

PAPER**PSYCHIATRY & BEHAVIORAL SCIENCE**

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An Objective Measure of Splitting in Parental Alienation: The Parental Acceptance–Rejection Questionnaire*

ABSTRACT: Both clinicians and forensic practitioners should distinguish parental alienation (rejection of a parent without legitimate justification) from other reasons for contact refusal. Alienated children—who were not abused—often engage in splitting and lack ambivalence with respect to the rejected parent; children who were maltreated usually perceive the abusive parent in an ambivalent manner. The purpose of this study was to assess the usefulness of the Parental Acceptance–Rejection Questionnaire (PARQ) in identifying and quantifying the degree of splitting, which may assist in diagnosing parental alienation. Results showed that severely alienated children engaged in a high level of splitting, by perceiving the preferred parent in extremely positive terms and the rejected parent in extremely negative terms. Splitting was not manifested by the children in other family groups. The PARQ may be useful for both clinicians and forensic practitioners in evaluating children of divorced parents when there is a concern about the possible diagnosis of parental alienation.

KEYWORDS: forensic science, child psychiatry, children of divorce, splitting, parental alienation, parental acceptance–rejection questionnaire

Parental alienation is a mental condition in which children—usually children whose parents are engaged in a high-conflict separation or divorce—ally strongly with one parent (the preferred or alienating parent) and reject a relationship with the other parent (the rejected or target parent) without legitimate justification. In contrast, justified estrangement refers to a child's rejection of a parent for good reason, such as a history of abuse or neglect. In both clinical and forensic evaluations, it is important to distinguish alienation from justified estrangement and other causes of contact refusal (1,2). The purpose of this study was to assess the usefulness of the Parental Acceptance–Rejection Questionnaire (PARQ) in identifying and quantifying the degree of splitting, which may assist in distinguishing alienated from nonalienated children.

Splitting in Parental Alienation

Divorce is an important event having many psychological, social, and legal implications. High-conflict divorce leads to

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more significant struggles for children (3). Parental alienation, which occurs primarily in children of separated and divorced parents, has been described in the literature of mental health and legal professionals in at least 35 countries on six continents (4). The criteria for identifying parental alienation were originally formulated by Gardner (5; Table 1). Although Gardner referred to this condition as “parental alienation syndrome,” most contemporary authors simply use the term “parental alienation.” Regarding diagnosis, parental alienation may be identified using DSM-5 terminology: “child affected by parental relationship distress,” “parent-child relational problem,” and “child psychological abuse” (6–8). Parental alienation is a complex family dynamic that involves mental mechanisms in the affected child, alienating behaviors of the preferred parent, reactions of the rejected parent, and sociocultural phenomena (9,10). This study is not a treatise on the broad topic of parental alienation, but simply addresses a particular aspect of the mental state of an alienated child, that is, splitting or lack of ambivalence.

Of the eight criteria that are commonly accepted for the diagnosis of parental alienation, lack of ambivalence is a symptom that may be measured quantitatively. It is normal for interpersonal relationships to feature ambivalence. While young children typically have an idealized view of their parents, older children and adolescents usually perceive each parent as having both strong points and weak points. It is unusual for an older child or adolescent to perceive a parent in an all-or-none fashion, that is, totally good or totally bad. However, children who experience severe parental alienation almost always manifest splitting, such that they idealize the alienating parent and devalue the target parent. This aspect of parental alienation is not subtle: A boy who was alienated from his father said, “My mother is my angel! My father is a devil!” The same metaphor was used by Akhtar and Byrne (11) in their review of the concept of splitting:

TABLE 1—Criteria for the diagnosis of parental alienation (5).

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- Campaign of denigration against the target parent.
 - Frivolous rationalizations for the child's criticism of the target parent.
 - Lack of ambivalence.
 - Independent-thinker phenomenon.
 - Reflexive support of the alienating parent against the target parent.
 - Absence of guilt over exploitation and mistreatment of the target parent.
 - Borrowed scenarios.
 - Spread of the child's animosity toward the target parent's extended family.
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“To the individual using extensive splitting, the world seems populated by devils and angels but devoid of truly human figures” (p. 1014) (11). Parental alienation occurs along a continuum and typically progresses from mild to moderate to a severe level of alienation. While splitting appears to be a common feature of severe parental alienation, it is not known how frequently it occurs in mild and moderate levels of alienation.

The term “splitting” has enjoyed multiple definitions and applications in the history of psychology, psychiatry, and psychoanalysis. For Breuer and Freud (12), “splitting of consciousness” involved alternating states of consciousness in hysterical patients and was thus closely related to dissociation. In his studies of psychosis, Bleuler (13) introduced the term schizophrenia or “splitting of the mind.” He used “splitting” to describe loose associations and “a fragmentation of the thinking processes” (p. 350) (13). Klein (14) explained that children employed splitting as a defensive maneuver to separate good from bad experiences, perceptions, and emotions. Kernberg (15) and many others (e.g., 16) emphasized how splitting or black-or-white thinking, lacking ambivalence, is a feature of some mental disorders, especially borderline personality disorder. Vaillant (17) classified splitting as a pathological, primitive defense mechanism in which the defended individual segregates experiences into all-good and all-bad categories, with no room for ambiguity and ambivalence. In the current research, we consider splitting to be a maladaptive mental mechanism by which children protect themselves from the uncomfortable feelings of cognitive dissonance, that is, from anxiety caused by ongoing parental conflict. When there is continual warfare between the mother and father, children often find it difficult to maintain affection for both parents at the same time. They typically resolve the dissonance by the mechanism of splitting, that is, by gravitating to an enmeshed relationship with one parent and strongly rejecting the other parent.

It is essential to recognize that in parental alienation, the child's rejection of the target parent is far out of proportion to anything that parent has done to justify the rejection. Parental alienation is maladaptive in the sense that the child has a false belief that the rejected parent is evil, dangerous, or not worthy of love. If a parent were truly abusive or severely neglectful, the child's rejection of that parent would not constitute parental alienation. Rather, it would be called realistic or justified estrangement (2). Whereas alienated children perceive the rejected parent as evil, most abused or neglected children still perceive the abusive parent in an ambivalent manner. In her classic book 50 years ago, Kopitz (18) said, “It is sometimes amazing to observe children's loyalty to parents who are actually

rejecting and neglectful” (p. 128) (18). More recently, Baker and Schneiderman (19)—who have extensively studied maltreated children—said, “The feeling of rejection experienced by [abused] children resulted in a heightened desire for that parent's love and approval” (p. 93) (19).

Several authors have said that the use of the defense mechanism of splitting distinguishes alienated children. For example, Lee and Olesen (20) said that the alienated child manifests “lack of ambivalence” (p. 284) (20). Also, Ellis (21) said that one of the features of parental alienation is “the mechanism of splitting to reduce ambiguity” (p. 60) (21). Most recently, Jaffe, Thakkar, and Piron (22) published qualitative research regarding “denial of ambivalence as a hallmark of parental alienation.” They said, “The expressed lack of ambivalence as manifested by the alienated child serves as an observable defining characteristic of the presence of parental alienation” (p. 1) (22). The research reported here presents a quantitative method to identify the mental mechanism of splitting in alienated children, which has been described qualitatively so many times.

Objective Measures of Splitting

There have been previous attempts to measure splitting in adults. Based on the writings of Kohut (23) and Kernberg (24), Gerson (25) developed a 14-item questionnaire to measure defensive splitting. At about the same time, Bond, Gardiner, Christian, and Sigel (26) developed the Defense Style Questionnaire, a 67-item instrument, which was intended to measure various defense mechanisms. Later, Gould, Prentice, and Ainslie (27) constructed the Splitting Index, a 24-item questionnaire intended to be a “convenient instrument for empirical investigations of psychoanalytic object-relations theories of splitting as well as of the borderline and narcissistic personality disorders” (p. 416) (27). The Splitting Index, intended for use with adults in clinical settings, had good correlations with measures of borderline personality disorder and narcissistic personality disorder.

Bricklin (28) developed the Bricklin Perceptual Scales (BPS) specifically for use in child custody evaluations. The BPS consists of 64 questions, which pertain to the child's perception of the mother (32 questions) and the child's perception of the father (32 questions). Although Bricklin did not use the term “splitting” in his discussion of that instrument, that appears to be what he was measuring. Bricklin said that alienated children had a mind-made-up (MMU) configuration, which occurred as part of a not-based-on-actual-interaction (NBOAI) scenario. Bricklin found that MMU children rated the preferred parent extremely or abnormally high (i.e., favorably) and the rejected parent extremely or abnormally low (i.e., unfavorably) on the BPS (p. 108) (28).

The Parental Acceptance–Rejection Questionnaire

In developing this research project, it seemed likely that the Parental Acceptance–Rejection Questionnaire (PARQ) would help distinguish alienated children (who lack ambivalence and engage in splitting) from nonalienated children (who were expected to manifest ambivalence toward both parents). The PARQ—a 60-item questionnaire that children complete regarding their mothers and fathers—was not developed specifically for the evaluation of children of divorced parents, although it has been used in child custody evaluations (29). The measure was derived from interpersonal acceptance–rejection theory (IPARTheory), an evidence-based theory that addresses the

implications of parental acceptance and rejection for individuals' personality and psychological adjustment (30,31).

The authors developed hypotheses that the PARQ would accurately distinguish alienated children from nonalienated children in the following manner. (1) We predicted nonalienated children would manifest ambivalence toward both parents, even parents who had been neglectful: The mean PARQ score for the parent who has been neglectful will be high (i.e., somewhat rejecting), but not extremely high. That prediction was based on research that maltreated children often maintain ambivalence toward neglectful and abusive parents. (2) We predicted that severely alienated children would manifest splitting: The mean PARQ score for the preferred parent will be very low (i.e., perceived acceptance), and the mean PARQ score for the alienated or target parent will be very high (i.e., perceived rejection). That prediction was based on the common understanding that severely alienated children lack ambivalence with regard to their parents; that is, they perceive the preferred parent as extremely good and the alienated parent as extremely bad. (3) We predicted that the pattern of PARQ scores for the neglected children would differ significantly from the pattern of PARQ scores for the alienated children. That prediction was based on the observation that alienated children intensely reject the less preferred parent, whereas neglected children still hope that the parent will treat them better and love them. Review and approval of this study was obtained from the Vanderbilt University Institutional Review Board.

Case Summary

The following clinical vignette illustrates parental alienation in a male adolescent, whose scores on the PARQ: Mother and PARQ: Father exhibit splitting as described in this article. "Brad" (a participant in this research) experienced a severe level of parental alienation; Brad's clinical symptoms were expressed in his scores on the PARQ.

The parents of Brad, a 16-year-old male, were in a protracted custody dispute for nearly three years. About a week after the parents separated, the father received a text message from Brad who accused him of fondling the boy's genitals at age 2 during a family camping trip. Brad claimed he hated his father and refused to ever see him again. The father recalled his son had a urinary tract infection at age 2 and was prescribed an ointment by the family physician just prior to a family vacation. Both parents responsibly and individually administered the ointment during diaper changes in a tent. The mother and son had never made similar claims against him in the past. Two days after receiving the text message, the father arrived at the mother's home to pick up Brad; the mother refused to let the boy leave. The father returned the following day in another attempt to see Brad; the mother opened the front door and insisted that Brad did not want to see the father. Then, the mother phoned 911. She alleged to the police that the father deliberately pushed her to the ground. Although the police officers found the mother's statements to be inconsistent, they arrested the father and released him when he agreed to not communicate with the mother or go to her address.

Eventually, the family court ordered a child custody evaluation by an experienced psychologist. During interviews with the evaluator, Brad claimed he remembered his father's touching his genitals at age 2. Brad provided other unfounded, vague, and frivolous reasons for refusing contact with his father. When the evaluator visited the mother's home, he noticed a picture frame

in Brad's bedroom, which was turned around and taped to the wall so that the front was not visible. Brad showed the evaluator the reversed photograph of his father and said it was turned around because "I hate him. He never loved me and we never had any fun times together." The evaluator determined that there had been a good baseline relationship between the father and son, but an abrupt change for the worse occurred immediately after the parents separated. The evaluator opined this was a case of severe parental alienation. The court made the same finding and ordered the entire family to participate in the Family Reflections Reunification Program. At the outset of the intensive reunification treatment, Brad completed the PARQ, which indicated an unrealistically positive view of his mother (PARQ: Mother = 63) and an unrealistically negative view of his father (PARQ: Father = 234). (The lowest possible score on the PARQ is 60; the highest possible score is 240.)

Methods

Participants

In this article, "children" usually refers to "children and adolescents." Although some of the children recruited for this study were sibling groups, we randomly selected one child from each family to participate in the study. Participants (total $N = 116$, M age = 13.1 years, $SD = 2.64$, range = 9 through 17 years in each of the four groups) were recruited for the following family types:

Children from intact families ($n = 35$): a control group, that is, children who lived together with both parents in one household.

Children of divorced parents ($n = 20$): a second control group, that is, children whose parents were divorced or separated, but the children continued to see both parents on a regular basis.

Neglected children ($n = 16$): children whose parents were divorced or separated, but the children did not see both parents on a regular basis. In this research, all the neglected children lived with their mothers and rarely or never saw their fathers. The mothers uniformly described the fathers as being unreliable in contacting their children, uninterested in having a relationship with their children, and neglectful by abandoning the family. It was a coincidence of sampling that all of the children in this group were neglected by their fathers. That was fortunate because it became possible to compare children neglected by their fathers with children alienated from their fathers. Although we know the children in this group were neglected by their fathers, we do not know whether they were estranged from their fathers. We do not know whether they met the definition of estranged introduced by Kelly and Johnston (2), that is, children who "wish to severely limit contact with [a] deficient or frightening parent" (p. 254) (2). Thus, in this study we are not able to directly compare alienated and estranged children, but we do compare alienated and neglected children.

Children in the first three family types (intact, divorced, and neglected) were recruited through ResearchMatch, a national health volunteer registry that was created by several academic institutions and supported by the U.S. National Institutes of Health as part of the Clinical Translational Science Award (CTSA) program. ResearchMatch has a large population of volunteers who have consented to be contacted by researchers about studies for which they may be eligible. Children in these family types were recruited through ResearchMatch between April and December 2015. Although they came from various parts of the

U.S.A., they were homogeneous in their willingness to participate in medical research.

Alienated children ($n = 45$): children whose parents were divorced or separated, and the children strongly rejected a relationship with one of their parents. Of the 45 youth in the alienated families, 24 were alienated from their fathers and 21 were alienated from their mother. Thus, the alienated families were divided into the alienated-father families and the alienated-mother families.

Children in the alienated families were all recruited from the Family Reflections Reunification Program, a program in British Columbia, Canada, which specialized in the treatment of parental alienation (32). These youth were enrolled in the Family Reflections Reunification Program consecutively between April 2013 and October 2015. The families of the alienated children lived in about 14 cities in the U.S.A. and Canada. In all cases, experienced mental health professionals determined that the children's rejection of one parent was without justification. All the evaluators had doctoral degrees in clinical psychology (Ph.D. or Psy.D.) and were licensed to practice psychology in their respective jurisdictions. The evaluators consistently noted in their written reports two important features of parental alienation: The child's refusal to have contact with the target parent was unjustified; and the child's negative thoughts and feelings toward the target parent were disproportionate to their actual experiences with that parent. The evaluators concluded that the children were severely alienated. Their cases were heard in family courts in various locations in the U.S.A. and Canada, which also concluded the children were severely alienated. In all cases, the courts ordered the families to participate in the Family Reflections Reunification Program. Although they had initially been evaluated by mental health professionals in several locations in Canada and the U.S.A.—and they had been ordered into treatment by family courts in several locations in Canada and the U.S.A.—the alienated families were homogeneous in that the staff of the same specialized treatment program determined with a high level of confidence that all the youth in that group exhibited a severe level of parental alienation. Table 2 provides information about the characteristics of the children and their parents.

Measure

The Parental Acceptance–Rejection Questionnaire (PARQ) provides an objective, quantitative measure of children's perceptions of parental (maternal and paternal) accepting–rejecting behaviors (33). Children respond to 60 statements regarding each parent—for example, “My father says nice things about me”—by choosing Almost Always True, Sometimes True, Rarely True, or Almost Never True. The responses are scored 1 through 4, with the lower values reflecting a more positive perception of that parent, and the higher values reflecting a more negative

perception of that parent. (Some of the responses are scored in reverse, so that the positive perceptions are always the lower value.) Thus, children who gave their fathers the most positive assessment on all 60 statements would have a PARQ: Father score of 60, whereas children who gave their fathers the most negative assessment on all 60 statements would have a PARQ: Father score of 240.

Rohner (33) found that in the U.S.A., “PARQ scores... typically fall between 90 and 110, indicating the experience of substantial loving acceptance” (p. 49) (33). He also found that 7% to 10% of American youths and adults tend to respond at 150 or higher, “revealing the presence of very serious parental rejection” (p. 49) (33). The PARQ has been used in more than 550 studies in over 40 languages with several hundred thousand respondents in about 60 countries. Extensive evidence reported in Rohner (33) and Khaleque and Rohner (34) shows that the PARQ is a reliable and valid measure for use in national and international research. This conclusion is supported in the present study, where coefficient alphas are high for both the PARQ: Mother and PARQ: Father respectively in all five groups: intact families, .83, .85; children of divorced parents, .85, .83; children with neglectful fathers, .82, .88; alienated-father families, .94, .70; and alienated-mother families, .96, .89.

Procedure

Respondents in the intact families, children of divorced parents, and neglected children participated in this research online through the Research Electronic Data Capture (REDCap) program, a secure web application for building and managing online surveys and databases. Research personnel obtained informed consent from parents and assent from children. After confirming that the child was located in a room alone without any parent present, the child completed the child version of the PARQ: Father and the child version of the PARQ: Mother.

Respondents in the alienated families completed the PARQ shortly after arrival at the alienation-specific treatment program. These youth had already been determined by experienced mental health professionals and a family court to be manifesting severe parental alienation. These youth also completed the PARQ: Father and PARQ: Mother. They were administered the child version of the PARQ with regard to the preferred parent and the adult version of the PARQ with regard to the rejected or alienated parent. That adjustment in the research protocol was made because the Child PARQ is written in the present tense (“My father says nice things about me.”), whereas the Adult PARQ is written in the past tense (“My father said nice things about me.”) As the children in the alienated families had typically not seen the rejected parent for a long time—usually more than a year—it was appropriate to use a questionnaire that was expressed in the past tense.

TABLE 2—Characteristics of participants and their parents.

Family Type	Intact	Divorced	Neglected	Alienated-Father	Alienated-Mother
Source of participants	RM	RM	RM	FR	FR
No. of participants	35	20	16	24	21
Gender (male:female)	22:13	11:9	8:8	9:15	10:11
Mean age (SD) of children	12.5 (2.86)	13.1 (3.07)	13.3 (2.98)	13.9 (2.07)	13.3 (2.01)
Preferred parent (mother:father)			16:0	24:0	0:21

RM, ResearchMatch; FR, Family Reflections Reunification Program.

Results

An initial analysis of age and gender differences in participants' responses to the PARQ: Mother and PARQ: Father for each of the five family types showed that—with one exception—neither age nor gender for either males or females was significantly associated with participants' reports of maternal or paternal acceptance–rejection. Data supporting this conclusion are displayed in Tables 3 and 4. The sole exception to this conclusion pertains to participants' reports of both maternal and paternal acceptance–rejection in alienated-father families. There, Table 3 shows that the older the youths were, the more loving (accepting) they reported their mothers to be and the more rejecting they reported their fathers to be. Because there were no gender differences in participants' reports of parental acceptance–rejection in any of the five family types—and because there was only one age difference in all of these relations—all further analyses were pooled across age and gender within each family type.

Intact Families

The children from intact families had PARQ scores that ranged from 73 through 117. The PARQ: Father ($M = 93.26$, $SD = 10.04$, 95% CI [89.81, 96.71]) and PARQ: Mother ($M = 93.14$, $SD = 11.70$, 95% CI [89.12, 97.16]) scores were almost exactly equal. This indicates that both parents in the intact families fell into the realistic warm and loving (accepting) range, which reflects the children's perception of loving, nurturing parents. These scores are consistent with other studies of children in the U.S.A. (33). Campo and Rohner (35), for example, found that a control group of adolescents and young adults in the U.S.A. had mean PARQ: Father scores of 93.9 ($SD = 26.4$) and mean PARQ: Mother scores of 95.0 ($SD = 14.0$). Veneziano (36) found that African American and European American children and adolescents had mean paternal PARQ scores of 97 ($SD = 20.4$) and the mean maternal PARQ scores of 98.2 ($SD = 28.4$).

Children of Divorced Parents

Children of divorced parents—who continued to see both parents on a regular basis—had PARQ scores that ranged from 102 through 134. The PARQ: Father ($M = 118.85$, $SD = 8.05$, 95% CI [115.08, 122.62]) and PARQ: Mother ($M = 115.20$, $SD = 9.08$, 95% CI [110.95, 119.45]) scores were also very close to each other. In the divorced families, both parents were perceived to be fairly loving (accepting), but the children understandably perceived both parents to be somewhat less loving than did children in intact families. That difference is consistent

with a study by Öngider (37) in Turkey, who found that children of low-conflict-married parents had more positive perceptions of their parents than children of low-conflict-divorced parents.

Neglected Children

The children of divorced parents who did not see both parents on a regular basis had a distinctly different pattern of PARQ scores. For these children, the PARQ: Mother scores ranged from 93 through 111 ($M = 99.06$, $SD = 5.71$, 95% CI [96.02, 102.10]) and the PARQ: Father scores ranged from 124 through 170 ($M = 144.38$, $SD = 13.32$, 95% CI [137.28, 151.47]). As noted earlier, all children in this group lived with their mothers; the children saw their fathers rarely or never. The fathers were uniformly described as neglectful. Thus, it is understandable that the children perceived their fathers to be somewhat rejecting, whereas they perceived their mothers to be warm and loving (accepting) in a realistic sense. The children's perception of their fathers is negative, but not extremely so. The data suggest that these children still have some positive feelings (thus, ambivalence) toward their neglectful fathers. Therefore, the first hypothesis was confirmed.

Alienated Children

PARQ scores for alienated children were dramatically different from those of the other three family groups. As the children were alienated from their father ($n = 24$) or from their mother ($n = 21$), it was necessary to separate alienated families into alienated-father families and alienated-mother families. The preferred parent in both of these groups had extremely (unrealistically) low PARQ scores, whereas the alienated parent had extremely (unrealistically) high PARQ scores.

More specifically, for the alienated-father families, PARQ: Mother scores ranged from 60 through 102 ($M = 64.67$, $SD = 8.43$, 95% CI [61.25, 69.32]) and PARQ: Father scores ranged from 209 through 240 ($M = 231.88$, $SD = 6.43$, 95% CI [228.11, 233.99]). For the alienated-mother families, PARQ: Mother scores ranged from 125 through 240 (Mean = 212.52, $SD = 26.68$, 95% CI [200.38, 224.67]) and the PARQ: Father scores range from 60 through 103 (Mean = 67.86, $SD = 8.92$, 95% CI [63.80, 71.92]). These scores reveal that alienated children typically have extremely positive perceptions of the preferred parent, who is called the alienating parent in cases of severe parental alienation. On the other hand, alienated children typically have extremely negative perceptions of the rejected parent, who is called the alienated or target parent in such cases. These data indicate that alienated children manifest the psychological mechanism of splitting, so the second hypothesis was confirmed. Figure 1 displays the PARQ: Mother and PARQ: Father scores for the five family types.

Of great interest, we should note that the pattern of PARQ scores effectively distinguished alienated children from neglected children. As shown in Table 5, the children of alienated fathers perceived their fathers significantly more negatively than neglected children perceived their fathers. Likewise, children of alienated fathers perceived their mothers significantly more positively than neglected children perceived their mothers. Thus, we conclude that the third hypothesis was confirmed. The effect size (Cohen's $d = 8.37$ in comparing the PARQ: Father of alienated children with that of neglected children) was extremely high. The very high incidence of severe rejection, which was predicted, had not been observed in previous research with the

TABLE 3—Correlation between participants' age and participants' responses to the PARQ: Father and PARQ: Mother, by family type.

Family Type	<i>n</i>	PARQ: Father	PARQ: Mother
		<i>r</i>	<i>r</i>
Intact	35	0.16	0.24
Divorced	20	0.09	0.30
Neglected	16	0.45	−0.18
Alienated-father	24	0.55**	−0.54**
Alienated-mother	21	0.06	0.04

** $p < 0.01$.

TABLE 4—Gender differences in males’ versus females’ responses to PARQ: Father and PARQ: Mother, by family type.

Family Type	PARQ: Father							PARQ: Mother						
	Males		Females		t	df	p	Males		Females		t	df	p
	M	SD	M	SD				M	SD	M	SD			
Intact	93.32	9.24	93.15	11.68	0.04	20.89	ns	91.14	11.14	96.54	12.37	-1.30	23.68	ns
Divorced	120.36	6.62	117.00	9.61	0.89	13.77	ns	116.45	10.12	113.67	7.94	0.69	17.98	ns
Neglected	145.25	14.24	143.50	13.25	0.26	13.93	ns	96.75	3.88	101.38	6.52	-1.72	11.41	ns
Alienated-father	232.22	4.18	231.67	7.60	0.23	21.92	ns	62.78	3.11	65.80	10.37	-1.05	17.82	ns
Alienated-mother	64.60	3.34	70.82	11.36	-1.74	11.87	ns	223.00	16.34	203.00	31.22	1.86	15.38	ns

ns, not significant.

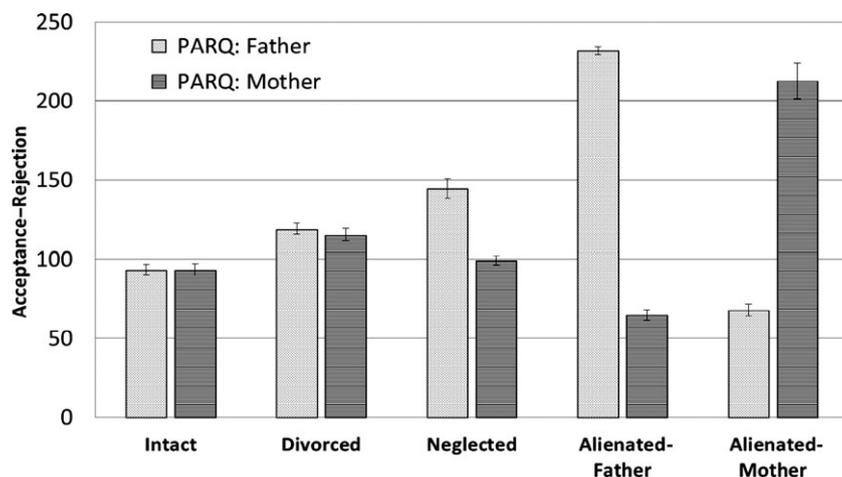


FIG. 1—Relation between perceived parental acceptance–rejection and family type. Lowest possible score on PARQ = 60 (very positive perception of parent); highest possible score on PARQ = 240 (very negative perception of parent). Error bars: 95% CI.

TABLE 5—Mean PARQ: Father and PARQ: Mother differences between children of alienated fathers and children of neglectful fathers.

	n	PARQ: Father			PARQ: Mother		
		M	SD	t (38)	M	SD	t (38)
Children of alienated fathers	24	231.88	6.43	27.81***	64.67	8.43	-14.25***
Children of neglectful fathers	16	144.38	13.32		99.06	5.71	

***p < 0.001.

PARQ. However, Bricklin observed the same phenomenon when children were tested with the Bricklin Perceptual Scales. He said that in cases of parental alienation, “most of the child’s responses will be extremely positive for the alienating parent and negative for the target parent” (p. 108) (28).

Discussion

The premise of this research was that it should be possible to compare quantitatively alienated children’s perceptions of their parents (which are likely to be strongly positive and strongly negative) with nonalienated children’s perceptions of their parents (which are likely to be ambivalent). We expected that the PARQ would distinguish alienated children, who had

not been maltreated, from maltreated children who had been neglected by their fathers. The fact that these predictions were confirmed in this research indicates that the PARQ: Father and the PARQ: Mother may be useful measures for the clinical and forensic evaluation of children who may be alienated.

This research supports the reality of parental alienation, in that the severely alienated children consistently manifested a distinct maladaptive mental mechanism, an intense level of splitting, which had previously been described in descriptive, qualitative research for many years (5,20–22). Also, the high level of splitting was observed in alienated children, but was not observed in the other family groups. This support for the reality of parental alienation is important because some critics have said that parental alienation does not exist (38,39, pp. 52-53).

Child custody evaluations are an important event for many families who are experiencing divorce. It is very important for custody evaluators to understand children’s perceptions of their parents, and to identify and correctly diagnose parental alienation. Evidence reported here shows that the PARQ may assist custody evaluators as well as clinicians in distinguishing neglectful parenting such as abandonment and parental alienation. Future research may also show that the PARQ assists forensic and clinical evaluators in distinguishing justified estrangement (contact refusal due to a legitimate fear) and alienation (contact refusal driven by a false belief). That distinction is important because the recommendation in cases of justified estrangement (such as limited contact with the rejected parent) may be the

opposite of the recommendation in cases of alienation (such as limited contact with the preferred parent).

Clinicians as well as forensic practitioners have found that there are important counterintuitive features to parental alienation (40). Perhaps the most consistently observed paradoxical aspect of parental alienation has been the observation that alienated children, who were not maltreated by the rejected parent, have a much more negative opinion of that parent than do children who have been maltreated by the rejected parent. Some mental health evaluators wrongly conclude that the child's insistence on the malevolence of the rejected parent is evidence for actual abuse by that parent. In fact, the child's extreme insistence on the malevolence of the rejected parent may be evidence of parental alienation, not of abuse. In cases involving mild or moderate maltreatment, children typically remain ambivalent toward abusive parents because they hope those parents will change their ways and become consistently loving caregivers (19).

There are cases, of course, of chronic, severe child abuse in which maltreated children totally and rightfully want the abusive parent out of their lives forever. We realize that both groups of children—severely alienated and severely abused—might rate one parent in an extremely negative manner on the PARQ. In those cases, the distinction between alienation and abuse would not be made with the PARQ, but the diagnosis would be established by a detailed family history. Because of the obvious severity of the abuse, cases of severe child maltreatment are usually identified by child protection agencies and are not addressed in child custody evaluations.

With regard to limitations, we acknowledge that this research is limited by the fact that the 16 children with neglectful fathers were clearly maltreated (neglected, abandoned, psychologically abused), but we do not know whether they were estranged in the way the term is now used (2). For example, we do not know whether the children of the neglectful fathers rejected a relationship with those fathers. Thus, we can say that the PARQ distinguished alienated children from other family groups (children of intact parents, children of divorced parents, and neglected children), but we cannot say that the PARQ distinguished alienated and estranged children. Also, it is possible that the very high PARQ scores for the alienated parents were related to the setting in which the test was administered; data were gathered from the alienated children during admission to involuntary, court-ordered treatment, which the children presumably blamed on the rejected parent who brought the matter to court. Another possibility is that the high PARQ scores for the alienated parents were not related to parental alienation, but were caused by the child's lack of contact with that parent. Thus, although we believe that the extreme level of splitting caused or contributed to the child's refusal to spend time with the alienated parent, it could have been the other way around; that is, the lack of time with the alienated parent led to a very high PARQ score for that parent.

It will be important in future research to compare directly the PARQ scores of alienated and estranged children, as well as children who have experienced a hybrid blend of estrangement and alienation together. It will be useful in the future to learn how children who have experienced mild, moderate, and severe maltreatment respond to the PARQ for the abusive parents and for the nonabusive parents. Also, it will be useful to learn how children who have experienced mild, moderate, and severe levels of parental alienation respond to the PARQ for the preferred parent and for the rejected parent. Typical definitions of those terms are: mild parental alienation means that the child resists contact

with the target parent but enjoys the relationship with that parent once parenting time is underway; moderate parental alienation means that the child strongly resists contact and is persistently oppositional during parenting time with the target parent; severe parental alienation means that the child persistently and adamantly refuses contact and may hide or run away to avoid being with the target parent (9, p. 23).

Of course, the PARQ should not be used in isolation to determine whether a child is alienated. The measure—like most psychological tests—should be part of a comprehensive psychiatric and/or psychological assessment of the family, including multiple interviews, meetings with collateral informants, review of records, and teamwork with other professionals. However, we conclude that both clinical and forensic practitioners should consider using the PARQ as one component of a comprehensive evaluation when they are concerned about the possible diagnosis of parental alienation.

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References

- Bernet W, Freeman B. The psychosocial assessment of contact refusal. In: Lorandos D, Bernet W, Sauber SR, editors. *Parental alienation: the handbook for mental health and legal professionals*. Springfield, IL: Charles C Thomas, 2013;47–73.
- Kelly JB, Johnston JR. The alienated child: a reformulation of parental alienation syndrome. *Fam Court Rev* 2001;39(3):249–66.
- Cummings EM, Davies PT. *Marital conflict and children: an emotional security perspective*. New York, NY: Guilford Press, 2010.
- Bernet W. References in the professional literature. In: Lorandos D, Bernet W, Sauber SR, editors. *Parental alienation: the handbook for mental health and legal professionals*. Springfield, IL: Charles C Thomas, 2013;5–77. (Supplemental Reference Guide).
- Gardner RA. Recent trends in divorce and custody litigation. *Academy Forum* 1985;29(2):3–7.
- American Psychiatric Association. *Diagnostic and statistical manual of mental disorders*, 5th edn. Arlington, VA: American Psychiatric Association, 2013.
- Bernet W. Children of high-conflict divorce face many challenges. *Psychiatr Times* 2015;32(10):9, 12–5.
- Bernet W, Wamboldt MZ, Narrow W. Child affected by parental relationship distress. *J Am Acad Child Adolesc Psychiatry* 2016;55:571–9.
- Lorandos D, Bernet W, Sauber SR, editors. *Parental alienation: the handbook for mental health and legal professionals*. Charles C Thomas: Springfield, IL, 2013.
- Harman JJ, Biringen Z. *Parents acting badly: how institutions and societies promote the alienation of children from loving parents*. Scotts Valley, CA: CreateSpace, 2016.
- Akhtar S, Byrne JP. The concept of splitting and its clinical relevance. *Am J Psychiatry* 1983;140:1013–6.
- Breuer J, Freud S. On the psychical mechanism of hysterical phenomena: preliminary communication. In: Strachey J, editor and translator. *The standard edition of the complete psychological works of Sigmund Freud*. Vol 2. London, U.K.: Hogarth Press, 1883/1956.
- Bleuler E. *Dementia praecox or the group of schizophrenias*, translated by Zinkin J. New York, NY: International Universities Press, 1911/1950.
- Klein M. *Envy and gratitude*. New York, NY: Basic Books, 1967.
- Kernberg O. Borderline personality organization. *J Am Psychoanal Assoc* 1967;15:641–85.
- Zanarini MC, Frankenburg FR, Fitzmaurice G. Defense mechanisms reported by patients with borderline personality disorder and Axis II comparison subjects over 16 years of prospective follow-up: description and prediction of recovery. *Am J Psychiatry* 2013;170:111–20.
- Vaillant GE. *Ego mechanisms of defense: a guide for clinicians and researchers*. Washington, DC: American Psychiatric Publishing, 1992.

18. Koppitz EM. Psychological evaluations of children's human figure drawings. New York, NY: Grune & Stratton, 1968.
19. Baker AJL, Schneiderman M. Bonded to the abuser: how victims make sense of childhood abuse. Lanham, MD: Rowman & Littlefield, 2015.
20. Lee SM, Olesen NW. Assessing for alienation in child custody and access evaluations. *Fam Court Rev* 2001;39(3):282-98.
21. Ellis EM. A stepwise approach to evaluating children for parental alienation syndrome. *J Child Custody* 2007;4(1/2):55-78.
22. Jaffe AM, Thakkar MJ, Piron P. Denial of ambivalence as a hallmark of parental alienation. *Cogent Psychol* 2017;4:1327144.
23. Kohut H. The analysis of the self. New York, NY: International Universities Press, 1971.
24. Kernberg O. Borderline conditions and pathological narcissism. New York, NY: Jason Aronson, 1975.
25. Gerson MJ. Splitting: the development of a measure. *J Clin Psychol* 1984;40:157-62.
26. Bond M, Gardiner ST, Christian J, Sigel JJ. Empirical study of self-rated defense styles. *Arch Gen Psychiatry* 1983;40:333-8.
27. Gould JR, Prentice NM, Ainslie RC. The Splitting Index: construction of a scale measuring the defense mechanism of splitting. *J Pers Assess* 1996;66:414-30.
28. Bricklin B. The custody evaluation handbook: research-based solutions and applications. New York, NY: Brunner/Mazel, 1995.
29. Heller CH. Applications of parental acceptance-rejection theory and evidence to forensic psychology. *Interpers Accept* 2009;3(3):1-3.
30. Rohner RP. Introduction to interpersonal acceptance-rejection theory, measures, evidence, and implications, <http://csiar.uconn.edu/introduction-to-ipartheory/> (accessed January 20, 2017).
31. Rohner RP, Khaleque A. Handbook for the study of parental acceptance and rejection, 4th edn. Storrs, CT: Rohner Research Publications, 2005.
32. Reay KM. Family reflections: a promising therapeutic program designed to treat severely alienated children and their family system. *Am J Fam Ther* 2015;43:197-207.
33. Rohner RP. Parental Acceptance-Rejection Questionnaire (PARQ): test manual. In: Rohner RP, Khaleque A, editors. Handbook for the study of parental acceptance and rejection, 4th edn. Storrs, CT: Rohner Research Publications, 2005;43-106.
34. Khaleque A, Rohner RP. Perceived parental acceptance-rejection and psychological adjustment: a meta-analysis of cross-cultural and intracultural studies. *J Marriage Fam* 2002;64:54-64.
35. Campo AT, Rohner RP. Relationships between perceived parental acceptance-rejection, psychological adjustment, and substance abuse among young adults. *Child Abuse Negl* 1992;16:429-40.
36. Veneziano RA. Perceived paternal and maternal acceptance and rural African American and European American youths' psychological adjustment. *J Marriage Fam* 2000;62:123-32.
37. Öngider N. Boşanmış ve evli ailelerden gelen çocukların algıladıkları ebeveyn kabul-red düzeyleri ile psikolojik uyum düzeylerinin karşılaştırılması [The comparison of parental acceptance-rejection and psychological adjustment of children in divorced and married families]. *Klinik Psikiyatri Dergisi [Journal of Clinical Psychiatry]* 2013;16(3):164-74.
38. Titelman W, Zender A, Hodson P, Pollica L. From the mouths of mothers. In: Hannah MT, Goldstein B, editors. Domestic violence, abuse, and child custody. Kingston, NJ: Civic Research Institute, 2010; 10-1-10-9.
39. Jaffe PG, Lemon NKD, Poisson SE. Child custody and domestic violence: a call for safety and accountability. Thousand Oaks, CA: Sage Publications, 2003.
40. Miller SG. Clinical reasoning and decision-making in cases of child alignment: diagnostic and therapeutic issues. In: Baker AJL, Sauber SR, editors. Working with alienated children and families: a clinical guidebook. New York, NY: Routledge, 2012;8-46.

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