Systemic Rebuttal to Joan Kelly's and Janet Johnston's Systems' Critique of Gardner's Description of the PAS.

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Kelly and Johnston have been among the most outspoken and passionate naysayers regarding Gardner's identification of the PAS. Their rebuttal is based on three principal claims: 1) that there is no widespread scientific or empirical support for it among professionals; 2) that rejection of a parent can be normal under certain conditions; 3) that the PAS model is inconsistent with the systemic model of family assessment and intervention. My rebuttal to their rebuttal is as follows:

1) Lack of widespread scientific support. The interactional pattern characteristic of the PAS is the "seduction" by one parent of a child into a cross-generational coalition with the child to the deprecation and rejection of the other parent. Although being the first to label this family dynamic as the PAS, Gardner was hardly the first to have observed and identified it. Indeed, this family dynamic has had a widespread documented history dating as far back as to the 1950's. And who were these "inconsequential" observers of this family dynamic? They were only the child psychiatrists treating the child patient for psychosis on the hospital ward or in residential placement. These child psychiatrists, Nathan Ackerman (1958, 1961, 1965); Murray Bowen (1971, 1978); Don Jackson (1971); and Salvador Minuchin (1974, 1978, 1981, 1993, 1996; et al.), who later founded the family therapy movement, observed and extensively documented this family interactional pattern. Murray Bowen (1971, 1978) labeled it the "pathological triangle," and Jay Haley, (1963, 1968, 1973, 1977, 1990) labeled it "the perverse triangle," which, in extreme situations, caused severe emotional and behavioral disturbances in the child. Second generational family therapists (Andolfi 1983, 1989; Angelo, 1983; Boscolo, 1987; Gottlieb, 2012; Nichols, 1992, et al.) confirmed the existence of this "triangulation." Although the psychiatrists and therapists in the family therapy movement did not apply the label of parental alienation syndrome to this family dynamic, when there has been 60+ years of observable and scientific supporting data, what's in a name?

Now come Johnston and Kelly, who dismiss this history; yet, by their own admission, they base their opinions on supposition and scant evidence. In her article, Johnston (2001) states regarding the prevalence of alienation: "This flies in the face of clinical observations that shows [sic] that, in high conflict divorce, many parents exhibit indoctrinating behaviors but only a small proportion of children become alienated. It has been observed that some children (especially adolescents) develop unjustified animosity, negative beliefs and fears of a parent in the apparent absence of alienating behaviors by a parent. It would appear that alienating behavior by a parent is neither a sufficient nor a necessary condition for a child to become alienated." (pp. 1–2.)

It is interesting to me that Johnston accords greater validity to her observations than she does to those observations of Gardner or to those of the numerous other professionals who have encountered the PAS phenomenon in their practices either as therapists, forensic evaluators, lawyers for the child, or matrimonial attorneys. What does she mean when she states, "It has been observed?" By whom has it been observed and by how many? Where is the peer–reviewed literature and research to support the "it has been observed"? When she states, "It flies in the face of clinical practice," to whose

and how many clinical practices is she referring? And what did she mean by "apparent absence of alienating behaviors by a parent"? Is she rejecting Gardner's criteria of a parent facilitating the alienation on the basis of something that is "apparent" and that is not research informed? Indeed, Johnston (2001) provides a 'cautionary' note about the substantiation by the wide-spread scientific community of the ideas expressed in this article when she stated: "The ideas and views expressed in this paper are largely based on the clinical insights and practical experience of working with the board array of high conflict divorcing families by a **small** [*emphasis mine*] task force of experienced mental health professionals. There is critical need for more systematic research into this subject." (supra note 2).

The unsubstantiated denial of the PAS by Johnston and Kelly, who participated in the small task force, is disputed by the extensive scientific and anecdotal evidence confirmed from the contemporary worldwide professional practices of therapists and matrimonial attorneys. These professionals include, but are not nearly exhaustive of, the many who confirm the existence of the PAS: Baker, Bernet, Sauber, Everett, Lorandos, Major, Gottlieb, Cartwright, Clawar & Rivlin, Warshak. Richard Warshak (2001) has summarized the research and substantiation of many other professionals in his article, Current Controversies in Parental Alienation. I refer the reader to this article.

2) It is normal to reject a parent under certain circumstances. Johnston (2001) asserted, "We argue that it is critical to differentiate the alienated child (who persistently refuses and rejects visitation because of unreasonable negative views and feelings) from other children will also resist contact with a parent after separation but for a variety of normal developmentally expectable reasons" (p. 3). Warshak (2001) unequivocally disputes the authors' contention that rejection of a parent is sometimes an age-appropriate/stage specific development of the child's maturation process or can be a response to traumatic events, such as to high conflict divorce. Indeed, he documented that hostility to and rejection of a parent is seriously harmful to children. (pp. 30–33.)

I fully concur with Warshak. In my professional opinion, Johnston confuses rejection for a parent with the normalcy of children switching their closeness to each parent as they progress through their developmental stages. But this clearly does not signify that the other parent is rejected or degraded——only that it is normal for children to regulate distance and closeness with each parent at different developmental stages or due to a significant event. Indeed, I concur that "alliances" (meaning closeness) are not pathological when they are flexible——changing over time and under different circumstances and never to the rejection and humiliation of the other parent. It is when a coalition between the child and the same parent becomes rigid over time and engenders humiliation and disengagement of the other parent that it has the potential to lead to an alienation.

Johnston's further failure is her failure to define "rejection." The many professionals worldwide (not a small task force), who have been confronted by the PAS in their various disciplines, comprehend how deviant, despicable, and cruel is the PAS child in her/his rejecting treatment of the targeted/alienated parent. If these children treated teachers in kind, they would be expelled from school; if they treated their therapists in kind, they would be psychiatrically hospitalized; and if they treated any human being

other than their targeted parent, nay, treated even an animal in kind, they would be incarcerated. The unjustified loathing of alienated children for their targeted parent cannot be considered normal child development under any circumstances. I emphatically dispute that such feelings for and treatment of a parent are ever indicative of healthy child development. The progression of an alienation from the mild stage to the severe stage is such an abnormal and disturbing development that it no more belongs on the same continuum as the child's healthy developmental progress towards separation/individuation than does an Axis II diagnosis belong on Axis I.

3) Johnston (2001) and Kelly reject the PAS model for its inability to pass a family systems test. They substitute, instead, their "alienated child" (AC) model. (pp. 2-4).

Richard Warshak (2001) cogently argued that the reformulation by Kelly and Johnston (2001) from the PAS model to their AC model is a distinction without a difference. He firstly punctuates that they accept two of Gardner's three criteria for the syndrome, namely that of the child's malicious rejection and denigration of the targeted parent and that of the child's feelings and beliefs being utterly out of proportion to anything which that parent did (31–36). What Kelly and Johnston (2001) did not adopt in their AC model from Gardner's PAS model is the role played by their "aligned parent" (pp. 3–7) as opposed to Gardner's almost identically named alienating parent, who facilitates the creation of the alienation. (I will be returning to this third criteria momentarily.) Warshak elaborated in his article about how closely the child's symptoms in the AC model adhere to Gardner's eight symptoms (pp. 32–36). Johnston (2001) described this as follows: "An alienated child is defined as one who expresses, freely and persistently, unreasonable negative feelings and beliefs (such as anger, hatred, rejection, and/or fear) toward a parent that are significantly disproportionate to the child's actual experience with that parent" (p.2).

Nevertheless, Johnston's assertions about their observations are stated in such a take-it-for granted/matter-of-fact manner that the implication is that the observations of the small task force members are irrefutable and commonly accepted by the larger scientific community. To the contrary, the literature summarized by Warshak utterly disputes their observations, as do Baker's research and the anecdotal experiences of numerous professionals, including this therapist. These professionals, the professionals who were interviewed for my book, and the many others to whom I previously referred, confirm a high degree of alienation——as much as 75–80% of all divorce cases——and occurring at the instigation of an alienating parent. It appears that Johntson's "alienated child" model has far less substantiation and corroboration from the anecdotal experiences of mental health professionals, from empirical support, and from other research informed studies than does Gardner's PAS model.

It would have further been helpful in this article if Johnston (2001) had therefore provided a comprehensive and precise definition of alienation in making the assertion that "only a small proportion of children become alienated" (p. 2) in a divorce situation. It seems that her criteria for determining an alienation is primarily the presence of visit refusal (p. 3). This is a narrow definition of the alienated child, being far from inclusive of their behaviors, attitudes, and emotional state.

My principal criticisms of Johnston systems' critique of the PAS, however, are her failures to apply systems principles consistently and to apply systems theory in its

entirety. To begin with, suppose I grant her position that the aligned parent did not cause or did not principally initiate the alienation. This I will stipulate: systems theory refutes emphasis on linear causation in favor of recognizing that there is a reciprocity of behaviors among family members. (What Salvador Minuchin labeled as their complementarity.) As such, Johnston is aware that systems theory is instead concerned with how each individual member is involved in the maintenance of the symptoms and the dysfunctional transactional patterns which are occurring in the family system. The question must then be raised as to why Johnston does not concede that the aligned parent must be playing a role in the maintenance of the alienation----such role being no better exemplified than by the alienator's failure to encourage and support the relationship and visits between the other parent and their child; that is, to be proactive in assuring that the other parent is offered the opportunity to be involved in their child's life. Moreover, in the typical alienation case, the alienated parent no longer lives with the family and has frequently had no contact with the child for upwards of months and frequently years, so it is improbable that the alienated parent is playing any role in symptom maintenance. The only conclusion that can be reached, therefore, is that the alienating parent is responsible for the maintenance of the alienation. Focusing on symptom maintenance and on the current family constellation (which is most likely comprised of only the aligned parent and children) are the critical dynamics that Johnston conveniently obfuscates but which are, nonetheless, the philosophical underpinnings of a systemic diagnosis of family dysfunction. There is thus no escaping the conclusion that the aligned parent is, at the very least, culpable for the maintenance of the alienation.

So if the behavior of the aligned parent is not the primary cause of the alienation in Johnston's AC model, who and what do cause it? Johnston (2001) declares that many factors contribute, and they include the family's history of events, developmental stages, interactional patterns, and even the individual personality characteristics of the child can influence the child's susceptibility to a brainwashing. She expressed it this way, "They are responding to complex and frightening dynamics within the divorce process itself, to an array of parental behaviors, and as a result of their own early developmental vulnerabilities which have rendered them susceptible" (p. 4). She further elaborated upon this last factor when she stated, "Children who are temperamentally vulnerable (anxious, fearful, dependent, or emotionally troubled) are those that [sic] are less able to withstand the inordinate stress inherent in being in the middle of a high-conflict divorce. Instead they are more likely to be drawn into an alienated stance" (p. 7). This last variable characterizing the child as "temperamentally vulnerable" is an intra-psychic concept and is therefore quite peculiar and contradictory to be included as an element in a systems assessment of the family dynamics and of symptoms. A systems model would instead attribute those four symptoms---as well as any others----to being the outcome of the "the frightening dynamics of the divorce process" and to "an array of parental behaviors." According to systems theory, the triangulating process is the root of the "frightening dynamics," and of the dysfunctional behaviors of the parental sub-system. Systems theory defines the triangulation as the process by which the child is co-opted by an aligned/alienating parent into forming a cross-generational coalition against the other parent. And yes, I unequivocally concur with Johnston that this triangulating process likely commenced long before the parents decided to separate: I have yet to recall an alienated parent----and I have worked with a couple hundred----who did not express the following similar sentiments: "I saw the alienation coming long before we separated. My spouse

and my children were always ganging up on me, excluding me, keeping secrets from me, putting me down, ignoring my input, rejecting my parenting ideas, etc." In Johnston's AC model, then, the alienated child's vulnerability to the subsequent alienation cannot, according to systems theory, be attributed to the intra-psychic concept of being "temperamentally vulnerable" but rather must be a direct result of the family's pre-divorce history of triangulation. And indisputably, this triangulation required the active co-opting by the aligned/alienating parent. The family's "frightening dynamics" and "array of parental behaviors" cultivated a seed for the alienation, and in this seed is also included the budding alienating maneuvers of the alienating parent, which thusly accounts for all three criteria in Gardner's PAS model.

Indeed, Johnston (2001) acknowledges the triangulating process as a factor in the development of an alienation when she states: Common features of these cases include a history of intense marital conflict, often from the time the child was very young, wherein the child was triangulated or where the child replaced the rejected parent as the central object of a spouse's affection; a separation that was experienced as inordinately humiliating by the aligned parent; and subsequent divorce conflict and litigation that, can be fuelled by professionals and extended kin. (p. 6)

So how did the triangulation occur? Would Johnston maintain that children triangulate themselves? Not likely! The triangulation requires the active initiation on the part of the aligned/alienating parent. Johnston's description of how the child becomes susceptible to the alienation in the AC model is therefore not only inconsistent with systems theory; it actually requires that there be an aligned parent who actively engages in alienating maneuvers.

Johnston's critique of the PAS model is further flawed by another significant deviation from systems theory: namely that her explanation for the formation of an alienation places emphasis on the there and then history of the family instead of on their here and now experiences with each other. This emphasis is at extreme odds with the philosophical underpinnings of systemic theory, which accounts for symptom formation, instead, on the dysfunctional interactional patterns occurring in the present. So it seems quite peculiar that Johnston reverts to history for an explanation of the alienation rather than focusing on the current interactional patterns between the child and the aligned parent, with whom the child is living. Johnston (2001) herself criticized the PAS supporters for their failure to consider all the dynamics in the family systems as factors in creating an alienation when she stated that they "would be better served by a more specific description of the child's behavior in the context of his family" (p. 2). So which context is more relevant and impactful, the present here and now experiences or the past there and then memories? Systemic therapists would unquestionably respond with the present here and now experiences. Once again, one must reach the conclusion that the aligned/alienating parent is actively participating in, encouraging, and maintaining the alienation.

As I stated in the introduction of my book, it is important to address the complementary role of the alienated parent in the family system and how she/he contributed to the development of the alienation, participation in which systems theory asserts must have occurred. I wish to be perfectly very clear: when I affirm that the alienated parent played a role in the family dynamics, I am referring to the relationship with the other parent; I am not insinuating that she/he did anything in interaction with

the child to justify the child's antagonism and rejection. Most professionals who have been involved in the detection and/or treatment of an alienation, including Gardner, Johnston, and Kelly, noted that alienated parents often display a passivity, from the time when they were still living with the family. This passivity resulted in their underinvolvement and their spouse's overinvolvement with the children and which simultaneously sanctioned the empowerment of their spouse as primary decision maker for their children. (Many times, however, it was a planned arrangement between the couple for one parent to be the breadwinner while the other was the primary caretaker for the children.) For example, virtually every alienated parent expressed to me that they very often "surrendered" to their former partner in marital/parental disputes because it was too hard to fight or that they are conflict adverse or because they did not wish to expose their children to the hostilities. Alienated parents acknowledged having incredulously acquiesced to their former partner's demands that they not pick up and hold their baby and that their family of origin could not see the children. And quite a few alienated parents shared with me that they declined to have their former partner arrested after she/he had absconded with their child(ren) to another country or across America, instead choosing not to subject their children to such a traumatic event. In the end, it was more likely that the alienating parent succeeded in having the alienated parent arrested at one time or another and sometimes multiple times as a result of making erroneous allegations of domestic violence and/or of sexual child abuse.

When I engage in treatment with the PAS family, my work with the parental subsystem therefore involves redistributing the power imbalance that typically exists between the alienating and alienated parents but which is often being exacerbated by the professionals in the larger social systems who have become co-opted by the alienating parent.

It is interesting, however, that Johnston (2001) deems the alienated parent to be generally healthier than the aligned parent. She explained it this way: "Common personality predispositions of the aligned parent include narcissistic vulnerabilities that escalate under threat and present as paranoid and borderline dynamics. Such parents may not be consciously spiteful and vindictive but nevertheless behave in emotionally abusive ways that damage the child's relationship with the other parent. They often harbor intense, abiding distrust of the rejected parent, hold convictions that the other parent is at best irrelevant and at worst a pernicious or dangerous influence on the child, and believe that he or she has never loved or cared about the child. Consequently they see the child as urgently in need of their protection from the rejected parent. On the other hand, typical personality predispositions of the rejected parent are associated with a range of parenting limitations that do not, however, rise to the level of abuse and neglect. These may include passivity and withdrawal in the face of conflict, a tendency to be self-centered and immature, to have diminished empathy and limited parenting skills, and/or to be overly critical, demanding, and counter-rejecting in response to the child's provocative and obnoxious behavior." (p. 6). Yes, well, Janet Johnston, I wonder how well you would manage your anger in response to being kicked in your genitals by your child!

It is a mystery to me as to how Johnston's above characterizations of the aligned parent support her argument that the aligned parent is innocent of fostering the alienation. Johnston seems to imply that when the alienating maneuvers of the aligned

parent occur on an unconscious level, it makes the alienation more palatable. Well, it certainly makes the aligned parent less treatable. But I cannot see how this exonerates her/him. If a mugger impulsively, rather than pre-meditatively, stabs to death her/his victim, the outcome is equally disastrous for the victim. Nor have I heard of any case in which a judge accepted the plea of "ignorance of the law" as exoneration for a crime.

I would like to elaborate on Johnston's assertion that the aforementioned larger social systems exacerbate the alienation---a contention that cannot be understated. Indeed, one of the points of my book is that the PAS would have little momentum were it not for the support which the alienator obtains from the professionals in the mental health, matrimonial, child welfare, and judicial systems. Power struggles are common in families but do not evolve into such a disparity as it does in situations of the PAS unless powerful outside authorities align with the alienator. It is my contention that when the professionals in the aforementioned systems embolden the alienator that the alienator is able to gain and maintain a significant advantage and upper hand over the targeted parent. The victimization of the alienated parent arises, then, from the overwhelming confluence of power and authority of the co-opted professionals in support of the alienator and which accounts for the disempowerment of the alienated parent. The victimization could not result from the alienator's efforts if unaided. This is the basis for my argument for the multi-professional systems that intervene in the family to work collaboratively with the family therapist by affording a level playing field between the alienated and alienating parents. When this is the backdrop for the therapy, I have generally been effective in reversing and eliminating the PAS.

Johnston (2001) grossly misrepresents Gardner's work by asserting that the making of false allegations of abuse by the alienating parent is a necessary component for the PAS to be diagnosed (p. 1). Although making such allegations is frequently a maneuver employed by the alienating parent, Gardner by no means claimed that it must occur for the PAS to be diagnosed. As the reader will discover from further education about the PAS, the making false allegations of abuse———and particularly that of sex abuse———is frequently employed as an alienating maneuver because it almost certainly guarantees that visits between the targeted parent and the child will be suspended during the CPS investigation. And in no way did Gardner sanction domestic violence, child abuse, or pedophilia———of which some of his critics have falsely accused him.

I must make an important point to the women's groups which oppose recognizing parental alienation as a syndrome: it is an exploitation and misuse of the PAS to employ it as a defense against domestic violence or sex abuse. This is a total misread and misapplication of Gardner. Just because there are those in the abusive population who attempt to do so, does not discredit its appropriate label as a syndrome. Just because there are deviant people who abuse the system by attempting to claim innocence of such crimes by making a false claim of being a victim of the PAS, does not mean that a legitimate family dynamic should be denied. (That would be as irrational as blaming Benjamin Franklin for every electrical fire to befall humanity just because he had harnessed its application.) I submit, to the contrary, that it is ambiguity resulting from the lack of an accepted syndrome with clearly specified symptoms that leads to both genders being victimized by the PAS with no hope of remedy. And ambiguity further creates situations in which there is greater likelihood for the inability to substantiate cases of domestic violence——of which both genders are also victimized.

All this being said, I fail to comprehend how a systems therapy approach, which is the only modality I have been using to treat these families for the past 17 years, is incompatible with assessing as a syndrome the family's transactional pattern of an alienation. As with any other syndrome in the DSM-IV, the family arrives with the member who is labeled as the identified patient and whom the members perceive as having an intra-psychic condition at the core of the dysfunction. And as with any other family myth that is presented to me, I provide a reframe that offers to the family an interactional or systemic interpretation of their presenting problem.

I am persuaded by my own clinical observations during 40 years of practice as to the very real existence of the PAS. Throughout these years, I had countless times observed in all too many heartbreaking cases the replication of Gardner's eight symptoms in the children along with the co-existing alienation-maintaining maneuvers of the alienating parent. Indeed, before I became aware of this syndrome, I had frequently misinterpreted situations in which children expressed an inexplicable hatred for a parent. In my early years of practice, I failed to employ an appropriate curiosity about how a child developed what appeared to be abhorrence for such a significant, cherished, and intimate relationship. Like all too many therapists today, I mistakenly assumed that, beneath the surface, there must be repressed memories of abusive experiences with that parent. Given the increasing dialogue and revelations in the recent literature about the PAS, there can be no justification, however, for a professional in current times to accept carte blanche the child's stated loathing of a parent. Nor should the verbalizations and explanations of only one parent be accepted as the complete reality for what is occurring in the family. The child presenting before the therapist in 2012 and onward could not be the child of the Immaculate Conception. We therefore have an obligation to obtain input from the other parent, if available. We are the line of first defense as families seek out our help in the early stages of family dysfunction and/or dissolution, when the PAS is in its nascent stage and therefore the most reversible. So too, the matrimonial attorney is the line of first defense. For the best interests of the child, the attorney should be counseling the client against engaging in an alienation---just as they counsel the client against dissipating the marital assets.

The mental health therapist and matrimonial attorney have it within their respective realms to eradicate the PAS instantaneously. I wonder if we have the courage and willingness to so.

Most of this article has been reprinted from my book, *The Parental Alienation Syndrome: A Family Therapy and Collaborative Systems Approach to Amelioration.* Please feel free to repost or reprint but just credit the source as it is copywrited.

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