reliable measurement of personality functioning in parents who are involved in parental alienation. Roma et al. (2020) further argued that certain personality functioning, such as paranoia, exacerbates the use of parental alienation during custody battles.

Flexibility- An assessment is flexible when it can be used effectively across a range of delivery sites and still meet the outcome. For example, it can be conducted at a workplace or the evaluator's office. Furthermore, assessments can also be culturally sensitive and can be used across different populations, as assessments are generally normed to ensure that reliable information is produced from the assessment to meet a certain outcome.

Fairness- An assessment is fair when it is designed in such a way that it does not limit or stop a testee from completing it simply due to personal factors such as age, gender, educational level, and ethnic background. The assessment chosen should take into consideration the testee's educational background, age, and ethnic background as some tests have a certain reading level, i.e., the MMPI-2 and the PAI. Furthermore, to ensure fairness in parental alienation assessments, the evaluator should have in-depth knowledge of the nature, dynamics, and impact of parental alienation. The evaluator would need to be competent in administering and scoring assessments, should know what to look for when interviewing adults and children, and know what to look for in observational assessments.

The above principles should be considered when selecting assessment tools during the assessment of parental alienation to ensure that the outcome of the referral is met (Thomilson, 2009).

3.2.1.2. Guidelines for the results

To ensure that the results meet the requirements of the referral or for recommendations, evaluators should apply the following four guidelines to the information collected from the assessments (Thomilson, 2009):

Valid- The key issue is to ensure the results are relevant. It must relate to the outcome/competency being assessed and must match the competency/outcome that is required. Evaluators should demonstrate competence in the areas they assess to ensure that the competencies are clearly understood and the evidence is appropriate. The evaluator should be qualified and trained in using the assessment of choice.

Current- The results must be up to date and suitable to support a recommendation. If assessments were done six months ago, assessments should be re-administered, or different assessments should be used to assess the same domains that were assessed in the previous assessment to take into account any changes that could have occurred from the time of the previous assessment.

Authentic- The evaluator must be sure the results belong to the individual concerned and not someone else. If the results were scored and or interpreted by more than one evaluator, then the evaluator must ensure that the results are also contextualised to provide a thorough understanding of the individual and should ensure a variety of sources were used to make a recommendation

Sufficient- The quantity and the quality of the results collected from the assessment must be appropriate so the evaluator has sufficient information on which to base a recommendation.

It is recommended that the guiding principles of assessment theory provided by Thomlison (2009) should be the foundation for all mental health professionals to ensure that assessments used and recommendations made are grounded on a basic framework. This will assist the validity of such recommendations made from parental alienation assessments by ensuring that common principles were used to choose assessments, interpret assessments and make a recommendation.

3.3. Research approach

Creswell (2014) defines a research approach as a plan or strategy that informs the direction to successfully and systematically conduct a study. A research approach integrates numerous techniques, tools, processes, or procedures to review or gather information or data (Frost, 2015). This study adopted a qualitative approach. According to Kumar (2005) a qualitative approach is primarily aimed to describe a phenomenon based on non-numerical information gathered from human opinions, experiences and beliefs without attempting to quantify it. According to Howes (2015), the qualitative approach is subjective and does not give generalisations. The qualitative approach focuses mainly on understanding the meaning participants gather through recounting the incident in the natural settings in which the phenomenon occurs. Taking note of the above, Polit and Beck (2017) note that the qualitative approach attempts to uncover conscious and unconscious individual elucidations in what they believe in or do.

This study employed a qualitative approach to gain a deep understanding of the best practices in assessing parental alienation. The fact that participants are regarded as experts in the assessment of parental alienation and the qualitative approach allowed me, the researcher, to source their motives and reasoning behind the decisions they make when conducting an evaluation of parental alienation. As Nieuwenhuis and Smit (2012, p. 126) noted, qualitative research allows for “rich and in-depth explorations and descriptions of

data" by capturing the participants' opinions, inputs and perceptions on the best practices for assessing parental alienation in a South African context.

3.4. Research design

Polit and Beck (2017, p. 36) define a research design as a "strategic plan of how the researcher goes about generating and answering the research questions". In other words, a research design is an outline for collecting as well as analysing data (Saunders et al., 2016). There are various research designs in social science research, including exploratory research, casual-comparative research, descriptive research, explanatory research, correlational research and contextual research designs, among others (Haradhan, 2017). This study adopted an exploratory and a contextual research design as it sought to explore and gain insights into the best practices for assessing parental alienation from professional mental health professionals in South Africa.

An exploratory research design was deemed suitable for this study as little is known about the specific assessment procedures for assessing parental alienation (Saunders et al., 2016). The study hence sought to gain a deeper insight and understanding of mental health professional participants' views of best practices for assessing parental alienation based on their conceptualisation of parental alienation. The contextual research design was also adopted in this study to explore how different conceptualisations of parental alienation and different frameworks guide the choice of assessment procedures by the mental health professionals in this study. According to Burns et al. (2017), contextual research design entails exploring a subject within a particular context, and this context can also refer to how parental alienation is played out in high-conflict divorces. Ritchie and Lewis (2009) (as cited in Alpaslan, 2010, p. 27) observe that contextual research "is preoccupied with identifying what exists in that particular social world and the way it manifests itself.

In line with the above, utilising the two research designs helped me gain in-depth insights and understanding of the best practices used in assessing for parental alienation and how

different definitions and frameworks of parental alienation can further produce different assessment procedures in each context.

3.5. Sampling

According to Bless et al. (2006, p. 98), the concept “population” can be defined as the “entire set of objects or people which is the focus of the research and about which the researcher wants to determine some characteristics”. Neuman (2003) explains further that the researcher specifies the unit being sampled, as well as the geographical locations. The target population is the primary group of subjects with common traits relevant to the inquiry that the researcher wants to study.

The target population of this study was mental health professionals (clinical psychologists) that deal with parental alienation in Gauteng. However, the entire target population could not be used in this study due to financial and time constraints; as such, sampling was used to select the participants of the study. Taking note of the above, the non-probability purposive sampling technique was used to select five registered clinical psychologists (male and female) with between three and five plus years of experience in the field of parental alienation as well as primary residency and contact assessments. Participants that no longer worked with parental alienation cases in high-conflict divorce at the time of this study and cases that are linked to estrangement were excluded from this study.

According to Saunders et al. (2016), purposive sampling involves the researcher selecting research participants based on his/her subjective judgement of the participants’ experience, history, profession, and knowledge of the subject under study. Polit and Beck (2017) concur with the above and further maintain that with purposive sampling, the researcher can recruit the correct participants who are knowledgeable of the subject under investigation and can provide rich information about the phenomenon. The researcher conducted an internet search on forensic psychologist that specialises in the field of parental alienation in the

Gauteng area. The researcher reviewed the Psychologists profile to ensure they met the criteria for inclusion, contacted the psychologist via email to request their participation and then sent an information letter and consent form-if they agreed to participate in the research study. Therefore, the use of purposive sampling in this study enabled the capturing of rich information and the gaining of in-depth insights and understandings of the participant's experiences concerning the assessment of parental alienation.

3.6. Data collection

Frost (2015, p. 56) defines data collection as "a process of gathering data or information from all pertinent sources to identify an answer to the research problem, test the hypothesis and examine the results". Data collection is categorised into two groups, namely quantitative and qualitative methods, and each group uses specific data collection instruments (Haradhan, 2017). According to Creswell (2014), there are various data collection instruments in qualitative research, including but not limited to checklists, interview guides, qualitative questionnaires, ethnographic observations, document reviews and focus groups. In this study, the research participants were the primary source of data collection and face-to-face semi-structured interviews were used to assist in the data collection process. Semi-structured interviews, sometimes referred to as informal conversations, are very flexible and create a conducive environment for the participant to willingly share their own experiences with the interviewer or researcher (Saunders et al., 2016). Burns et al. (2017) maintain that the use of semi-structured interviews allows for the capturing of rich information from the participants as there is room for follow-up questions for the interviewer to seek clarification on areas either one or both parties does not understand.

Face-to-face semi-structured interviews were conducted with the five selected clinical psychologists at their workplaces. Each interview lasted between 45 and 60 minutes, and the interviews were recorded, with the permission of the participants, using an electronic recorder to ensure that participants' feedback was recorded and reported accurately. An

interview guide (see Addendum C) was used to assist with the data collection process and it was designed to capture all the relevant information of the study. Thus, the interview guide was used to capture the following information:

- Section A: Employment experience
- Section B: Interview questions based on research objectives which also provide answers to the key research questions.

As mentioned above, the interviews were contacted at the participants' workplace, and all the COVID-19 regulations were observed, which involved hand sanitising, social distancing and the wearing of masks throughout the interview process. Emails containing the information about the research study and the consent form (see Addendums B and D) were provided the moment the participant agreed to participate in this research study.

The semi-structured interview guide allowed each participant to provide information on how they conceptualised parental alienation and based on this conceptualisation, how they specifically assessed for parental alienation. The semi-structured interview guide speaks to the research design (social constructionism) directly as it acknowledges that each participant constructed their own assessment procedures based on their own conceptualisations, views, and reality of parental alienation, and each participant would share unique information based on their conceptualisation of parental alienation.

3.7. Data analysis

In qualitative studies, the data gathered during interviews is usually in audio format, which is then transcribed into text to identify patterns, themes, and subthemes within the data set. Thematic analysis and content analysis are the commonly used data analysis strategies in qualitative research, and the difference between the two is blurred and therefore used interchangeably at times (Saunders et al., 2016). This study employed content analysis to

analyse data. According to Graneheim and Lundman (2004), content analysis focuses on content and subject and is focused on variation, for example, the difference and similarities between parts of a text. Content analysis was used in this study because it considered each participant's reality of parental alienation as being different and informed through a theoretical lens, making the choice of this analysis strategy both technical and logical. Furthermore, in content analysis, data is presented in words and themes, allowing for interpretation of the results to be made. The type of analysis used is determined by how thoroughly the researcher strives to represent the participants' statements on a subject during the analysis. As a result, the number of participants required and the manner in which data will be gathered will be affected (Burnard, 1991; Polit & Beck, 2006). The researcher must decide whether to do a manifest or latent analysis. With a manifest analysis, the researcher stays extremely close to the source text, using the participants' direct words. On the other hand, latent analysis is extended to an interpretative level in which the researcher strives to discover the text's underlying meaning: what the text is talking about (Berg, 2001; Catanzaro, 1988; Downe-Wambolt, 1992). This study followed a manifest analysis as I wanted to present a faithful rendition of the participants' realities and conceptualisations of parental alienation and how they assessed specifically for parental alienation within these particular contexts.

In analysing data, the four steps identified by Bengtsson (2016) were followed:

3.7.1 Decontextualisation

In this stage, I familiarised myself with the data and read the transcribed text to gain an overview of the content before dissecting it into smaller meaning units. A meaning unit is the smallest unit that provides some of the insights the researcher needs; in this context, usually a collection of phrases or paragraphs that answer the question set out in the aims of this study. Each identified meaning unit is assigned a code that must be deciphered in light of the context. Some of the codes in this study were related to the different assessments used to

assess for parental alienation as this was one of the aims, for example the MMPI-2/3, MCMI-IV, and PAI, and the way each participant will conceptualise parental alienation such as relational, manipulation, and more.

Depending on the research design, codes might be derived inductively or deductively. If the study uses deductive reasoning, the researcher must first develop a coding list before proceeding with the analysis. Otherwise, the list can be made while the procedure is ongoing. If the study uses inductive, generated codes may evolve as the research develops and additional data becomes accessible. In this study, the codes were generated inductively as I wanted to explore each participant's way of assessing for parental alienation in a particular context guided by their own realities of parental alienation and how the participant conceptualises parental alienation. Furthermore, I was interested in learning how each participant conducted the assessment procedure, i.e., what assessments they utilised and what they looked for whilst conducting each assessment, for example the MMPI, K-scale, the Marschak interaction methods, in observing discrepancies in how the child interacts with the alienated parent and the information elicited from the interviews. This inductive analysis was also compatible with the research design, which was explorative and contextual.

3.7.2. The recontextualisation

After the meaning units were identified, I checked whether all aspects of the content had been addressed in relation to the aim. In this study, the meaning units were related to the way parental alienation was conceptualised and how parental alienation was assessed.

3.7.3 The categorisation

Before categorisation occurred, extended meaning units were considered for those assessments, definitions, or views of parental alienation that were least frequently mentioned, and then those meaning units were condensed by reducing the number of words without losing any essential content from the unit (Graneheim & Lundman, 2004). For example, in this study, the MMPI-2 was mentioned by all participants while the Rorschach

was the least-mentioned assessment; however, I still included the Rorschach in a different category and in the analysis itself.

3.7.4 The compilation

Once the categories had been established, the analysis and writing up process was complete. Whilst performing content analysis, I considered the data collected from a neutral perspective and maintained objectivity by solely using the participants' words and viewing each transcript in isolation and without comparing it to other transcripts. As a final check, I considered how the new findings corresponded with the literature and whether or not the results were reasonable and logical (Burnard, 1991; Morse & Richards, 2002). To validate the outcome and strengthen the validity of this study, I performed a respondent validation as a member check (see 3.9.5). Member checking was conducted at the end of every interview. This was done to ensure further the trustworthiness of the data collected. The findings are presented in Chapter 4.

3.8. Trustworthiness of data

Credibility, conformability, transferability, and dependability were used to ensure that the findings of the study were trustworthy and useful.

3.8.1 Credibility

Credibility is the extent to which the results are derived from the data itself (Polit & Beck, 2017). In order to increase credibility in this study, the audio-recorded interviews were transcribed verbatim. This was also done to ensure that I could accurately trace the participant's responses. The participants also had the option to participate in this study freely without coercion, which increased the credibility of the responses. Member checking (see 3.9.5) was used to make sure the data agreed with the participants' frames of reference.

3.8.2.Transferability

Transferability indicates the degree to which the research findings can be generalised to other contexts, settings, and similar studies (Saunders et al., 2016). Transferability in this study was achieved through transcribed interviews and the provision of thick and rich descriptions in the analysis. The context was provided in detail to give the reader an exact picture of the setting to ascertain whether the study could be duplicated and yield similar results, thereby increasing transferability.

3.8.3 Dependability

Dependability is an indicator of the extent to which the data is reliable and objective (Polit & Beck, 2017). Dependability in this study was ensured through an audit trail to ensure that if the project is duplicated with the same procedures, it will yield similar results. The context of this study was highlighted in detail. This included the design, the criteria for participants, data gathering and methods of analysing the data to ensure the exact design can be used in a different setting.

3.8.4.Confirmability

Confirmability ensures that the results emerged from the data and not the researcher's subjective interpretations and views (Frost, 2015). To make this possible, an interview guide was employed consisting of open-ended questions to allow the participants to speak about their own experiences openly. This interview approach ensured that the data was objective and contained none of my own subjective views or interpretations. The audio recordings and verbatim responses (transcripts) assisted in this regard.

3.9. Ethical considerations

Strydom (2005) defines ethics as a group of moral principles held by an individual or group. Ethics are vital when conducting research, and researchers are obligated to abide by certain ethical guidelines for their research or studies at all times for the research to be deemed relevant and useful (Haradhan, 2017). Ethical guidelines also assist researchers in

evaluating their own conduct and should be adhered to throughout the study (Strydom, 2005). The following ethical considerations were followed in this study, ensuring no harm (beneficence), confidentiality and anonymity, and ensuring participants receive and give informed consent and the right to privacy, among others.

Ensuring no harm comes to participants

Saunders et al. (2016) maintain that it is important for researchers to ensure that they choose an appropriate research design when conducting research. No research design should cause harm to the participants, society, or institutions involved. This harm could encompass social, economic, physical or reputational damage. In light of the above, Haradhan (2017) observes that it is the researcher's primary responsibility to ensure the best interest of all participants. Harm includes not only physical harm but also psychological or emotional harm and reputational damage. In this study, each participant was treated with respect and there were no wrong or right answers. In order to protect the participants' emotional and psychological well-being, the following were employed:

- Participants were told only to share what they were comfortable sharing.
- Participants were ensured that their identifying details would not be disclosed.
- The participants and I mutually agreed upon a letter and number to identify their inputs.
- The participant was also entitled to see notes that were recorded during the interview so that they would not need to stress about what they had shared after the interview.
- Where case details were shared, identifying details were not needed or mentioned as the focus was on how the mental health professional defines parental alienation and procedures and techniques used to assess parental alienation.

Ensuring participants receive and give informed consent

Polit and Beck (2017) note that researchers must make sure that participants give informed consent before participating in a study. Informed consent entails providing the participants

with the full details of the research before their participation so that they can decide whether or not they want to participate. Thus, before undertaking a research study with participants, the researcher should explain the purpose, objectives and benefits of the research to the participants and spell out the participants' rights and roles in that research (Saunders et al., 2016). In this study, the participants gave informed consent (Addendum D) to participate in the study after receiving sufficient and transparent information on the nature and the purpose of the study(Addendum B). The participants were informed that their participation in the study was voluntary, that they could withdraw at any given stage, and that no one was being coerced into participating.

Right to privacy

All the participants' right to privacy was respected. The notes did not disclose the way in which any participant responded or behaved (Leedy & Ormrod, 2010). No hidden cameras or recording devices were used, and permission to record the interview sessions was sought and attained.

Confidentiality and anonymity

Confidentiality is an ethical and moral requirement in almost all research practices. Details provided by participants that are of a sensitive and personal matter should be protected by all means and should only be made available to the researcher and interviewer (Bless et al., 2006).

All the details provided by the participants were kept in a file for safekeeping. Participants were only identified by a letter and a number that the participant and I mutually agreed upon to ensure confidentiality. When patients were discussed, their identifying details were not mentioned, but only the relevant procedures and techniques used to assess Parental Alienation. Participants were assured that transcripts of notes and audio recordings would be

kept secure at all times. The information will be kept until the dissertation has been approved.

Member checking

According to Nieuwenhuis and Smit (2012), member checking is used to verify the credibility of the researcher's understanding of every member's contributions by showing every member (participant) their data from their participation. This process ensured that the data was captured and interpreted correctly and ensured the credibility and trustworthiness of the research. The researcher made his notes available to the participants immediately after the interviews to ensure that they were a true reflection of what was said in the interview.

3.10. Reflexivity

Olmos-Vega et al (2022), described reflexivity as a set of continuous, collaborative, and multifaceted practices through which researchers self-consciously critique, appraise, and evaluate how their subjectivity and context influence the research processes. The authors argued that there are several different goals held by researchers when they engage in reflexivity, including neutralising the influence of their subjectivity, acknowledging it, explaining it, or capitalising on it. These purposes point to different ways researchers might think about the relationships between their identity, context, and research. When it is positioned to neutralise the impact of researcher subjectivity, reflexivity refers to the researchers' attempts to take a *tabula rasa* approach—i.e. to adopt a blank slate, a perspective of objective distance from which to study a phenomenon afresh.

The researcher has been practicing as a Social Worker since 2012. As a practicing professional, I was first introduced to the concept of Parental Alienation in 2015, due to my curiosity on this concept, I started reading up on the concept and the impacts that it has on the child, the alienating parent and alienated parent.

During my court visits, I started noticing how parental alienation is sometimes missed by the treating professional and overlooked by the court system. During my theoretical and practical training at Unisa, I realised that I was very interested in Parental Alienation and with the help of my supervisor, I decided that it would be more valuable to delve into the way parental alienation is conceptualised and assessed by different professionals as it is a very complex concept.

Prior to undertaking my study I adopted a neutral stance and bracketed what I knew about the concept as I needed to understand this topic on a higher and deeper level. I further understood that a Social Worker and Clinical Psychologist will assess for Parental Alienation in a different way. My interest and curious stance allowed me to step back and allow each participant to give me their own personal and unique experiences about dealing with Parental Alienation. I would recall there were times were some of the participants would highlight things that were very similar to my frame of reference- how the concept is missed by the treating professionals and how the court systems overlook it and the focus seems to stem more on which attorney provided the strongest argument. As much as I had similar views to the participant, I didn't agree or disagree nor did I indulge in those views further, however, I wanted to know more about how they conceptualised parental alienation and based on that conceptualisation, how did they assess for it.

I must be honest and state that there were times were I became frustrated with one or two of the participants as I relied on them to give me more information on the assessment of parental alienation, however, I channelled that energy into reframing my questions and probing further by using some of the knowledge I gained from the literature review without being direct or leading for an example I would ask, according to my literature study, some personality styles are more dominant in Alienating Parents, have you perhaps noticed any dominant personality styles from your interactions with the Alienating Parent? As much as the personality styles were provided, I did not want to contaminate the interview process. I

only used the literature study when the participants could not comment further as I felt an ignite might assist them in answering the questions.

Throughout the interview process and data analysis I focused on my objectives. I listened to every interview twice to ensure that I have a verbatim transcript. I used every participants recommendations and suggestions . I understood that each participant will have a unique way of conceptualising and assessing parental alienation.

As a developing Clinical Psychologist, I have found great benefit from this research undertaking. This research has further ignited my passion for the psycho-legal field in particular with the assessment of parental alienation.

3.11. Conclusion

This chapter discussed the research methodology and design used in this study. The research approach and philosophy adopted in this study were discussed, followed by the sampling method, data collection instrument, data analysis strategy, ethical considerations and other research techniques used in this study. The next chapter presents the data analysis (done through content analysis) and interprets the findings from the data.

CHAPTER 4: FINDINGS AND DISCUSSION

A decent person does not alienate children from a parent, no matter how angry they are at the parent for the divorce. It's unfair to the children and it's unfair to the other human being. ` Dennis Prager

4.1. Introduction

The research findings and discussion are the cornerstone of this chapter. This chapter will provide answers to the research questions and objectives, i.e., How and according to which paradigms do mental health professionals conceptualise parental alienation, and, based on their conceptualisations, what procedures and practices do they employ to assess for parental alienation? This chapter further focuses on how mental health professionals distinguish parental alienation from gatekeeping and estrangement, as well as problems that arise during parental alienation assessments, what mental health professionals consider poor assessments, and what they consider best practices for assessing parental alienation. A total of five mental health professionals were interviewed on the topic under study. Content analysis was used to aid in the analysis of the generated data. The following sections explore the content (unit themes) that emerged from the data analysis and which have been integrated to support research findings.

4.2. Profile of participants

Participant 1 (Dr S) is a white male currently registered as a clinical and neuro-psychologist with the HPCSA. He has 21 years' experience in clinical psychology and the assessment of parental alienation.

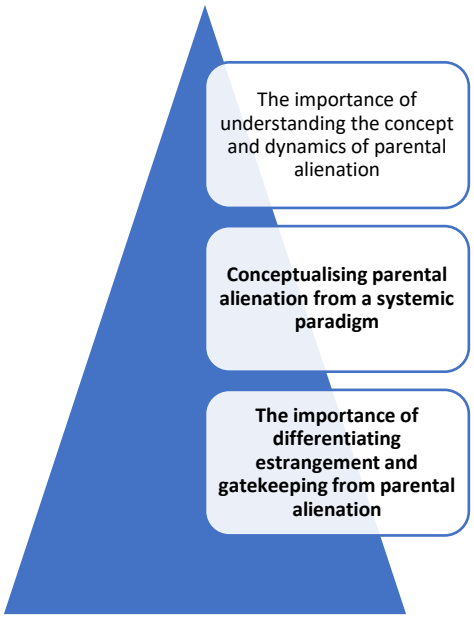
Participant 2 (Dr M) is a white female currently registered as a clinical psychologist with the HPCSA. She has 13 years' experience as a clinical psychologist and five to seven years' experience in the assessment of parental alienation.

Participant 3 (Dr R) is a white female currently registered as a clinical psychologist with the HPCSA. She has 35 years' experience as a clinical psychologist and 20 years' experience in the assessment of parental alienation.

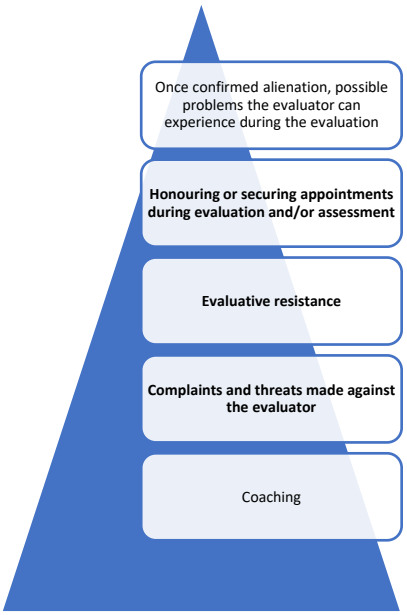
Participant 4 (Dr F) is a white female currently registered as a clinical psychologist with the HPCSA. She has 31 years' experience as a clinical psychologist and 21 years' experience in the assessment of parental alienation.

Participant 5 (Dr D F) is a white female currently registered as a clinical psychologist with the HPCSA. She has 16 years' experience as a clinical psychologist and five to six years' experience in the assessment of parental alienation.

Overview of themes presented in this chapter



Theme 1



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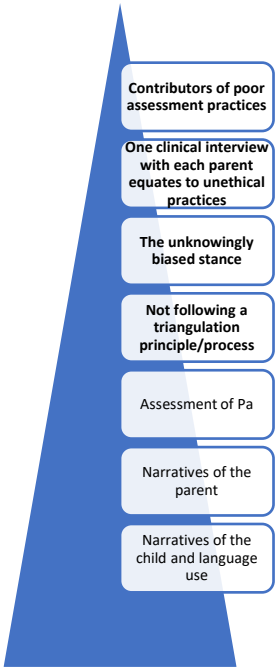
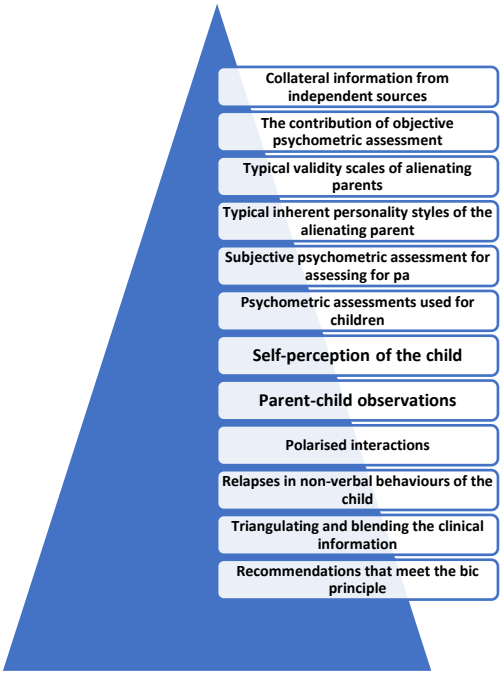


Theme 3



Theme 4

4.3. Best practices for assessing parental alienation according to expert participants in this study

The focus of this research study was on gaining input from experts in the forensic and clinical settings on best practices for assessing parental alienation. The questions were largely dedicated to how the participants in the study conceptualised parental alienation according to their respective frameworks and how these frameworks guided their assessment practices. The following themes highlight what emerged from the study and are integrated with the theory where available.

4.3.1.1. The importance of understanding the concept and dynamics of parental alienation

When parents are involved in a high-conflict separation or divorce, the child aligns strongly with one parent and resists or rejects contact or having a relationship with the other parent for no apparent reason. Parental alienation relates to the child's behaviours and attitudes concerning a parent. The alienating behaviour of the parent with whom the child is aligned alienates the child from the other parent and encourages the same behaviour in the child so that the child loses their affection for them (Bernet et al., 2022). The following paragraphs expand on the participants' descriptions of parental alienation.

Dr M described parental alienation as "… where one parent actively alienates a child from the other parent obviously mostly seen in custody cases and divorce …" Dr R stated that "… there's no justifiable reason as to why the children shouldn't be seeing the other parent…". Dr F explained that "… parental alienation is promoted, supported, and accommodated by the favoured (alienating) parent in a multitude of ways …". Dr R highlighted that "…in alienation, what you do find is that it's extreme. It's like, the one parent is all good, and the other parent is all bad …"

These above excerpt are confirmed by a study by Baker et al. in 2012. The study found that alienated children present with black-and-white thinking about their parents; the alienated child will idolise one parent, reject the other, and even go as far as erasing past memories of the rejected parent. Dr R further highlighted that "... if you find that in your assessment, you need to be big eyes for parental alienation, you need to be very alert …".

Bernet et al. (2022) further point out hybrid cases. A hybrid case is a family scenario in which a child is aligned with one parent but with any of the overlapping aspects: alienation, estrangement, and enmeshment. Dr F supported the above researchers in stating:

> "Hybrid cases is where there's a combination of enmeshment, estrangement and alienation in all sorts of forms, you get a combination of one or two or three of those … so it is important for you to assess for all and not view them in isolation..".

Parental alienation is a harmful family dynamic that affects both parents and the child. Despite the fact that several mental health and legal specialists have observed that the occurrence of parental alienation is frequent and detrimental to children, there appears still to be some debate and dispute in the industry concerning what constitutes parental alienation (Bernet et al., 2022). This statement was corroborated by Dr F: "…Parental alienation is a very, very complex topic. You understand, I could talk for two hours, okay…". Dr M added that "... parental alienation overlaps between estrangement and gatekeeping. You can't necessarily always isolate them...".

In terms of diagnosis, Dr F and Dr R broadly stated that "… you cannot diagnose parental alienation; however, you can identify it, as it is not a formal diagnosis …". This has been emphasised by Bernet et al. (2018), who state that while parental alienation is not a diagnosis as far as formal diagnoses go (syndromes), the "child affected by parental relationship distress", "parent-child relational problems", and "child psychological abuse" are all terms used in the DSM-5 to describe parental alienation.

It is important to note that although parental alienation is a complex and divisive phenomenon among scholars and practitioners, the widespread assumption of parental alienation – namely that it entails one parent unfairly persuading a child to reject the other parent unjustifiably – has received widespread acceptance amongst mental health professionals. Bernet et al. (2022)'s findings were corroborated by the participants' inputs in this study.

4.3.1.2. Conceptualising parental alienation from a systemic paradigm

All the participants in the study viewed parental alienation from a systemic paradigm. Dr F. described parental alienation as a "… systemic problem where one part of the system is denying something from the other part of the system … there is obviously a reason for denying the other part of the system and that is the context for me personally …". Dr R added to this by stating:

> "..What is it in this system that needs this (phenomenon) to play out? What is the functioning and why is this phenomenon being preserved in this system and furthermore, what has ignited it … This questions help me to understand and shape my evaluation … sometimes you will see the child is enmeshed with one parent and you wonder what gave context to this enmeshment, sometimes you will see a mother-friend-sibling relationship, compared to a mother-daughter relationship, so I always wonder why this set up you know what I mean, the curiosity never fades ... it is interesting to see the games, families can play and it's very important for the evaluator to stay neutral and not be drawn into the system…".

All the participants broadly defined parental alienation from a systemic perspective. Garber's (2011) theory on the adultifying parent and adultified child supports the systemic framework in understanding the context of parental alienation. According to Garber, the adultifying parent allies their child with them against the other parent based on the self-

centred belief that the child understands their ‘pain’ and then exploits the child's readiness and willingness to exploit their new ‘alliance’ together.

When one parent uses the child's support (understanding, acceptance, and affirmation) as emotional leverage in a troubled adult relationship, the adultified child is driven to parental alienation.

4.3.1.3. The importance of differentiating estrangement and gatekeeping from parental alienation

According to participants in the study, it is important to be able to differentiate between all three concepts in order to ensure that parental alienation is indeed at play.

The participants in this study broadly defined estrangement as follows:

Dr R explained, “… estrangement is when one parent does actually have some sort of compromises or issues in their parenting of the children, and it makes it difficult for the children ...”. Dr F stated moreover that:

> “… there is a basis for the child somehow not to feel comfortable having that contact. So it could be as a result of many things, it could be the result of just a pre-divorce conflict … attachment patterns … family violence … parent being unattuned to the child … their parent was never at home ... It could be a multitude of reasons.”

This corroborates the definitions of Bernet et al. (2020) and Kelly and Johnston (2001), who define estrangement as a child's rejection of a parent for a valid reason, such as a history of neglect or abuse with the parent. Bernet et al. (2020) stress that clinicians must distinguish between estrangement and alienation because the treatment of the child and family will depend on whether the child's rejection of the alienated parent is justified or unjustified. Examples of un/founded beliefs may be that rejected parent is unsafe to be with, unloving, or psychologically unavailable. It is therefore crucial that forensic and clinical evaluators are

able to identify estrangement and alienation and distinguish between them as this affects the parenting time recommendations for the child.

The participants in this study broadly described gatekeeping as follows:

Dr F explained that gatekeeping “is about a parent's overt need to ostensibly monitor and calibrate the kind of contact that the child has with the other parent..”. Dr R added by stating that “… they make the other parent have to jump through a lot of hoops, or they want to put a lot of protective measures in place, sometimes over-controlling, but they don't stop the contact completely …”.

Altenburger (2022) supported the above participants’ statements when expounding that, as part of the co-parenting relationship, parental gatekeeping refers to one parent's efforts to govern or manage the other parent's interactions with the child. Dr F added:

> “.. Gatekeeping has evolved to include protective gatekeeping, where there is an actual threat to the child … and then there is punitive (restrictive) gatekeeping, where it just arises from a need to be vindictive; it's a marital or post-divorce thing. It's got nothing to do with the best interests of the child ...”

Austin et al. (2013) confirmed that there are different types of gatekeeping. Protective gatekeeping occurs when a parent believes there are legitimate reasons and potential risks in the other parent's relationship or contact with the child. The parent will then limit contact between that parent and child.

Restrictive gatekeeping restricts or impedes the other parent’s relationship or contact with the child for no other reason than to harm the target parent. This type of gatekeeping usually occurs during or after high conflict divorces. The participants also expressed, as seen above, that the three concepts cannot be viewed in isolation as sometimes there is an overlap between them. Therefore, it is essential for the evaluator to distinguish the three concepts and assess for these where and when necessary.

4.3.1.3. Once confirmed alienation, possible problems the evaluator can experience during the evaluation

The participants in the study reported experiencing problems during the evaluation after confirming alienation because the system (family) creates a new sub-system (alienating parent and child) through coalitions and triangulations to serve a purpose. The new system will see the evaluator as a threat, as this system will not want to normalise and will do anything to maintain itself. The participants found the problems in the following sections to be the most prominent during their evaluations.

4.3.1.4. Honouring or securing appointments during evaluation and/or assessment

The participants in this study broadly mentioned that during assessment or evaluation, parents sometimes do not honour the assessment appointments.

Dr F stated that "… parents don't want to pitch up for appointments …", which Dr R supported by further elaborating that "… if you have a scenario of possible alienation happening, then there will be issues around trying to secure appointments with the children…".

This excerpt was supported further by researchers Ward et al. (2012), who explained that denial could also manifest as a more passive-aggressive resistance, such as a refusal to carry out the contractual provisions by evaluators or court orders, attend appointments with evaluators, or follow recommendations.

4.3.1.5. Evaluative resistance

Participants in this study encountered resistance elements during the evaluation process. Dr S mentioned that

> ".. they (parents) will try and manipulate the process in whatever way they can, so you are going to battle to get accurate information … as well as cooperation when a

person(parent) foresees that it is an objective process, and the process cannot be manipulated, and from that point of view one will get evaluative resistance..”

Dr R contributed to this unit theme by stating, “… and especially when you wanting to see the children with the other parent, then often you get all sorts of funny resistance…”.

The environment of custody evaluation work is likely to elicit resistance as a reaction to an evaluator’s participation in the family rather than a desire to change (Forrester et al., 2012). Dumbrill (2006) posits that evaluators should be mindful of their own involvement in aggravating or alleviating resistance, especially when approaching parents. Confrontational styles and the overuse of authority can lead to both parents and evaluators focusing on the power struggle rather than the issues at hand which will eventually lead to some form of resistance.

4.3.1.6. Complaints and threats made against the evaluator

Participants in this study were broadly exposed to direct and indirect threats. Dr M explained that

> “… sometimes, I find that the parent that's doing the alienating can be kind of abusive and they can become abusive towards you as well. Especially if they maybe feel as you've like, figured it out. Then obviously, they want the children for some reason, it’s that sort of secondary gain for them. So now you are threatening that secondary gain. I even had one parent report me to the HPCSA…”

Dr R elaborated by stating:

> “… if they start worrying that you may be now querying, you know, you're worried about them … then they might start levelling criticisms at the person doing the assessment. You get lots of like veiled threats, so they'll you know, (say) things like oh, so I had a dad once who sat down and said to me, I guess you need to know , I am a very wealthy attorney … I think I have some schizophrenic tendencies … And, if I feel wronged, I will

take revenge … Oh, the previous person that did the assessment did this and this wrong. So I reported him or her to HPCSA. That's a common one..."

Pickar (2007) asserts that conducting child custody assessments surely rates as one of the most challenging, risky, and stressful activities that a mental health professional may undertake among their multiple responsibilities in the clinical and forensic arenas. Among the multiple responsibilities, little, if anything, has been published on the personal and experiential aspects of carrying out the crucial but challenging role of custody assessments. This work has a potentially higher risk and an ethical risk than any other specialisation of clinical or forensic practice. The participants in the study stated that it was important for novice evaluators to know that some problems encountered are “normal” in custody evaluations and should alarm the evaluator that the resistance serves a purpose.

4.3.1.7. Coaching

One participant explained how coaching impacts the evaluation process.

Dr M stated that:

“... coaching is one of them ... the child being told what to say about one parent. I found ... those cases to be tricky. It can take a lot of time because you've got to gain a child's trust and get to know them and allow them to feel comfortable to really say what they want and not what they were told … “

Beaber (1982) refers to this as the data dilemma, in which the alienating parents will show themselves in a positive light during a custody evaluation while disclosing mostly negative information about their spouse(alienated parent), and this behaviour is also encouraged in the child. The child will then share the same negative sentiments about the alienated parent and the same positive content about the alienating parent. Some parents may highlight their own great qualities while elaborating and magnifying their spouse's flaws. Others could overstate their bond with their children.

Due to coaching and a fear of upsetting a parent, children may show a preference for one parent over the other. The evaluator must be mindful that the information given by the parents and the child(ren) may not be completely correct; hence evaluators need to ensure that they employ the best practices to assist them in their assessments of parental alienation. This is explored at length in section 4.3.4.

4.3.2. Contributors of poor assessment practices

In order to ensure the evaluator is conducting best practices in assessing for parental alienation, it is equally important for the evaluator to be aware of what constitutes poor assessment practices. The participants in the study provided the most prominent poor practices in the assessment of parental alienation.

4.3.2.1. One clinical interview with each parent equates to unethical practices

The participants in this study broadly stated that having one interview or interviewing only one parent is regarded as poor practice and is unethical. Dr R stated that " …if the evaluator only interview one parent or only assess one parent, I mean, that's not just poor, that's unethical and that's really not acceptable..". Dr M explained:

> "… I've had some people come to me with reports, from a psychologist that just interviewed one parent and refuse to see the other parent. You know, it is not comprehensive. It's not all-inclusive of everybody and the whole situation … You know, it needs to be like a collaborative, holistic assessment… "

Bernet (2002) is in support of the excerpts above. It is normally desirable to have access to all family members while performing a custody evaluation. That is, the evaluator should interview all the children as well as their parents and step-parents, where necessary. Other key persons may include the current love interest of either parent (particularly if marriage is intended), grandparents, babysitters, school employees, and psychotherapists who treated

the child to ensure a comprehensive and thorough assessment. However, when interviewing step-parents or love interests, the evaluator should be aware of possible bias.

4.3.2.2. The unknowingly biased stance

Dr D F stated that "… I think that a poor assessment would involve someone that hasn't held to the objective line, and been sort of swayed out of wanting to please everyone or someone …". Dr M. elaborated: "… I found that some psychologists work for certain sides. So it doesn't matter how they assess, if they work for that attorney, then they will find in favour of whatever their attorney is doing …".

Dr F considered how bias could also come forward in the evaluation through "...pre-emptive assumptions, if you have a pre-emptive assumption and you try to prove or disprove it, then your approach is already contaminated by bias, and you are not doing a thorough assessment…".

According to a study conducted by Bow and Quinnell (2004), when attorneys and judges were asked to assess child custody reports, their major issue was the lack of impartiality or bias among evaluators.

An evaluator with a history with a custody litigant or a member of their immediate family is one potential source of real or perceived bias. Bow and Quinnell (2004) argue that multiple relationships between evaluators and custody litigants must be avoided because, even if the evaluator believes they are not biased because of past interaction with one of the litigants, the other parent may consider them biased.

Another cause of bias, especially in the inexperienced evaluator, is being affected unknowingly by a desire to please the attorney who may be the best source of future recommendations. Regardless of who made the initial recommendation, the evaluator must always make sure to propose what is best for the children (Pickar, 2007).

4.3.3. Not following a triangulation principle/process

Dr S explained:

> "… if they (the evaluator) do not follow the triangulation principle, meaning, where an evaluation does not include clinical interviews, a battery of psychometric tests as well as collateral information, if one of those variables are left out, then it is a substandard evaluation that will not be able to accurately identify a parental alienator … "

Dr D F is in support of the triangulation principle and added to this theme by stating that "… you want to do psychometrics, you want to do interviews, you want to get collateral information, you want to have very good sources of information, so you can triangulate, and backup whatever findings you have …".

Denzin & Lincoln (1994) found in their study that for child custody evaluations, there is a requirement to identify the most important factors (for example, the child's developmental needs and the caregivers' capacity to satisfy those needs). Moreover, multiple data collecting techniques should be used to collect data, which should be triangulated. The triangulation process shields findings from mistakes induced by single informants or single data collecting methods.

4.3.4. Assessment of parental alienation

The participants of the study highlighted that once the evaluator understands parental alienation, they can differentiate between parental alienation, estrangement, and gatekeeping and are aware of what constitutes poor practices. Then they are ready to employ best practices to assess for parental alienation. The participants also expressed the lack of formalised assessments specifically related to the assessment of parental alienation in South Africa other than the Duchen Grid-an assessment that is grounded on the best interest of the child standard and assist the evaluator in interviewing the child with questions centred around parental relationship and parent-child relationship. The participants further expressed the need to train legal professionals on the effects of parental alienation on the

child as each field places different emphasis on parental alienation. This section highlights prominent themes that emerged from the expert participants during their assessment of parental alienation. Each theme is supported by literature where available.

4.3.4.1 Narratives of the parents

The participants in this study stated that during clinical interviews, it is important for the evaluator to pay attention to the narratives of each parent, their history, and the family context when assessing for parental alienation. Alienating parents generally promote themselves, while some alienated parents have the capacity to see their own faults and comment positively towards the alienating parent. Dr D F stated that in her clinical interviews, she pays attention to

> "… the narratives of each parent … how each parent narrates about the other… When you do your history taking, you will sometimes see a polarised view, the history and pre-birth was great; however, after the birth of the child, it is a complete downhill … you will find that the parent inflates themselves and deflates the other parent. I once asked a mum if her husband is how she described him, why did she have a second child, was it different with the first? She became defensive, she then spoke proudly about her husband and then when I moved to a different question, she contradicted everything. That, for me, was interesting …"

Dr F stated that she assesses for rigidity and flexibility in her interviews, for example:

> "… to the alleged favoured (alienating parent), what would need to change in order for the child to go to the other (alienated) parent? Was it always like this? What are your strengths and weaknesses as a parent, and what is the other parent's strengths and weaknesses? Questions to the alienated parent, What are your strengths and weaknesses and what are the other parents' strengths and weaknesses? Do you think you can improve on your weaknesses? How so? How would you describe your relationship with your child from pre-birth to current? Earliest memories of you and the

> child? Why do you think the other parent is controlling or reducing your contact? Here, I listen to the way the parents narrate their own story and that of the other parent …"

Dr R mentioned that:

> "… in my interviews, I ask, for an example, the alleged alienating parent, What type of contact do you think is appropriate? How would you describe your relationship with your child and how would you describe the other parents' relationship with the child? The alienating parent generally enflames their positivity whilst providing only negative information about the alienated parent ..."

According to Martindale et al. (2007) and Gould (2004), evaluators must be objective, non-judgmental, and knowledgeable about the case and documents when conducting the clinical interview. Interviews with each parent (and any individuals who provide care for the child and/or live in the same household as the child) should follow a similar pattern so that the evaluator may get a balanced picture of the parent-child dynamics. Semi-structured interviews allow the evaluator to follow certain principles and ask comparable questions to both parents while still allowing the evaluator the freedom to enquire about other topics that are unique to each parent. Semi-structured interviews have also been shown to be more reliable than unstructured interviews. By posing similar questions to both parents, the evaluator can gain a clinical picture of the parents and also note the way they narrate the information.

The interview questions should focus on evaluating a variety of variables that may be related to present parenting characteristics, family and childhood history, attachment continuity and quality, the child's special or educational needs, parents' current and past physical and mental health, parent's work schedules, their parenting styles, praise or discipline, parenting philosophy, the children's schedules, the parents' conflict resolution and communication skills, social support systems, ethics and values, cultural and ethnic issues, and religious affiliation among several others.

Furthermore, family violence or child abuse *must* be assessed extensively since families submitted for child custody assessments frequently have these unique difficulties that are all too often overlooked or reduced by presuming the case is just another "high-conflict" case. Many times these concerns, such as domestic violence and its effects on children, are not adequately investigated using formal interview questions, questionnaires, and other psychological assessment instruments (Gould, 2004).

4.3.4.2. Narratives of the child and language use-parroting

When conducting an interview with the children, it is important to take note of their language use and the way they describe their parent's relationship and their relationship with each parent. Dr F stated that

> "… I schedule my clinical interviews in such a way that I speak to both parents first. I never speak to the children first … I interview the children in a kind of free-flowing, you know, why are you here, etcetera. And we are trying to hear for parroting and coaching that comes through in the children's interviews. That is my first alert. Now, it's not definitive. So I cannot say to you, that's definitive, but it's definitely my first alert … I also ask indirect questions like so your grandmother loves your mum, right, but is she always nice to your mum? Do they ever fight with each other and when your mum doesn't see her mother, does she hate her? I will tell you why I ask the child indirect questions because it isn't intimidating and shows you if the child is capable of not splitting before you get personal, if they are able to answer appropriately and then split when you ask direct questions, then you should be alert, but remember it isn't a definite …".

Dr D F also expressed the importance of how the child communicates in the interview:

> "…I specifically look at how they (the child) speak – the language they use to speak about each parent and how they narrate the relationship between them, and also, I think it's about the reasons given; so if a child can't really come up with specific

> reasons why they don't want to go the other parent, well then, you know, that for me is interesting … I will ask them questions like how would you describe your parents' relationship with each other first and then how would you describe your relationship with your mum and then dad, I will listen for parroting responses and events from pre-birth, early infancy, as the child would not be able to have such memories or vivid memories for me that is also interesting…"

Most evaluators regard a good child-evaluator rapport as being associated with the formation of a supportive, non-judgmental, and child-centred conversational environment and as one of an evaluator's most valuable qualities when interviewing children (Wilson & Powell, 2001). The stronger the rapport between the child and the interviewer, the more information the child is likely to disclose, and the more their needs, wishes, knowledge, and desires will be revealed (Goodman et al., 1990; Siegal, 1991).

Evaluators that cross the boundaries of their role as independent assessors are a prevalent problem in custody evaluations (Kuehnle, 1998). Any interview with a child aimed at acquiring accurate and trustworthy information should be viewed as a test of hypotheses rather than a confirmation of what the interviewer already believes or knows (Melton et al., 1997). Asking non-focused open-ended inquiries about an enjoyable activity or event that the child has experienced is frequently more successful in encouraging children to communicate during the rapport-building period (Orbach et al., 2000). When children have a clear knowledge of their role and the aim of the interview, they are more likely to offer trustworthy, relevant, and verifiable information (Siegal, 1991).

These difficulties must be described in as much detail as possible in a way that is appropriate for the child's developmental stage. Sattler (1998) suggests that one good technique is to ask children what they know about the reason for the interview. This informs the evaluator of what the child has been told the parents and allows the evaluator to correct any misconceptions. One participant stated that one of her questions to the child is:

> "…Is there anything that your mother or father would like me to know , or perhaps they told you a secret and you can share the secret with me?... however, this is only done, when I have established a working relationship with the child …and mind you, the information you get is really mind-blowing…"

Following the above, the interviewer should offer a clear summary of the interview's objective and each participant's participation in it in an age-appropriate manner.

There is no doubt that children's wishes are relevant and crucial in custody decisions and that they have the right to participate actively in such choices (Crosby-Currie, 1996). On the other hand, professionals have an ethical commitment to ensure that this happens in a way that respects children's developmental capacities (Kuehnle, 1998).

Comprehending distinct developmental stages and attachment processes is important not just for how the interview is performed but also for understanding the children's answers. Custody decisions are complicated and must be based on several variables, including parental capability and availability, the child's present and future physical and psychological needs, environmental conditions, and the quality of the relationship with potential custodians (Sattler, 1998).

4.3.4.3. Collateral information from independent sources to confirm, disconfirm, or formulate hypotheses

The participants in this study stated that once clinical interviews have been conducted, it is important for the evaluator to obtain collateral sources to enhance the evaluation. This could include court documents and reports from schools and therapists; however, the most favoured collateral sources are independent sources to prevent bias from contaminating the evaluation. Dr R stated that "… you have to get good collateral information …", which Dr S supported by expressing "… collateral information … consists of third party interviews as

well as perusal of documentation, [and] is important in custody evaluations and the more, the better...". Dr M stated in addition that she:

> "... prefer(s) collecting collateral face-to-face as you get to see their non-verbals… I use schools and other independent sources such as other therapist that the children are possibly attending you know … anything that could assist the case but from independent people because usually family members and friends can be biased hey. This enhances my clinical picture of the family and clarifies information for me ..."

Dr F added that she

> "… phone(s) the house doctors always, always. Why? Because there's often claims of physical abuse or sexual abuse or whatever abuse … using independent sources such as teachers, therapists and helpers can be helpful as they are out of the system; they will be able to provide you with objective information … I prefer face-to-face collection, or if its difficult, social media with cameras on. The reason why is because I am able to see if there is fear or possible contamination, you will never know. Once I had an OT report that excluded the dad from an interview but reported that the dad was abusive to the mum. I only found out the dad was not interviewed by his attorney … from then on I decided to do face-to-face so I can also get more context around the case and see for contaminations …"

Something that stood out under collateral information was Dr F's comment on how careful the evaluator should be when selecting collateral sources, as parents may provide sources that put them in a positive light. Dr F continued: "… I certainly don't do who they would like me to speak to ...If it's a must and I mean a must, I ask questions about their interaction with the child and not to comment on others.." and she, like many of the other participants, preferred to use independent sources of information for its improved objectivity.

Chung et al. (2020) assert that in order to confirm the conclusions from their clinical interviews and the information they collected from the litigating parties, evaluators frequently

depend on collateral information. The evaluator must understand that the parties' reports and sources may be inaccurate or biased and must thus strive to corroborate or refute these reports, claims, or charges using information from other sources. Therefore, the evaluator should be aware of the data collection requirements of various sources, including independent sources such as other helping professionals, to properly investigate alternate hypotheses for issues relevant to the evaluation. It is also important to note that in circumstances where uncorroborated material was used to develop an evaluation's conclusion, the evaluator must report this fact (Martindale et al., 2007).

4.3.4.4. The contribution of objective psychometric use in the assessment of parental alienation

All participants in the study used common psychometric assessments to assess the parents. This section presents the most common themes that emerged from the participants. All participants in the study used the MMPI-3, MCMI-IV, and PAI. Literature has been used to support the findings if available.

4.3.4.4.1. Typical validity scales of alienating parents (positive impressions)

Dr D F stated that when she uses the MMPI-3, she looks at the "…K, L, and F scales to assess if the parent is presenting themselves in a positive light, minimising symptoms and exaggerating positivity..", while Dr S mentioned that for the MMPI-3, he

> "… would suggest the K and L scales on the MMPI as this would give you an indication whether a person was trying to deliberately lie or be deceitful, but I will also emphasise the F scales and the FBS scales to be also looked at very closely in the MMPI because there you can get an indication of whether a person is actively trying to fake good or fake bad … "

Dr S. continued by explaining that with the MCMI-IV, he pays close attention to the "..disclosure scales also (which) gives an indication if a person is trying to present themselves in a more favourable light..".

Ben-Porath et al. (2022) stand in agreement with Dr D F and Dr S when stating that in child custody evaluations, under-reporting, which entails denial or reduction of psychological dysfunction, is a significantly more likely cause for concern. In family court evaluations, the MMPI-3 under-reporting validity scales can be used to test for this potential.

4.3.4.4.2. Typical inherent personality styles of the alienating parent (paranoid, dependent, obsessive-compulsive and narcissistic)

Dr F stated when using the MMPI-3, she looks for

> "… inherent personality styles that would facilitate an enhancement of the potential to indulge in parental alienation example, if somebody assesses as quite Paranoid … if they're assessed as having a severe tendency to be paranoid or suspicious, mistrustful that is going to play into a tendency on the part of the parents … you can also look at narcissistic traits, the self-importance scales, you know … they see themselves as the most important parent and knows best and the other parent isn't good for that child … The family problem scales and impulsivity can also aid your assessment, do they act without giving much thought… "

Dr R echoed Dr F's views on the MMPI-3:

> "…The importance of looking at personality traits that can exacerbate or ignite the alienating behaviours … such as the persecution scale, the compulsive scales, and the self-importance scales. These scales will tell you how the parent views the relationship and world, are they suspicious, do they feel that no one is better than them or is it just an ingrained habit – it has to be done in a particular way or its wrong … the externalising scales can also be helpful, for example, the family problems scales and the scale that is also linked to paranoid thinking …"

In a separate study by Roma et al. (2020), the authors found a profile for alienating mothers using the MMPI-2 and found that alienating mothers were inclined to be unduly sensitive to others' judgments and judgments were often suspicious and guarded. These parents had a tendency to justify and blame others for their problems and were moralistic and inflexible in their own ideas and attitudes (according to 6-Pa and 6-Pa3 Scales). Furthermore, these mothers presented themselves as socially and psychologically adapted and trusting while attempting to deny hostile and negative impulses; they declare high moral standards and express extremely naive and optimistic attitudes toward others who are perceived as honest and unselfish (according to L, K, 6-Pa3 Scales).

Dr R stated that when she uses the MCMI-IV, she looks at the

> "… personality scales in particular … narcissistic, dependent and turbulent scales as these scales can possibly assist your assessment, you get a variety of profiles of Alienating Parents, some are simple and some are extremely hard to profile … I once had a mum that said to me because my husband left me and I needed him, I told him that I will make his life a misery, so I did exactly what I warned him of. Can you believe that? I also had a dad who was full of life, he presented himself perfectly, even when he defended himself; it seemed so genuine, but once I started looking at collateral sources, I was stunned … it seemed like everything I saw was a defence or walls to the truth. He presented as a perfect parent, always fighting for the right things in life and wants the best all the time and will do anything to achieve the best. But, boy, oh boy … "

Dr F further stated she

> "… found the MCMI IV very useful, especially when looking at the inherent personality styles. The other tests are more secondary for me, here you can look at the dependent scales, the histrionic scales, the narcissistic scales, the compulsive scales and not forgetting the new scale … it's the turbulent scale … These scales assist the evaluator

> in understanding the reasoning behind the parent's behaviour or thoughts and whether they have the capacity to develop insight…"

In a study conducted by Eastin et al. (2022), the authors supported the above participants by hypothesising that in the MCMI-IV, the histrionic (4A), turbulent (4B), narcissistic (5), and compulsive (7) scales would have subclinical elevations (i.e., BR score of 60-74) and a clinical elevation (i.e., BR score of 75), and on the desirability (Y) scale, there would be clinical elevations (i.e., BR score of 75). The BR scores on the histrionic, turbulent, and narcissistic scales were projected to be in the top three.

Dr F stated that when she use the PAI, she considers:

> " … the positive and negative impressions to assist with the validity of the assessment okay and the defensive scales also assist if you need to interpret with caution. Obviously, those are important; however, I think that the clinical scales such as the anxiety, borderline, paranoia, mania, and antisocial can assist you … I once had a mother that presented with some borderline traits and it was important for me to identify this personality style as this made me understand the context of her alienating behaviours you understand why I say inherent personality styles and context is very important to understand the alienating behaviours … most alienating parents tend to present with personality styles from my experience…"

Dr R explained that when she uses the PAI, she takes into account

> "… the clinical scales, the clinical scales are so important, the paranoia, the dependency, the anxiety scales, the dominance scale and the support scale… the support scale also helps you to understand the degree of alienation … you get alienating parents with no support and they feel they need to be punitive to the other parent because they left them isolated, its different in every case, it becomes a game, you know family games…"

Stahl stated in his 2011 book on custody evaluations that, while the PAI was being used more frequently, there were no defined standards for child custody litigants. Since then, Hynan (2013) has provided the first set of data. Hynan (2013) did find some gender differences with medium effect sizes, with the exception of one scale (mania, or MAN), which was elevated more for men than women, and they were consistent with prevalence differences between the genders for anxiety disorders (women) and antisocial features (men). According to Hynan's 2013 findings, custody litigants as a group scored better on personal impression management (PIM) and a scale indicating interpersonal warmth and empathy (WRM) but scored lower on clinical scales than the normative population sample due to the need to present themselves in a particular way to the evaluator.

4.3.4.4.3. Subjective psychometric assessment for assessing for parental alienation in the parent

One participant mentioned the Rorschach. Dr S stated that he

> "… use the Rorschach for qualitative information, I can only provide you with the way I interpret the Rorschach. So I look at the test as a whole … so what sands out for me would be … the oral dependency to see if there are any dependency needs coming from the alienating parent … their aggression that refers to the amount of power they want and their prompts – if high it could be defensiveness or rigidity…"

Sanderson (1995) discovered that custody litigants had minimal aggressive (AG) and cooperative (COP) movement reactions, suggesting that they did not anticipate favourable results in interpersonal interactions. They may even shun interpersonal relationships that are straining and emotional. Sanderson proposed that litigants adopt a protective avoidance of painful effects (numbed) by ignoring the emotional complexity of interpersonal relationships. Sanderson further stated that the custody litigant's overall Rorschach presentation reveals a pattern of answers that appears to be indicative of an avoidant style. His participants had a

negative perception of interpersonal interactions and a proclivity to observe and interact with the environment in an unorthodox manner.

4.3.4.5. Psychometric assessments used for children

All participants used projective assessments when assessing children. These assessments ranged from the Draw-a-Person (DAP), Kinetic Family Drawing (KFD), Bene Anthony Family Relations, Children's Apperception Test (CAT), Thematic Apperception Test (TAT), the Voice-of-the-Child Kit, and the Roberts Apperception Test (RAT). The reasons for using such assessments ranged from understanding the child's view of him- or herself and the way they view the family and each member of the family.

4.3.4.5.1. Self-perception of the child

Dr F stated that she

> "… use(s) the DAP to assess how the child views himself/herself, like for an example their self-esteem, their confidence, anxieties etc. I look at the size of the drawing, position of the drawing, where their arms are positioned etc. If the child views themselves in a negative way, it is easier for them to be influenced and adopt the favoured parent's viewpoints without questioning no matter their age you know what I mean..I also use the KFD and Bene Anthony, I find those most useful as I get to see how the child views each family member and what the family members are doing in their drawing you know … is this a rigid family or not … With the Bene Anthony I look for splitting … you know one parent is all good and the other parent is all bad… "

Dr R echoed Dr F by stating that she also uses the abovementioned assessments; however, she added the

> "… Roberts Apperception Test for adaptability, emotional adjustment and social understanding, is the child doing this out of their own free will? Are they rigid in their thinking pattern? Will the child be able to see that it is okay to love and hate a parent

> and it doesn't have to be all love and all hate, do they view things ambiguously etc. I also like the TAT as well, card 2 is very useful as I get to see how the child describes the parent-child relationship and I also use it on the adults as I can listen to common words used by the parent and child…"

A psychometric assessment of the child can help determine their cognitive aptitude, developmental stage, and psychological vulnerability (Roseby, 1995). Roseby supports the participants above by stating that children who lack a strong sense of self are more susceptible to enmeshment and the impulse to adopt someone else's viewpoint and sentiments. Distortions are exacerbated by poor reality checking and irrational cognitive functions. Information processing that is simplistic and restrictive may enhance susceptibility even further. The evaluator can measure the child's sense of self, capacity for reciprocity in relationships, ability to discriminate and integrate and control their emotions, and their coping styles through projective testing.

In a study conducted by Lampel (1996), both alienated and non-alienated children in divorce cases were hindered in their capacity to solve problems, cope with their feelings, or seek or give assistance, according to the Roberts Apperception Test results. Moreover, children who have been alienated tend to be angrier than children who have not been alienated. Furthermore, they score lower on anxiety assessments. The ability to distinguish between alienated and non-alienated children may be determined by assessing the degree of anger and how high-conflict divorce children handle anger. Instruments like the Roberts apperception test for children can help in assessing anger issues.

Alienated children are less safeguarded from inappropriate information and are more affected by the sentiments of the favoured parent. Measures addressing boundary problems, such as parent-child role reversal and enmeshment, are included in the Kinetic Family Drawing (KFD) and Bene Anthony Family Relations Test. In terms of the idealisation of the favoured parent, the Roberts apperception test for children and the Bene Anthony Family

Relations Test might provide more information. The Family Relations Test may also be used to figure out how the child feels about the non-preferred parent (alienated) and how much ambivalence there is regarding the non-preferred parent(alienated).

4.3.4.5.2 Parent-child observations

All the participants in the study stated that it is important for the evaluator to do a parent-child observation with each parent and the child. Most participants preferred the Marschak interaction method; however, one participant adapted some of the activities as she observed that parents seem to be prepared for the sessions as attorneys are assisting them with the preparations from previous reports and the internet. Two participants also expressed the importance of home visits when conducting parental alienation assessments.

4.3.4.5.2.1. Polarised interactions – the alienating parent (picture perfect) and the alienated parent (ambivalence)

Dr F stated that when she uses the MIM, she looks at

> "… how the child interacts with the parent, for an example, the alienating parent and child interaction- you will see that the activities are overdone and there is overcompensation in the activities, it looks like a perfect picture and with the alienated parent and child – you will see the parent trying too hard and sometimes the parent might get frustrated with the child and do you know why, because this parent knew at one stage he had a relationship with the child and could do these things, but now there is someone watching him interact and the child is acting up …"

Dr R explained:

> "… There are four themes that I look at … cooperation, competition, nurturing and teaching. I also look at how the parent set limits – is it age appropriate? Do they pick up on the children's cues? Yeah, and also when you're doing the nurturing activity with the alienated parent, do you see a difference in the child's behaviour from start to finish? Like, for example, the child starts off with No, don't touch me, and then

eventually gives in with ease once the dad rubs lotion on his hand, and when the child is rubbing lotion on dad's hand is the child comfortable with it, is the child thoroughly involved In the activity and once its over, back to the don't touch me … I also tweaked my assessments as attorneys have the activities from the internet, and some are preparing their clients, can you believe that? Hence I added like a teaching and competition part to it and I change the activities with every case but stick to the theme …for example I would see how the parents react with the children in the competition and how the child responds to the teaching, etcetera …

The APA (1994) recommendations for custody evaluators and the Association of Family and Conciliation Courts (1994) standards of practice support the above participant's statements. Custody evaluations should include observations of parents interacting with their children. When the goals for observations of parent-child interactions are clear, they are more likely to be fruitful and offer valuable information to a custody evaluation. Several authors cited the MIM as an appropriate and extremely helpful tool in forensic bonding and child custody evaluations (Dyer, 1999; Jernberg, 1991; Lindaman et al., 2000; Safarjan, 1992) despite the fact that it was not developed for use in forensic evaluations and had not been validated for such purposes.

Many factors identified as important for custody evaluations are addressed in the MIM, including the child's willingness to accept physical affection from the parent, the child's affective tone with various caregivers, comfort and guidance-seeking behaviour, and the caregiver's ability to respond appropriately to the child's needs (Dyer, 1999).

4.3.4.5.2.2. Relapses in non-verbal behaviours of the child in an uncontaminated context

Dr F stated that she does home visits when conducting custody evaluations:

"… So I do home visits, even if the children are not willing to visit the non-favoured parent(alienated), I make it a condition on which I will take the matter that they

will go with me to the non-favoured parent, even if it's kicking and screaming, and I have done it kicking and screaming. So I don't play into, or allow the system's patterning to determine how I investigate … This is how I get to know how the child is when they are in the non-favoured parent's(alienated) company, how they react and feel. Sometimes you will be shocked to see how comfortable they are once the interactions progress, at the beginning, the child appears hesitant and fearful, however as time goes by, the child starts normalising by interacting and yet in the office, its like fearful and hesitant all the time with the unfavoured parent(alienated) and, with the favoured parent(alienating), there is usually over compensation you know, I love my mum, she is my favourite and then there's hugs and kisses and you will see the same reactions coming from the favoured parent(alienating) … "

Dr R also conducts home visits, and expressed:

"… Conducting home visits allow you to see the child in their natural environments, you know, uncontaminated and out of script … so what I pay attention to is how the child interacts with the alleged alienated parent and note the differences in office and whilst at home. I also assess how the child interacts with the alienating parent, is there overcompensation, are there photos of the alienated parent in the alienating parents house, are there albums or any evidence of the alienated parent in their home. You can also see how the non-verbal behaviour in the children … example, in the alienated parent's home, sometimes you will see the child move from stiff to a relaxed position, you will see the eyes wander and look at things with familiarity; however, the verbals are 'no, no, no' and with the alienating there is this glorified and exaggerated behaviour even from the child …"

Schutz et al. (1989) corroborate the above participants and advocate for home visits to be conducted during custody evaluations as it provides the evaluator with a first-hand look at the home setting and possibly a comfortable chance to observe natural and usual interaction patterns. As Stahl (l994) points out, home visits are often logistically difficult and costly. As a

result, it is appropriate to ascertain whether a home visit would bring new information to the overall custody review that cannot be achieved through less expensive office visits.

4.3.4.5.3. Triangulating and blending the clinical information to obtain a nuanced and case-sensitive report

According to the participants in the study, the evaluator should integrate information from clinical interviews, collateral data, and psychometric assessments to produce a rich and comprehensive report with recommendations. Some participants also expressed the importance of supervision to further enhance the report's authenticity. According to Dr F:

> "… The triangulation method ensures comprehensiveness in reporting; a Venn diagram can also assist the evaluator in looking for commonality in clinical interviews, collateral interviews, observations and psychometric assessments. The information that overlaps should be used in the reporting with relevant literature to support or critique the information…"

Dr R added by stating:

> " … using a grounded theory approach can be helpful in integrating interviews, collateral information, and test results. This ensures that the information reported is nuanced and case-sensitive. I will also recommend evaluators to have senior supervisors in the psycho-legal field. The reason for this is also to ensure objectivity; sometimes, the supervisor can question why this recommendation, yet the report is saying this. The supervisor is uncontaminated as he or she is not involved in the case ..."

In light of the above, Dale et al. (2021) emphasise that competent child custody evaluators must operationalise the integration and reporting of the data. This entails gathering data and information on topics pertinent to the evaluation in various ways – from clinical interviews to parent-child observations. The evaluator triangulates the data for accuracy using multi-data

principles of data analysis. This ensures the authenticity of the report. The participants in this study appeared to apply these principles in their assessments as competent evaluators.

4.3.4.6 Recommendations that meet the best-interest-of-the-child principle and the need for formalised assessment tools and training of legal experts

All the participants in the study agreed that in confirmed alienation cases, the child should attend therapy and involve a parenting coordinator to ensure the child's best interests. The participants further expressed the need for assessments aimed specifically at assessing parental alienation and the importance of training legal experts on the effects of parental alienation on the child. Dr M stated that

> "… I always recommend the child to go for therapy and having a parenting coordinator being involved in the case as this protects the child. Most of the times, evaluators are unaware of the outcome of the case, so by making such recommendations, the evaluator ensures that the system will be supervised and reconstruction will eventually take place, you know what I mean. It's a protective measure for the child … If I may add, I think we also need more formalised assessment tools for the assessment of parental alienation, I only use the Duchen Grid, which focuses on the way the child views the parental system and the parent-child system, the questions form part of the clinical interview however, I do not include it on my report for recommendations as it is a subjective assessment and it is not normed, and the court doesn't accept information from there…. Also what really puzzles me is the way the attorneys argue for the alienating parents defence, they don't realise the impacts of parental alienation on the child but just view it as an argument that needs to win in their favour and the judges just go on who provided the best argument…"

Dr F added that she

> “always, always recommend(s) that the child attends/stays in therapy and a parenting coordinator is involved. The bridging programme can be instrumental in reconstructing and correcting the family dynamics provided it is confirmed alienation and it is severe, hey, if it is not confirmed and the evaluator recommends the bridging programme, it can work against the best interest of the child. I would also recommend that the child spends time with the alienated parent to rehabilitate the parent-child relationship by increasing the contact time ... I usually use the Duchen Grid to assess what's in the best interest of the child and the voice of the child as that is the closest tools available in the assessment of alienation for children.. The Duchen Grid was created by a South African Psychologist, the Duchen Grid is grounded on the best interest of the child standard and assist the evaluator in show casing how the child views the Parent-Child Relationship and the Parent-Parent relationship with specific questions centred around Parental Alienation, example, Does your parent speak badly to you about your other parent? Does your parent share information about past events to you-even when you were not born etc This information then aids your assessment by making informed recommendations to the court, however, I must say that it is not normed but it is extremely helpful. I personally use this to strengthen my interview with the children. The sad reality is that once our reports are submitted and we are not called as expert witnesses, sometimes we are not aware of what the outcome of our reports were … also no matter how good the report is, it is the judge's decision at the end hence I believe that the psycho-legal field should attend training on parental alienation together so there is more common ground between us”

According to Lee and Olesen (2001), recommendations should be based on the data analysis. The existence of alienating behaviour on the side of the aligned parent, or the desire to reunify the child with the rejected parent, is generally included at the end of reports. A simple intervention may be proposed, such as removing custody from an alienating parent or nonspecific reunion therapy between the rejected parent and the alienated child. Both

structural and therapeutic interventions must be specified in recommendations. The suggestions should be clear enough that it is easily translatable into a court order and can be implemented by the specialists concerned with little space for ambiguity and monitored by the court.

Sullivan and Kelly (2001) recommend that the following should be included in most recommendations for confirmed alienation cases.

(a) A suggested visitation schedule that includes a tiered access plan between the child and the rejected parent may be developed. The child should get more time with the alienated parent so as to allow the child to remedy the parent-child relationship;

(b) A planned strategy for both parents to gather and share information;

(c) Recommended guidelines for managing, minimising, and avoiding conflict between the parents;

(d) A proposed method for monitoring the family's compliance with orders and how breaches will be dealt with; and

(e) A planned timetable for evaluation updates.

The abovementioned recommendations will assist the child in remedying the strained relationship with the alienated parent and correcting the alienating parent's behaviour through court orders. This, in turn, allows the child to be with both parents

4.3.4.7. A summary of the research findings.

The expert participants suggested that the evaluator must fully understand the concept of parental alienation, this would include understanding parental alienation from a certain paradigm. The participants stressed the importance of evaluators being able to distinguish parental alienation from gate-keeping and estrangement and also be aware that in certain cases (Hybrid cases) you will see either parental alienation and gate-keeping or a mixture of parental alienation, gate-keeping and estrangement.

The participants also noted that evaluators experience probems during evaluation, however, not much emphasis is placed on this and it would be important for novice evaluators to become aware of it as it is regarded as normal and should not be dettered from it. The evaluators found that clients fail to honour appointments once they feel that the evaluator has realised the alienation and sometimes the evaluator may even fail to secure an appointment with the family and this can be seen as denial into the system. The evaluators also noted evaluative resistance during the evaluation, clients would try and manipulate the evaluation and try to fake good in assessments. The evaluators found that they are often threatened to be reported to the HPCSA by the clients and some are threatened indirectly. Evaluators may even find that the children are couched by their parents during children intereviews and this is done in a very tactful way.

The participants found that sometimes evaluators only interview the parents once, or just one party and that is usally the referred party, the participants considered that to be unethical and poor practice. The participants stressed the importance of a number of interviews with the parents, parent-child and independent sources.The participants further noted that sometimes evaluators don't triangulate their data, they would not mention anything about independent sources and the participants suggested that triangulating all data is considered important for a more credible and authentic report.

The participants suggested that during the interviews with the parents- the evaluators should pay attention to the narratives of each parent- the way they describe each other, the way their describe their own strengths and weaknesses and the way they describe the other parents strengths and weaknesses etc. During interviews with the child, it is also important to pay attention to the childs narratives- the language that they use to describe the parents, whether they use borrowed scenarios from the alienating parent as reasons for not liking the alienated parent etc, the participants hence stated that it is important to interview the parents first and then the child.

The participants suggested that it is best to use independent sources for collateral information to prevent contaminated information. Independent sources such as the schools, childrens' doctors and therapist were considered important, however, the participants also stated that if family members are interviewed, the interview should focus on their relationship with the child and should not be asked to comment on the parent and child relationship as bias can stem from these interviews. The participants stated by focusing on their relationship with the child, this can also show the evaluator if the family members are part of the alienation process etc.

Psychometric assessment was considered important by all participants. All participants used the MMPI-3, MCMI-IV and PAI in the parent assessment and the Draw A Person, Kinetic Family Drawing, Bene Anthony Family Relations Test and the Childrens Apperception Test in the child assessment. They found that alienating parents ofen presented with typical personality styles ranging from paranoid, dependent and narcissistic. They found that children that were not differentiated, presented with a poor sense of self and anxious were easily alienated. The participants also suggested that evaluators should observe the parent child relationship(alienating parent-child and alienated parent-child) for first hand experience and they should pay attention whilst the parent and child is in the waiting room and therapy room. Two senior participants recommended home visits as this shows the child in their natural environment. The participants stated that by going to both parents homes, you get a clearer picture, you will see how the child reacts in both homes and this provides more authenticity to the report.

The participants also expressed concern over the lack of formalised assessment tools to assess for parental alienation. The only tool that was created in South Africa was the Duchen Grid and this assessment is subjective and is not recognised by the court system. The participants suggested that the evaluator should also make recommendations to

strength the alienated parent-child relationship, to have a parenting coordinator involved and to send the parents for parental effectiveness training.

4.3.4.8. Conclusion

This chapter has answered the research questions and objectives of the research study. As indicated, the evaluator must follow a certain process to ensure that they uphold best practices. It is important to note that there is no clear black-and-white way to assess for parental alienation; each professional will use a different assessment method informed by the case and their views of parental alienation. The participants and literature findings indicate that a triangulation process is key to best practice that includes clinical assessments, collateral information, and psychometric assessments. The next chapter (5) addresses the recommendations, strengths and limitations of the topic of this study.

CHAPTER 5: CONCLUSION

On top of the abuse and neglect, denial heaps more hurt upon the child, by requiring the child to alienate herself from reality and her own experience. In troubled families, abuse and neglect are permitted, it's the talking about them that is forbidden!. ~ Marcia Sirota

5.1. Introduction

This chapter provides a discussion of the recommendations for best practices for assessing parental alienation according to experts in the psycho-legal field, recommendations for future research, the strengths of this research study and its limitations.

5.2. Recommendations for best practices for assessing parental alienation

According to McIntosh and Deacon-Wood (2003), many post-divorce conflicts are accompanied by the challenging process of deconstructing the belief systems associated with marriage and coming to terms with what has transpired. Conflict that arises in divorces is typically brief and frequently logical and adaptive. Ongoing conflict in divorces, in contrast, is often characterised by uncertain boundaries, re-attachment difficulties, personality disorders with prominent egocentrism and narcissism, and an inability to compromise, communicate, and apply appropriate coping strategies.

Ahrons (1994) and Kelly (2005) distinguish between low conflict and high conflict parents. Parents in low-conflict households are able to work out their differences on finances, property, child custody, and contact. These parents get along well and treat one another respectfully in front of the children, and do not typically involve the court. These parents are able to incorporate the child into their life after the divorce autonomously and without custodial issues. High-conflict parents, on the other hand, frequently view court rulings as recommendations or suggestions and thus do not abide by them (Stahl, 2011). These parents frequently talk negatively and disparagingly to their children about one another and will often use the child as leverage to inflict emotional harm on the other parent.

Based on the above and the theoretical and empirical findings (see Chapters 1 and 2), this persistent parental conflict is the primary cause of child-parent alienation, where children are often used as pawns during the duration of the conflict between the parents. The embroiled child is left with one option – to lessen the experience of being torn apart, the child rejects the 'bad' parent and ends communication.

Parental alienation often goes unnoticed due to how mental health and legal professionals view this phenomenon. Each professional conceptualises and places different emphasis on this phenomenon; hence, two of the research objectives were realised to clarify this phenomenon and how mental health professionals can identify (assess) this phenomenon. However, to assess for parental alienation through employing best practices, the evaluator should also be aware of what constitutes poor practices; hence, another objective of the study has been realised. Furthermore, problems that may arise in high-conflict cases, such as parental alienation, can be anticipated so that objectivity-based problems that may arise in the assessment of parental alienation may be identified. The next section explores best practices for assessing parental alienation according to the perspectives of the expert mental health participants of this study.

5.2.1. Evaluators' worldview and conceptualisation of parental alienation

According to the expert participants in this study, to assess for parental alienation, it is crucial that mental health professionals understand the concept of parental alienation.

The experts agree that parental alienation can occur during high-conflict divorces or separations where a child allies with one parent (alienating parent) and rejects contact or a relationship with the other (alienated parent) without justifiable reason. This alienating behaviour is encouraged by the alienating parent. This notion was explored in detail in chapter 2.

Parental alienation can further be conceptualised according to different paradigms; the participants in this study all viewed parental alienation from a systemic paradigm. In this paradigm, the child is adultified as they are drawn into the parental system (dispute) for the self-serving purposes of the adultifying parent. The child is then co-opted into the parental system and used as a pawn in serving the needs of the adultifying parent, who normally aims to inflict emotional or other harm on the other parent.

The evaluators' worldview and conceptualisation of parental alienation will guide the evaluator in terms of what they are looking for. For example, in the systemic paradigm, the evaluator will look at each parent's respective relationship with the child and how the child is co-opted into the system, the purpose of this co-option, and the purpose of the newly formed alliance between the alienated child and alienating parent.

Incorrectly identifying parental alienation can also negatively affect a parent-child relationship and the child. Therefore, it is crucial for the mental health professional to distinguish between parental alienation, gatekeeping, and estrangement. On this point, it should be noted that so-called 'justifiable' parental alienation can also be harmful to the child and should therefore also be assessed; in this case, the so-called justifiable parental alienation is estrangement and recommendations should be made for such. These aspects were addressed in Chapters 2 and 4, and the effects and impact of parental alienation on the parents and the child were discussed in Chapter 2 at length. It is important for the evaluator to be cognisant of the above terms and differentiate between parental alienation, estrangement and gatekeeping to rule out the latter.

5.2.2. Important factors to consider when assessing for parental alienation

The expert participants in the study recommended that the evaluator follow a golden standard assessment practice. This would include interviews, collateral sources, psychometric assessments, and observations. Each of these components is addressed below.

5.2.2.1. Interviews with parents and parent-child interview

The expert participants recommended that the evaluator should interview the parents first. In these interviews, evaluators should pay attention to how the parents describe themselves, each other, past personal encounters, and the current status of their relationships, how they comment on each other's parenting capacities, and the narratives they use to describe the other parent. The evaluator should also look for any dominant inherent personality functioning in the interview, as these cues highlight whether the parents are capable of seeing each other's strengths and weaknesses or only the other's weaknesses. This information will assist in making recommendations such as involving a parental coordinator or offering parental effectiveness training, among others.

When interviewing children, the evaluator should pay attention to language use and whether the child uses the same words as the alienating parent's to describe the alienated parent. Listening to the way the child describes their relationship with each parent and how the child views the parental relationship is therefore important in this regard. These cues offer the evaluator more insight into the patterns and functioning of the dynamics that interplay in this particular system. One participant mentioned that during her interview with the child, the child shared information about her parents and events that had taken place before she was born, and stories about her father from when she was one year old – clearly information that had been divulged to the child by a parent, as there is no way the child could have recalled any of the information from firsthand encounters. This information is crucial in assessing parental alienation, given that borrowed phrases and scenarios (explored in chapter 2) are one of the criteria of parental alienation.

5.2.2.2. Collateral sources

The expert participants recommended using collateral sources from independent sources such as schools, family doctors, other therapists the child may be seeing, court documents, and previous reports. In addition, collateral information from independent sources ensures rich and authentic data.

The participants cautioned against using family and friends as collateral sources as the information provided by these sources could be contaminated by subjectivity or likely biased. One of the most senior participants stated that if the evaluator uses such sources, the evaluation should focus on their role concerning the child and childcare, not their comments on other relationships. This kind of interview with the step-parent or family member can provide cues as to whether they are contaminating the system (parent-child) further.

5.2.2.3. Psychometry

Psychometric assessment plays a vital role in the assessment of parental alienation. Assessments can be objective or subjective. On this point, all the experts in this study used the MMPI-3, MCMI-IV, and PAI in order to assess for parental alienation. The experts also stressed the importance of using the most updated versions of the test. The table below provides validity scales and personality scales that should be considered when assessing the parents, as recommended by the expert participants in the study.

The expert participants found that most alienating parents have specific inherent features of personality disorders ingrained; the most common features stemmed from paranoid personality disorder, narcissistic personality disorder, obsessive-compulsive personality disorder, dependent personality disorder, and borderline personality disorder (these criteria have been added as addendum A). The expert participants further argued that paying specific attention to the below-mentioned scales can strengthen evaluation:

Table 1: Scales that can be used for assessing parental alienation

MMPI-3 – K, L, F and FBS scales. These validity scales assist the evaluator in assessing if the parent is presented in a positive light, minimising pathology and faking good.	CMP – Compulsivity ARX – Anxiety-related experiences FML – Family problems IMP – Impulsivity CYN – Cynicism SFI – Self-importance DOM – Dominance
MCMI-IV – The validity scales X, Y, W	3 – Dependent 4A – Histrionic 4B – Turbulent 5 – Narcissistic 7 – Compulsive P – Paranoid
PAI, PIM, NIM scales and the defensiveness index	ANX – Anxiety PAR – Paranoia BOR – Borderline AGG – Aggression NON – Non-support DOM – Dominance

As mentioned in this chapter, a golden standard of assessing and reporting should be followed, i.e., the evaluator should not rely on one source only but rather multiple sources and include many clinical interviews with the alienating parent and alienated parent, parent-child observations, collateral data, and psychometric assessments.

The participants also expressed the need to assess the alienated child. The most common psychometric assessments that were used are the Draw-a-Person (DAP), Kinetic Family Drawing (KFD), Bene Anthony Family Relations Test, Children's Apperception Test (CAT), Roberts Apperception Test (RAT) and the Thematic Apperception Test (TAT).

The Draw-a-Person (DAP) and Kinetic Family Drawing (KFD) assist the evaluator in assessing how the child views the self. The expert participants considered self-view as important because they encountered many children with low self-esteem, low confidence,

anxiety, and lack of differentiation that were easily manipulated and drawn to the parental conflict..

The Bene Anthony Family Relations Test, Kinetic Family Drawing (KFD) and the Childrens' Apperception Test (CAT)/ Thematic Apperception Test (TAT) assist the evaluator in assessing how the child views the family in relation to the self. This was also considered important, according to the expert participants, as this is where one will see the child 'split' (the one parent is all-good and the other parent is all-bad).

The Roberts Apperception Test(RAT) and Children's Apperception Test (CAT)/ Thematic Apperception Test (TAT) assist the evaluator in assessing for flexibility and rigidity in the child's reasoning, as this is where one can see whether the child is capable of holding and integrating different views like 'it is okay to like and dislike a parent at the same time'. This was explored in depth in Chapters 2 and 4.

5.2.2.4. Observations

All participants expressed the importance of parent-child observations when assessing for parental alienation. The Marschak Interaction Method (MIM) is the most widely used interaction tool evaluators use to observe how each parent interacts with the child by having them do assigned activities. However, one participant expressed concern over the MIM. The participant was concerned that attorneys are now becoming aware of this tool and using it to prepare parents for such interactions. The participant mentioned that she modified her interactional assessment to eradicate possible preparations by legal professionals and opted to include teaching activities and competitions to observe how the child interacts with the parent(s). During the competition activities, she pays attention to how comfortable the parents are with competing, whether they assume a one-down or one-up position, and if the child wins, how the child interacts with the parent in the moment- do they perhaps forget their programming and become natural?

Home visits are conducted at the discretion of the evaluator; however, according to the literature from Chapter 2 and the two most senior participants in the study, home visits are recommended and encouraged in child custody evaluations.

During home visits, the evaluator gets to see the parent and child in their natural environment. This is where the evaluator will note whether the parent supports and acknowledges the other parent's role in the child's life (i.e., are there photos in the child's room of only one or of both parents? Do they get to keep, use, and display gifts from the other parent?) and also the parent and child's interaction (is it overcompensated?). Overcompensation is often observed in the alienating parent's interaction with the child. One participant referred to such conduct as "overdone" and "picture perfect" when observed in the alienating parent's home. Ambiguous behaviour is also usually seen in the alienated parent's home – this is where you see the child initially resist, but as the interaction progresses, the child relaxes. The child then moves away from the staged act to express their real feelings as this is a natural environment for the child.

While acknowledging the best practices for assessing parental alienation according to the expert participants in the study, it is equally important to express the possible problems evaluators may encounter during the evaluation process and what would constitute poor practices in the assessment of parental alienation.

According to the experts in the study, once parental alienation has been confirmed, or when the parent views the evaluator as a threat to the system, the evaluator will experience resistance from the parent – for example, the parent not honouring appointments, manipulating the evaluation, or even reporting the evaluator to the Health Professions Council of South Africa (HPCSA) and threatening the evaluator. This theme was explored in depth in Chapter 4 with supporting literature. However, this should not deter the novice evaluator, as these are merely tactics to push the evaluator aside. The expert participants hence recommended that evaluators should always have supervision during such cases.

For any evaluator to use best practices, they would need to have an idea of what constitutes poor practices in the assessment of alienation. Having just one interview with the referred party, unknowingly adopting a biased stance towards the referred party, and not integrating all findings from psychometric assessments, collateral sources, and clinical information are not only poor practices but are also considered unethical.

5.3. Integrating data and report writing

Once the evaluation is done, the evaluator should triangulate all data to establish or disconfirm their hypotheses or biases. Triangulating data also follows some of the best practice principles that were addressed in Chapter 2, such as effectiveness, relevance, and ethical soundness. Martin (2005) also confirmed that the method of triangulation and relying on several sources of information aid the evaluator in uncovering discrepancies, fabrications, and errors in the original data collected from family members or confirming the primary data obtained from family members.

Triangulating data and sifting through the data ensures that only relevant, valid and case sensitive information is provided. This gives the evaluation/report more credibility and authenticity (See Figure 1)

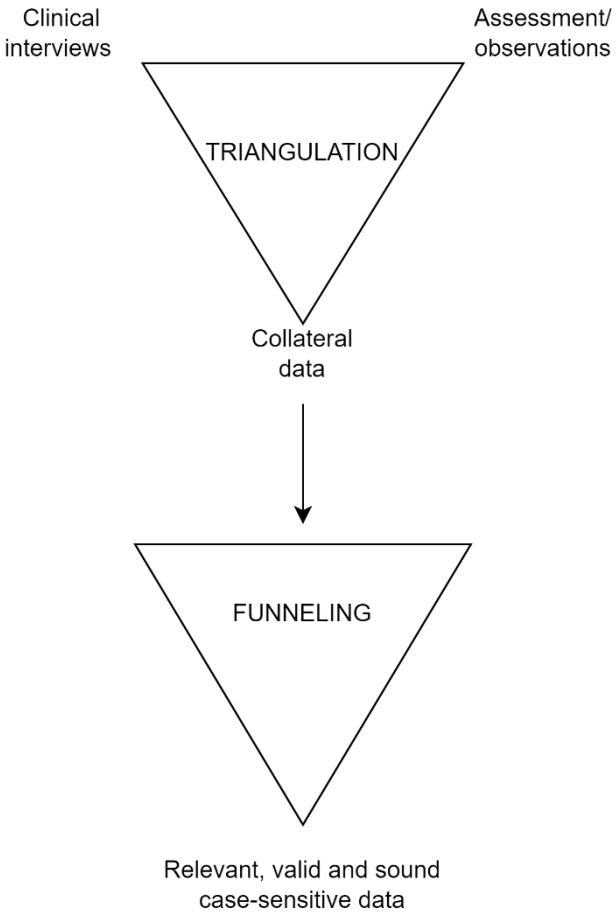


Figure 1: Triangulation and funnelling of data sources from evaluation

In terms of report writing, the experts stressed the importance of using case-sensitive data and backing it up with relevant theories such as the importance of biological parents, the impact of divorce on children, etcetera. When making recommendations, emphasis was placed on the alienated child attending therapy and having a parental coordinator involved for future case management. The extent of parental alienation (mild, moderate or severe) will determine the extended contact provided to the alienated parent to remedy and reunify the parent-child relationship. Furthermore, having the contact arrangement as a court order will assist the alienating parent in following the order.

Recap of Recommendations for best practices for Assessing Parental Alienation – According to experts in the understudy.

Evaluators' worldview and conceptualisation of parental alienation

The evaluator should also be cognisant of the concepts Gate-Keeping and Estrangement and be able to differentiate between them)

Interviews with parents and parent-child interviews

(The evaluator should pay specific attention to the narratives of the parents and the child. The way the parents describe each other is considered important and the language that the child uses to describe the parental relationship and the parents are considered important-borrowed scenarios and language)

Collateral Sources

(The evaluator should use independent sources such as professionals working with the children etc. If family members are interviewed are interviewed, the interview should focus on their relationship with the child-this assesses if they are also contributing to the problem)

Psychometry

(The most favoured instruments to assess the parents were the MMPI-3, MCMI –IV and PAI. The most favoured instruments to assess the child was the DAP, KFD, Bene Anthony Family Relations Test, CAT,TAT and RAT)

Observations

(The evaluator should observe the parent-child relationship. This will include the alienating parent-child and the alienated parent-child. The most common tool used was the MIM. Home visits were also recommended to assess the child in their natural environment)

Integrating data and report writing

(The evaluator should triangulate all the data and sift through the information to ensure only relevant, valid and case sensitive information is provided. The evaluator should also use relevant theory to ground their report.)

5.4. Recommendations for future research studies

While research is available on parental alienation and PAS, this study found limited research available on the assessment of parental alienation. The only subjective tool that has been designed to assist in identifying parental alienating behaviour in South Africa was the Duchen Grid. The participants in the study also expressed the need for concrete assessment tools that can help identify parental alienation in cases where it may occur. There is also a need for legal professionals to be trained on the impact of this phenomenon on the alienated child, especially given that the current emphasis on this phenomenon differs from mental health professionals and legal professionals. The researcher also found that due Parental Alienation being a global concept, it would be beneficial to have a universal tool that could be used nationally and internationally to assess for parental alienation successfully. Furthermore, the study can also incorporate an interview guide for parents and children so there coud be consistency on a national and international level with regards to the assessment of parental alienation.This could be done through a multi-phase Delphi study to establish consensus among experts on the recommendations/best practices related to the assessment of parental alienation.

5.5. Research contribution

The focus of this study was the assessment of parental alienation. Chapter 2 provided an in-depth understanding of parental alienation and the assessment of parental alienation based on available literature, while Chapter 4 explored experts in the psycho-legal field's understanding of parental alienation and how to assess for parental alienation. Chapter 4 further integrated the participants' findings with available literature. This ensured that even older literature could still be used to aid the evaluation of parental alienation while providing new information from the participants with specific reference to the assessment of parental alienation in practice.

Novice evaluators can use this research as a theory- and expert-informed guideline to assist them within the complex and controversial field of parental alienation, as it sheds light on problems evaluators may encounter when assessing parental alienation as well as poor practices and best practices for assessing for parental alienation.

5.6. Research limitations

Only a small number of experts participated in this study due to time and financial constraints. Furthermore, only registered clinical psychologists from Gauteng participated in this study, which means that the study population had limited representation – even though the researcher had been referred to expert counselling psychologists and social workers that deal with parental alienation as participants, they could not be interviewed due to the inclusion factors namely, all participants should be registered as a clinical psychologist with 3-5 plus years experience in the assessment of parental alienation and time and financial constraints of this research.

Furthermore, there were minimal previous studies that looked at the assessment of parental alienation specifically. The researcher had to research how each assessment could potentially assess for parental alienation.

The researcher believes that a larger sample size consisting of all professionals (i.e. counselling psychologists and social workers) that deal with the assessment of parental alienation would have produced more substantial, richer outputs on the best practices for assessing parental alienation.

5.7. Conclusion

This chapter concludes the topic under study, in which recommendations were provided on the best practices for assessing parental alienation by experts in the psycho-legal field. It further included academic and practical recommendations for future reference. The strengths and limitations of this study were addressed. It is evident from this research study that more research is required pertaining to the assessment of parental alienation as parental alienation is a growing occurrence in high-conflict divorce cases.

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ADDENDUM A: DSM-5 DEFINITIONS

Paranoid Personality Disorder is characterized by a pervasive distrust and suspiciousness of others such that their motives are interpreted as malevolent, beginning by early adulthood and present in a variety of contexts. To qualify for a diagnosis, the patient must meet at least four out of the following criteria:[8]

- Suspects, without sufficient basis, that others are exploiting, harming, or deceiving them.
- Is preoccupied with unjustified doubts about the loyalty or trustworthiness of friends or associates.
- Is reluctant to confide in others because of unwarranted fear that the information will be used maliciously against them.
- Reads hidden demeaning or threatening meanings into benign remarks or events.
- Persistently bears grudges (i.e., is unforgiving of insults, injuries, or slights).
- Perceives attacks on their character or reputation that are not apparent to others and is quick to react angrily or to counterattack.
- Has recurrent suspicions, without justification, regarding fidelity of spouse or sexual partner.

The *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition* (DSM-5) describes **Narcissistic Personality Disorder** as a life-long pattern of exaggerated feelings of self-importance, an excessive craving for admiration, and a diminished ability to empathize with others' feelings.[1][2] possessing at least five of the following nine criteria.[2]

A grandiose sense of self-importance

- Preoccupation with fantasies of unlimited success, power, brilliance, beauty, or ideal love
- Believing that they are "special" and unique and can only be understood by, or should associate with, other special or high-status people (or institutions)
- Requiring excessive admiration
- A sense of entitlement (unreasonable expectations of especially favorable treatment or automatic compliance with their expectations)
- Being interpersonally exploitative (taking advantage of others to achieve their own ends)
- Lacking empathy (unwilling to recognize or identify with the feelings and needs of others)
- Often being envious of others or believing that others are envious of them
- Showing arrogant, haughty behaviors or attitudes

The Diagnostic and Statistical Manual of Mental Disorders (DSM) contains a **dependent personality disorder** diagnosis. It refers to a pervasive and excessive need to be taken care of which leads to submissive and clinging behavior and fears of separation. This begins prior to early adulthood and can be present in a variety of contexts.[9]

In the DSM Fifth Edition (DSM-5), there is one criterion by which there are eight features of dependent personality disorder. The disorder is indicated by at least five of the following factors:[10]

Has difficulty making everyday decisions without an excessive amount of advice and reassurance from others.

Needs others to assume responsibility for most major areas of their life.

Has difficulty expressing disagreement with others because of fear of loss of support or approval.

Has difficulty initiating projects or doing things on their own (because of a lack of self confidence in judgment or abilities rather than a lack of motivation or energy).

Goes to excessive lengths to obtain nurturance and support from others, to the point of volunteering to do things that are unpleasant.

Feels uncomfortable or helpless when alone because of exaggerated fears of being unable to care for themselves.

Urgently seeks another relationship as a source of care and support when a close relationship ends.

Is unrealistically preoccupied with fears of being left to take care of themselves.[11]

Clinical criteria (Diagnostic and Statistical Manual of Mental Disorders, *Fifth Edition* [DSM-5])

Obsessive-compulsive personality disorder, can be described as a persistent pattern of preoccupation with order; perfectionism; and control of self, others, and situations

This pattern is shown by the presence of ≥ 4 of the following:

- Preoccupation with details, rules, schedules, organization, and lists
- A striving to do something perfectly that interferes with completion of the task
- Excessive devotion to work and productivity (not due to financial necessity), resulting in neglect of leisure activities and friends
- Excessive conscientiousness, fastidiousness, and inflexibility regarding ethical and moral issues and values
- Unwillingness to throw out worn-out or worthless objects, even those with no sentimental value
- Reluctance to delegate or work with other people unless those people agree to do things exactly as the patients want
- A miserly approach to spending for themselves and others because they see money as something to be saved for future disasters
- Rigidity and stubbornness

- Also, symptoms must have begun by early adulthood.

ADDENDUM B: INFORMATION LETTER TO POTENTIAL PARTICIPANTS

Dear potential participant,

I am Vernon Shunmugam and I am currently conducting a research study in partial fulfilment of my MA in Clinical Psychology at the University of South Africa, Psychology Department in Pretoria.

The abovementioned study is designed to define what parental alienation is according to the mental health professional (participant) and what procedures and practices are used for Assessing Parental Alienation. If you decide to engage in this study, you are entitled to anonymity –initials and a number will suffice and no identifiable details will be divulged to any third parties.

This study requires information to be extracted from the interviews, the interviews will be at your convenience and will last approximately 45 minutes, you are not obligated to answer any questions that you feel uncomfortable about or if you feel your reputation will be jeopardised by answering such questions. You also have a choice of withdrawing from the study as there will be no consequences to you. The researcher will also ensure secondary confidentiality to ensure your cases are still bound by confidentiality if discussed.

The interview will be transcribed verbatim and audio recorded for the data capturing and analysis process to ensure the credibility of the study. Once the interviews have been transcribed and analysed, the voice recordings and transcripts will only be kept until the dissertation has been finalised and will then be deleted. The information provided in my study will only have an alphabet and number as your identifying details. If you wish to have a copy of the report, it will be available to you on the UNISA repository.

Your engagement in this study is voluntary and will be highly appreciated should you decide to be involved in this study. If you require any more information, please feel free to contact me on the contact details provided below.

Kind Regards,

_____

Mr V.Shunmugam

Researcher

E-mail: vernonshun@yahoo.com

ADDENDUM C: SEMI-STRUCTURED QUESTIONNAIRE

Section A

1. What professional body to you belong to and what category?
2. How many years of experience you have as a practising professional and how many years' experience do you have in the assessment of Parental Alienation?

Section B

1. What is your understanding of Parental Alienation/how would you define Parental Alienation and how do you distinguish gate keeping and estrangement from Parental Alienation?

2 From your experiences, what are the best practices for assessing Parental Alienation? Do you use any specific clinical information to aid in your assessment and are there any specific assessments that you use?

3. In your opinion, can an evaluator encounter problems during the assessment of Parental Alienation and if so, what are the problems?
4. In your opinion, what constitutes as poor assessment practices whilst assessing for Parental Alienation?
5. From consulting with literature, I have seen various syndromes that resembles Parental Alienation Syndrome such as Divorce-Related Malicious Parent Syndrome and Threatened Mother Syndrome. Have you had any experiences with these syndromes/similar syndromes that can resemble Parental Alienation Syndrome?
6. How do you distinguish between genuine abuse cases from false allegations of abuse?
7. Are there any effects of incorrectly identifying Parental Alienation and are there possible protocols to prevent such from happening?
8. What happens after Parental Alienation has been confirmed? How do you ensure the Best Interest of the Child is considered when there is conflict between your recommendations and the current judicial system i.e., the system feels that the child should still reside with the primary caregiver who has initiated the alienation?
9. Is there anything you would like to bring to the researcher's attention or discuss in relation to Parental Alienation

ADDENDUM D: INFORMED CONSENT

To whom it may concern,

I am freely offering to engage in a research study conducted by Vernon Shunmugam from the University of South Africa Psychology Department. I am aware that the study is aimed to generate information about the best practices for Assessing Parental Alienation.

I am aware of the following:

1. My engagement in this study is out of my own free will. I have the right to withdraw from the study at any given time if I feel uncomfortable or I feel that my reputation will be jeopardised.
2. I am aware that I have the right to not answer questions that I feel uncomfortable with or questions that will dishonour my creditability within my profession.
3. I am aware that my engagement involves being interviewed by the researcher conducting this study. The interview will last approximately 45 minutes. I am also aware that notes will be written verbatim during the interview and will be voice recorded to ensure trustworthiness during the data capturing process. I am aware that I can provide Pseudo names for confidentiality purposes. If my name is provided, I am aware that the researcher will not identify me by identifying details in any reports using information obtained from this interview but rather a pseudo name (Alphabet and a number) will be used to honour my confidentiality.
4. I have read and understood the consent form provided to me and I have also had all my questions answered to my satisfaction.
5. My signature/Initials shows that I understand and consent to be a participant in this study.

_____

Participants Initials/Signature

ADDENDUM E: LANGUAGE EDITING CERTIFICATE

Language Editor's Declaration

info@languagematters.co.za

156 O R Tambo

Potchefstroom

2520

This document certifies that the manuscript/title listed below has been edited, within reasonable, ethical and professional limits, for syntax, grammar, spelling, punctuation, and specific stylistic and usage requirements of the English language by one or more qualified language practitioner(s) at Language Matters. The document was also reviewed for specific technical, style, and citation aspects. The editor's revisions and comments serve as recommendations; the overall quality of the final manuscript's contents remains the responsibility of the client/author. The language editor does not accept responsibility for any changes made to the manuscript after the issuing of this declaration.

Manuscript title:	Best practices for assessing parental alienation: perspectives of mental health professionals working as experts in a South African setting
Author(s):	Vernon Shunmugam
Date Issued:	22 September 2022
Issued by:	Language Matters