

# Toplum ve Sosyal Hizmet

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Olgu Sunum / Case Presentation

## Case Management in The Cases Of Parental Alienation Syndrome: Case Study

### *Ebeveyn Yabancılaşma Sendromu Olgularında Vaka Yönetimi*

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#### ABSTRACT

*Divorce is a rather difficult process for both children and parents. After separation or divorce, the child may reject one of the parents, s/he may typically strongly object to seeing one parent or may not want to go to that parent. This may be for normal or acceptable reasons, or the child's "alienation" against the parent may be the reason. It is a type of emotional abuse defined as Parental Alienation Syndrome. This study aims to create a roadmap for the evaluation of these cases, by presenting examples where the reports, which have been prepared at the end of the process evaluated at a hospital-based Child Protection Centre and conducted with case management. PAS cases can be conducted with a multidisciplinary, holistic approach, with case management under the coordination of a social worker in the team, at low cost. The reports submitted to the courts will include the evaluations of all the professionals in the team and will transparently and clearly highlight the common decision that is made in line with the child's primary benefit. The reports prepared in this way will affect the decisions of the Court and the victimization of children and parents will be prevented.*

**Keywords:** Parental alienation syndrome, case management, multi-disciplinary team, social worker.

#### ÖZ

*Boşanma hem çocuklar hem de ebeveynler için oldukça zor bir süreçtir. Ayrılma ya da boşanma sonrasında çocuk anne ya da babasından birini reddedebilir, bu reddetme normal ya da kabul edilebilir nedenlerle olabileceği gibi, çocuğun ebeveynine karşı "yabancılaşması" da bir neden olabilir. Ebeveyn Yabancılaşma Sendromu olarak tanımlanan bu durum duygusal istismarın bir biçimidir. Bu çalışmada, hastane temelli bir Çocuk Koruma Merkezinde değerlendirmeler sonucu hazırlanan, vaka yönetimi ile yürütülen örnekler sunularak bu vakaların değerlendirilmesine yönelik bir yol haritası oluşturulması amaçlanmaktadır. EYS vakaları, çok disiplinli, bütüncül bir yaklaşımla, ekipteki bir sosyal hizmet uzmanının koordinasyonunda vaka yönetimi ile düşük maliyetle yürütülebilir. Mahkemelere sunulan raporlar, ekipteki tüm profesyonellerin değerlendirmelerini içerecek ve çocuğun birincil yararı doğrultusunda alınan ortak kararı şeffaf ve net bir şekilde vurgulayacaktır. Bu şekilde hazırlanan raporlar Mahkeme kararlarını etkileyerek çocukların ve anne babaların mağduriyetinin önüne geçilmiş olacaktır.*

**Anahtar Kelimeler:** Ebeveyn yabancılaşma sendromu, vaka yönetimi, çok disiplinli ekip, sosyal hizmet uzmanı.

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## INTRODUCTION

Divorce is a rather difficult and stressful process for both children and parents. In the simplest definition, the child will not be able to reach the two people with whom s/he has been most connected and will experience a sense of being "split", after the start of the divorce process (Gregory, 2016). Most of the time, conflicts in the marriage continue after divorce and this has severe and negative effects on the children. After separation or divorce, the child may reject one of the parents, s/he may typically strongly object to seeing one parent or may not want to be with that parent. This can leave the court, experts, and parents in a difficult situation. This rejection may be for normal or acceptable reasons or the child's "alienation" against the parent may be the reason. The case of "alienation", defined as a pathological condition, was first identified by Wallerstein and Kelly as a process in which a narcissistic angry parent and a sensitive fragile child together strive to hurt and punish the other parent (Güler, 2017).

### Parental Alienation Syndrome (PAS)

PAS is a form of emotional abuse. As parts of this emotional abuse, the following can be included: disputes continuing during the divorce process, manipulative behaviours with accusatory, critical, and/or emotional content by the parent who alienates the child from the other parent, raising the child unhealthily to meet the emotional needs of the parent who alienates, and preventing the child's ability to think independently (Güler, 2017). Characteristics of parents who expose children to emotional abuse include having low socioeconomic and low education levels and belonging to immigrant and broken families (Polat, 2007).

For both the child and the victimized parent, PAS in the child can create lifelong damage in the relationship between him/her and the targeted parent. According to studies, children with PAS may develop many mental disorders, such as behavioural disorders, anxiety disorders, personality disorders and dissociative disorders (Torun, 2011). PAS is a clinical entity that has the potential to seriously affect the lives of the child/children and the targeted parent and may cause mental health problems if not recognized and overlooked (Güler, 2017). Children who are alienated from their parents can suffer from low self-esteem, depression, alcohol-substance abuse, lack of self-confidence, attachment difficulties, alienation from their children, divorce, identity problems, lack of sense of belonging, refusal to have children, low achievement, guilt, anxiety and various phobias (Baker, 2005).

Today in the PAS process, which starts right after divorce lawsuits, one of the parents takes on the role of alienating and begins to provoke, alienate, and use the child against the other parent. This exposes the children to serious emotional abuse and the destruction of the other parent's image in the children can lead to depression, post-traumatic stress disorder (PTSD) and many mental

illnesses. It can even include lawsuits alleging sexual abuse against the other parent (Torun, 2011). Sometimes, physical abuse claims can also be brought up.

It is suggested that the definition of this phenomenon should focus on the alienated child rather than parental behaviour (Kelly & Johnston, 2001). An alienated child is defined as "a person who freely and persistently expresses excessively negative feelings and beliefs towards a parent, such as anger, hatred, rejection and / or fear, in their current experiences with him".

When evaluating a child or children in terms of PAS, it is necessary to take into account that not all children who refuse to meet with the parent are necessarily alienated children. Some children may have a strong alliance with one parent against another. These children do not deny the other parent and refuse communication with them. In fact, they feel indecisive and can recall positive memories and experiences with that parent. These children are typically older children who judge that the alienated parent is at fault or inappropriately acted in relation to the breakdown of the marriage or that the injured parent needs support and protection (Ellis, 2008).

According to Gardner (1998), children experience three levels of parental alienation: mild, moderate and severe. In mild cases, there is programming against the other parent, but the visit to the parent is not seriously affected and the child manages to relate to both parents without much difficulty. In cases of moderate parental alienation, there is significant programming against the other parent, resulting in struggles over visiting. The child often has difficulty in transitioning from one parent to another, but can eventually form a reasonably healthy relationship with both. The severely alienated child is resolute in their hatred towards the alienated parent. He usually refuses any contact and can threaten to flee if he is forced to visit. The alienating parent and child are in an unhealthy alliance based on distorted beliefs about the other parent. The relationship between the child and the targeted parent is completely destroyed (Baker, 2005).

PAS claims have become a legal strategy in many divorce lawsuits, regardless of considering the relationship of the children with both parents during the marriage or possible causes of the child's resistance to communicating with the parent. Custody status should be examined to recommend effective legal and psychological interventions for families where problems about alienation arise. The itinerary of this process is to evaluate the child about whom there are suspicions of alienation, to focus on monitoring the legal process and managing the psychological case, to conduct therapeutic work with alienated children and their families and to ensure the reorganization of family systems. From the "Family Systems" perspective, the psychopathology of one parent is less likely to cause PAS than the high degree of conflict between the parents and the psychopathology of both parents. These families are not families that accept help easily and they are likely to reapply for a lawsuit, with or without therapeutic intervention (Lund, 1995).

## Case Management

In the case of an alienated child, it is first necessary to identify the alienated child and formulate the most appropriate therapeutic intervention for the family. It may be necessary to start treatment with these families without fully understanding their specific dynamics and origins, without a legal agreement that allows such intervention. Secondly, a provision or court order that specifies the roles, communication and privacy limits and decision-making powers of all professionals is required. In addition, an inclusive, coordinated, rule-based process is needed to manage the ongoing family conflict and to implement the therapeutic intervention. Court decisions are often the result of judicial case management (Kelly, 2001), but if there is no existing case manager, it may be necessary for the case management to be initiated by the therapist before starting therapy (Johnston,2001). Case management proceeds after the court's directives for custody based on its preliminary assessment. The case manager is responsible for monitoring the treatment process and ensuring coordination. Treatment may include one or more of the following steps (Lund, 1995).

1. Parent-child sessions: The sessions with the hated parent are designed to bring the parent and child together more pleasantly in a less emotional environment and help the parent learn their parenting skills better. On the other hand, the sessions with the favoured parent are designed to provide at least an explicit consent to ensure the child's relationship with the other parent.
2. Individual therapy for parents: The therapy for the parents is designed to enable achieving the divorce, in a way that they can break up without conflict and find new roles for themselves. It is important for the hated parent to be aware of their behaviours causing the child/ren to reject them. On the other hand, it is important for the favoured parent to allow and encourage the other parent's relationship with the child and for the court to support the message that any behaviour of sabotaging this relationship will not be tolerated.
3. Mediation between parents: Finding a way to reduce conflict in these cases and to avoid including the child as the third side of these conflicts are important aspects of the treatment. Parents in these cases usually cannot respond flexibly to the changes in the program or other crises with children. In a way, the mediator becomes the third person instead of the child.
4. Communication between therapists: Communication between the therapists helps them overcome their prejudices about "being a party". For the child, it is important that the therapist communicates with the alienated parent or alienated parent's therapist, if any, is especially important, so there are some validity tests about the child's complaints.

Work carried out by case managers varies according to the service area. Case management is the process of planning, searching, and monitoring services to be carried out by different institutions for the benefit of applicants. Often, there is an institution that takes on responsibilities for the applicant and there is a case manager in this institution, who organizes services, advocates,

investigates and inspects resources. The process makes organizing the work possible for most social workers in different institutions, to serve applicants through professional teamwork. In this way, the development of the applicants who need the services of various units and institutions is monitored (Zastrow, 2013). Social workers can come across PAS in many different environments, such as family courts where contentious divorce lawsuits are heard, social service organizations, schools and healthcare institutions (Baker & Andre, 2008).

### **Holistic Approach**

Child abuse is related to multiple disciplines in terms of causes and consequences. Medical treatment and care, mental health services, legal processes and social work practices need to progress in coordination. Hospital-based, multidisciplinary teams have been created to meet the legal, social support, protection and medical and psychiatric treatment needs of the abused child through a holistic approach (Bell, 2001). Hospital-based teams emerged in Türkiye in the 2000s, and the first hospital-based Child Protection Centre was opened under Gazi University. In this regard, the core team of the centre is recommended to include at least one full-time social worker, clinical psychologist, nurse and secretary and for each case, the centre should work in cooperation with specialists in paediatrics, forensic science, adult mental health and diseases, and paediatric surgery (Dagli & Inanici, 2011).

In the literature, studies on PAS include the following: the historical process of PAS (Kim, 2011), psychiatric evaluation approaches for children in cases of PAS (Ellis, 2008), mental disorders approach to PAS (King, 2002), current debates on whether PAS is a syndrome or a disorder (Richard A. Warshak, 2001), family therapy approach to PAS (Gardner, 1999), definition of PAS (Sommer, 2004), long-term effects of PAS on children and youth (Baker, 2005), PAS evaluation by Family Courts (Kelly & Johnston, 2001) and experiences of targeted parents (Torun, 2022). Intervention in PAS cases has been addressed in the dimensions of individual or family psychiatric treatment and therapy approaches.

This study aims to reveal the characteristics of the cases that meet PAS criteria and the similarities between the cases, as well as to present an example of intervention with case management as a holistic approach to solving the problems in child/ren as a result of the alienation of him/her by one parent against the other during the divorce process. The goal is to create a road map for professionals working with children and families in the fields of health, social work and law when working with PAS cases.

### **METHOD**

The following four cases are examples of the situations that were assessed at a multi-disciplinary Child Protection Centre consisting of paediatricians, child and adult psychiatry specialists, forensic

science specialists, psychologists and social workers, for which a social worker who has an educational background of family and marriage therapy is the case manager, and where the evaluation reports affect the Court decision.

The cases presented here are cases referred by the Courts and where there is a conflict between parents. Among the 21 cases referred to the Child Protection Centre by the Family Courts between 2016 and 2017, 6 meet the criteria in the definition of PAS by Gardner (1998); thus, the study cases have been chosen among these and examined retrospectively. In two cases (Case 1 and 3), the child/children have been alienated by the mother from the father, and in the other two cases (Case 2 and 4) it has been by the father from the mother. Another characteristic of these cases is that the evaluation reports have influenced the Court and ensured a result in favour of the children.

The cases have been analysed to better understand the structure of divorced families in which alienation from one parent is present, and data on the following variables have been obtained:

1. Duration and history of the marriage,
2. Age, number, gender of the children,
3. The process of alienation,
4. Gender of the alienating and targeted parent,
5. Effectiveness of the holistic approach and reporting in the elimination of alienation.

Case contents are the reason for referral to the Child Protection Centre, the history of marriage and separation/divorce, socio-demographic information, the Child Protection Centre evaluation process and the court's decision. Parent and child interviews, family interviews, referral for psychiatric evaluation, communication with the court, and writing the report were carried out by the case manager.

Evaluation reports submitted to the court are perceived by families to be biased. For this reason, it does not seem possible for families to give consent to the case reports. In addition, there is no specific information and definitions about people in the presentations.

### **Case 1**

In accordance with the interim decision in the contentious divorce lawsuit being heard in the Family Court, due to the reasons “whether there is a sexual, physical or emotional abuse towards the mutual children by the father or mother” and “the children not wanting to meet with their father”, the parents and children have been directed to Child Protection Centre upon the request so that they can establish personal relations.

**Marriage and separation process:** The father (aged 44) has a bachelor's degree. Their marriage is a conflicting process. The parents decided to get counselling for the solution to the problems, but they succeeded in only one. He thinks that his wife and her family cause marriage problems.

He had left the home fifteen months before he visited the Child Protection Centre. After the divorce, the children's custody was given to the mother. The father has not been able to see their children since he left their shared home. He went to the home many times, accompanied by police officers and court specialists and tried to take the children through enforcement but failed to do so. He has not seen his children for a year. The mental status examination reported that he has no major psychiatric disorder.

The mother (aged 34) has an associate degree. She states that she had been subjected to physical violence from her husband during the marriage, but she never applied for a report showing her being beaten to prevent her marriage end. The mother thinks that there has never been healthy communication between her children and their father and that it will affect the children's psychology if they stay with their father after the separation. She states that their father does not have the right to see the children due to the conflicts and communication problems and that she emotionally prepares the children for the meeting before their father comes to take them, but their father comes to take the children through enforcement and she thinks that the official reports kept by the authorities are biased. In the mother's mental status examination, it is concluded that she has no major psychopathology.

The couple have two children aged 10 (girl) and 4 (boy) at the time of application. In the meetings, the girl states that her father has insulted her, used abusive words, never committed violence, but his behaviour has frightened her (such as looking at her with his eyes wide-open), he has acted coldly and she has never felt his love, she is angry at him because he abandoned them and he is constantly speaking ill of her mother.

Although not asked, she says that what she tells is her own thoughts, her mother has not instilled anything in her, "her mother has no influence in her not wanting to see her father" and "this is her own decision". She emphasizes that she does not like her father and is happy with her mother, calling her father "that man". In the mental status examination, it is seen that she is mentally normal, although she has been exposed to emotional abuse due to the things she has experienced. Her brother is not willing to participate, therefore he has not been forced to do so; and no pathological physical examination finding was made.

#### **Child Protection Centre's Evaluation:**

A total of ten interviews were conducted with the mother and father at the Child Protection Centre, including mother-child and father-child interviews. The parents have been referred to a psychiatric

clinic. Meeting with the children has been conducted to determine whether they were exposed to any abuse by the father. In the child psychiatry clinic, an evaluation was made through play therapy. The mother and father could not be interviewed together at the Centre. In relation to the parents' approach during handing over the children to the father before being referred to the Centre, observations and evaluations of the court experts have been received. All the evaluations have been reported by the case manager social worker. The evaluations in the report are as follows:

- In the girl's feelings about the father, there is no content regarding her positive or negative experiences. Her emotional expressions, all of which have negative content, are reflections of the mother's anger towards the father and her speech consists of expressions internalized from the mother's mouth.
- It has been observed that children living with their mothers are exposed to emotional abuse by their mothers, and **they are alienated** from their fathers.
- Despite the fact that both parents live in the same city and their father's efforts to establish healthy communication with their children, the children are forced to live as a single-parent family. This approach is evaluated as **the children are being emotionally abused**.
- Non-constructive attitudes and behaviours of the mother emotionally affect the children and hinder their healthy development. Thus, it is suggested that the children stay with their father, the mother receives individual therapy to change her passive interventionist approaches and attitudes defined as emotional abuse, compelling the children to live with a single parent and then both parents receive couple therapy so that they can communicate with the children in a healthy way.

**Result:** Based on the report submitted to the Family Court, it is decided that the children should regularly meet with their father and stay at his place.

#### **Case 2:**

Within the scope of the Contentious Divorce lawsuit (due to the Serious Breakdown of the Marriage) being heard at the Family Court, a referral has been made to Child Protection Centre to improve and correct the communication of the mutual children with their mother.

**Marriage and separation process:** The mother (aged 33) is a high school graduate. There has been a conflicting relationship between the spouses during the marriage. The mother states that she has been subjected to emotional and physical violence by the father and his family. After 13 years of marriage, the mother had to leave the house and returned to the city where her family lived. They started to live *de facto* separately five years ago. The couple have two sons aged 11 and 7 at the time of application.



The father (aged 43) is a primary school graduate. He lives with his children and his parents. Temporary custody of the children was given to the mother when he filed for divorce. During that time, the father would take the children to his home during the holidays. One time, when he took the children to his home, the little boy told the father that the boy's 14-year-old cousin, the son of his aunt, had touched the boy and rubbed himself against the boy. Thus, the father did not give the children back to the mother, made a notification to the Ministry of Family and applied for custody; then, temporary custody was given to the father. Although the mother comes from another city in order to see the children, she has not been able to see them for two years.

The mother states that since the custody was given to the father, the children have gradually started to become distant from her and acted angrily and violently towards her, they might be influenced by their father and his family, she is ready to do whatever she could in order to make their relationships as they were before, and her aim is to establish a healthy relationship with her children. She also expresses that her older son especially acts aggressively and angrily towards her, is constantly on the phone with the father while he is with her, refuses to eat because his father is not with him; he is not sleeping in the same place as her, refuses to communicate and is trying to direct his young brother, and the small boy imitates his old brother. The mother states that she does not believe the allegation that her nephew sexually abused her little son and that the father made such an allegation to take custody of the children.

The mental status examinations of the mother and children who have been directed to the Child Protection Centre were made; no psychopathology is found. Play therapy has been applied to children. No mental status examination was made for the father.

Parent-child meetings have been held separately with the parents in the Child Protection Centre. The mother has started to come to the city where the children live with their father and spend the weekends with the children in a nearby hotel. The mother's communication with the children has been focused on the wrong behaviours and expressions have been emphasized based on her own stories, homework exercises have been given, and sources have been proposed for healthy communication with the children. The father has been given homework not to comment and evaluate their mother in the presence of the children, but it is observed that he has not fully complied with.

#### **Child Protection Centre's Evaluation:**

At the Child Protection Centre, the case manager has separately met with the father, the mother living outside the city and the children, resulting in seven interviews in total. The parents and children have been referred to a psychiatric clinic for mental health assessment. The teachers at the school where the children attend have been contacted. A schedule has been created so that

the mother can regularly meet with the children and it is suggested she stay together with them when she comes to the city. The time the mother spends with the children before returning to her city has been assessed and psychoeducation has been provided to her to establish healthy communication with the children. A report containing all the interviews and evaluations has been prepared by the case manager and submitted to the Court. The evaluations in the report are as follows:

-The contentious court process has negatively affected the children's mental health and it is defined that the children have been involved unnecessarily in the court and divorce process too much, playing an intermediary role between the mother and father, this role has had a negative effect in terms of child development and mental health and the father and mother should be able to compromise in a union of balanced attitude and approach in order to heal this negative effect.

-It is emphasized that the negative criticism and expressions by the children about their mother are the result of anger, longing and rage caused by the fact that she left them and they could not meet with her for a long time, that the father's feelings towards his ex-wife have been reflected in the children and that the children are alienated from their mother. Thus, it is specified that frequent and regular meetings between the mother and children and her efforts in establishing healthy communication with them give hope for a healthier process.

**Result:** The court has given custody to the father and decided to have their children meet and stay with their mother on a regular basis.

### **Case 3:**

Pursuant to the interim decision of the contentious divorce lawsuit at the Family Court, the parties and child have been directed to Child Protection Centre in order to be interviewed and evaluated to see whether there is negligence in the nature of child abuse.

**Marriage and separation process:** The father (aged 34) and mother (aged 29) are high school graduates. The couple broke up in the eighth month of the marriage, made up six months later, and then broke up for the second time after six months of being together. The mutual child was born when they were separated, the child was six months old when they were together again and one year old when they broke up again. The child, who was five years old when the lawsuit was initiated, has been directed to stay with the mother in line with the court decision and the days and times have been assigned so that the father can see the child. The father has allegations that he has been prevented from seeing the child while the mother states that the father has not come to see the child.

The father states that he saw bruises in various places of the child's body and when he asked the child about them, he received the answer that the mother had beaten the child; thus, he has issued

a complain stating the mother beats the child and he wants to take the custody on the grounds that the child is not safe there. According to the mother, the father makes these claims in order not to provide the alimony. The mother took the child to the hospital because the child fell while playing at home. In the hospital report, it is stated that the bruises occurred in the child's body as a result of falling.

The Court has referred the child to the child mental health clinic. In the examination, no finding suggesting physical abuse or negligence towards the child is found (by supporting the physical examination findings). In the report from the Institute of Forensic Sciences of Istanbul, it is stated that the bruises may have occurred due to an action of blunt trauma and that whether it was intentional cannot be determined medically. Both parties claim the custody.

Since there are reports holding different opinions, the couple and child have been directed to the Child Protection Centre.

**Child Protection Centre's Evaluation:**

At the Child Protection Centre, the case manager has separately met with the parents and the grandmother living with the father, leading to five interviews in total. To assess the allegations of abuse or neglect, interviews have been conducted with the child through pictures and a social study has been held in the environment where the child lives. Mental status examinations of the child and parents have been carried out in psychiatric clinics. The parents have been provided with three-session psychoeducation on approaching children and healthy communication. All evaluations regarding the child and parents have been reported by the case manager and submitted to the Court. The key opinions in the evaluation report are as follows:

-In the mental status examination for the mother, no major psychopathology is found. In the mental status examination for the father, it is seen that there is no major psychiatric disorder and no psychiatric obstacle for custody. The child's intelligence is roughly at normal levels. In the child's thought contents, there is love for the mother, desire to be with her and the idea that the father and the father's mother are bad people and do not love the child.

-The fact that the physical examinations show the child has frequently had accidents as a result of falling does not suggest an abnormal situation, considering the child is very energetic and it is this stage of the child's growing. However, when the father and grandmother often take the child to the hospital due to new and old bruises and try to get a report, these behaviours affect the child a lot. The father claims that the child is not being sent to school, but it is confirmed from the school management that the kindergarten student attends school regularly. To get custody, it is claimed that the child is subjected to negligence and abuse by the mother, but no finding supporting this claim could be obtained in the evaluations. The attempt to alienate the child from the mother is

unsuccessful, but not seeing the father for three months after the birth and then the protection measure taken against the father and preventing him from meeting with the child have caused the child to be alienated from the father.

**Result:** In line with the evaluations and recommendations based on the five-month period in the Child Protection Centre, the Court has decided that the parents should get an education so that they can communicate properly with the child and with each other. It is known that the mother has been able to communicate with the grandmother and that the child is no longer taken to hospitals by the father. The custody has been given to the mother and the father regularly meets with the child.

#### **Case 4:**

Due to the contentious divorce lawsuit at the Family Court, the parties and mutual children have been directed to the Child Protection Centre in order to address the issue in a holistic way, upon the request to evaluate the issue in terms of mental health and parenting skills and to prepare a report on personal relationship and custody.

**The period before breaking up, the marriage period:** The father (aged 36) is a university graduate, the mother (aged 30) is a high school graduate. The couple who married in 2001 started to live separately in 2013. Two girls (aged 10 and 8) were born from this marriage.

After the conflicts in the marriage, the mother took the children and left the house, the couple made up after 9 months and then the mother attempted suicide. The mother moved to her family, living in another city, and the children stayed with the father and the father's mother. The father filed for divorce, temporary custody has been given to the father and the mother has been allowed to see her children during the daytime on weekends in the city where they live. The father demands full custody and wants the mother to have a personal relationship with the children after her psychiatric treatment is completed; and the mother states that she should take care of her children, not their grandmother and therefore wants to have custody.

In the meetings accompanied by the court expert, the observations about the relationship between the mother and children are that the children have had positive emotional communication with their mother, but they start to cry before they are handed over to their father, and they do this behaviour in order to hide from their father the fact that they have a pleasant time with their mother.

#### **Child Protection Centre's Evaluation:**

At the Child Protection Centre, the mother and father have been evaluated separately and the mother-child and the father-child have been assessed in a play environment. The children's interactions with the mother and father have separately been assessed in the play environment. In addition, the case manager has interviewed the mother's parents visiting the Child Protection

Centre together, five times in total. The teachers have been contacted at the school where the children attend. Mental status examinations of the parents and children have been carried out at a psychiatric clinic. The case manager has provided psychoeducation on parenting skills to the parents. All the evaluations and interviews have been reported by the case manager and submitted to the Court. The main evaluations in the report are:

-In the mental status examinations, no pathology affecting the custody for either parent is found. In the evaluations with the older child through play, it is thought that she has witnessed the conversations between the adults (father, father's mother, uncle) whom she lives with, her thoughts have been affected by the views of these adults and she has had to take a side during the divorce. In the evaluations with the young child through play, it is thought that the child has been instilled against the mother by the adults she lives with, during the time she is away from her mother.

In the Child Protection Centre's evaluation report, it is stated that both children have been instilled against the mother by the father and his family who they live with, and the children, especially the older one, are alienated from the mother. Thus it is recommended that personal relationships between the children and parents should definitely be created and sustained, and the children and parents should receive counselling in order to protect the mental health of the children and to ensure the parents communicate with the children properly.

**Result:** The children's custody has been given to their mother and it is known that they regularly meet with their father to stay at his place every fifteen days.

## **DISCUSSION AND CONCLUSION**

In the cases in this study, there are two mothers who have alienated the children from the fathers and two fathers who have alienated the children from the mothers. The children alienated from the mothers are an 11-year-old boy, a 7-year-old boy, a 10-year-old girl, and an 8-year-old girl. The children alienated from the fathers are a 5-year-old boy, a 4-year-old boy, and a 10-year-old girl. One of the mothers who has alienated the children from the father is a high school graduate and the other is an associate degree graduate. One of the fathers who has alienated the children from their mother is a primary school graduate and the other is a university graduate. The longest marriage among the parents is 13 years long (Case 2) and the shortest is 5 years long (Case 3).

In PAS cases, parents should be examined by an adult psychiatrist, who should consider if psychopathologic conditions are previously present in either parent. Furthermore, parents need help to improve their parenting capacity (Torun, 2011). In this study, no psychopathology was found in the parents and one couple (Case 4) was referred by the Court for evaluation of parenting capacity.

For parental alienation to occur, the following factors must be present: 1) The child actively avoids, resists, or rejects the relationship with the targeted parent; 2) The child's relationship with the targeted parent was previously positive; 3) There is no evidence of child neglect and abuse, or shortcoming in terms of parenting by the targeted parent; 4) More than one alienating behaviour is exhibited by the alienating parent; 5) The child exhibits behavioural symptoms of alienation (Baker, 2020). In Case 1, the girl rejects and avoids the relationship with the father. In Case 2, the older child avoids and rejects the relationship with the mother. In Case 1, Case 2, Case 3, and Case 4, the children's relationship with the alienated parents was previously positive. In Cases 1 and 3, there is no evidence regarding the allegations of child neglect and abuse claimed to have been inflicted by the alienated parent. In the cases, more than one alienating behaviour was exhibited against the alienated parents, such as bad-mouthing (Case 1), allegations of abuse (Cases 1 and 3), and allegations of mental illness (Case 4).

In some cases, children or the alienating parent may make serious allegations against the targeted parent, such as violence, abuse and stealing, but these allegations are not supported by evidence (Gardner, 2004). In the cases in this study, the alienating parents made allegations of abuse and neglect against the targeted parents (Cases 1 and 3), yet they are unsupported.

PAS is a type of emotional abuse that occurs most often in child custody disputes after divorce. Research shows that PAS occurs in one in every five custody-related legal cases, and six percent of PAS cases are of the severe type (Johnston et al. 2005). In our study, PAS criteria were found in six of the 21 custody-related legal cases referred to the Child Protection Centre.

One of the PAS criteria defined by Gardner (1998) is that the child uses expressions that do not reflect his/her own experiences toward the alienated parent and are not appropriate for his/her developmental characteristics. In this study (Case 1), the girl has been seen to use expressions toward the alienated father which are inappropriate for her age and about issues she has not experienced.

Once more, according to Gardner (1998), another PAS criterion is that the child unconditionally supports the alienating parent and that hostility toward the other parent has spread within the extended family. In cases 1, 2 and 4 in the study, the children unconditionally defend the alienating parent and the extended family members have been hostile toward the alienated parent.

In the first years of defining PAS, mothers, to whom custody was given because they were presumably the primary caregivers, were seen to be the alienating ones. However, with more research, it has appeared that both parents can be alienators (Gardner, 2001). Similarly, in our study, both the mothers and fathers alienated the children. In all four cases in this study, the person alienating the child from the other parent is the parent with custody. In two cases (Case 1

and 3), the child/children have been alienated by the mothers from the fathers, and in the other two cases (Case 2 and 4) it has been by the fathers from the mothers.

One of the most crucial issues with PAS is the victimization of the other parent and the child as a result of misdiagnosis and misreporting. One of the main reasons for this is that the child is brought to the clinic for examination by the alienating parent. Thus, the targeted parent may initially be perceived as guilty. To prevent this wrong approach, both parents should be evaluated separately and seen together. Considering that a pre-existing psychopathologic condition might be present, both parents should be examined by an adult psychiatrist, and information should be obtained from people close to the family (Torun, 2011). In the cases in this study, the parents were evaluated separately by an adult psychiatrist, and information was gathered from the people who were close to the family and witnesses to the process (such as the mother's father, the father's mother, the teacher of the children, the court experts) at the Child Protection Centre.

It is clear that the multiple-therapist approach will be costly, since this process takes the time of several mental health professionals. In this regard, case management may be the recommended method for contentious lawsuits as they are likely to come before the court repeatedly. Thus, the cost of the case management method should be compared to that of repeated lawsuits, considering both the financial cost and the emotional consequences on the child (Lund, 1995). In this study, the social worker, who is the case manager, reported the evaluations of different specialists together with her own evaluations and submitted them to the Court. In all four cases, the Courts took decisions in favour of the children in a short time, in line with the recommendations in the reports.

Whether PAS is a syndrome or just alienation is not decided. The ongoing discussions about it do not change the fact that there is a clinical situation affecting the children and parents. This problem leads to circumstances that can be triggered by psychological dynamics rising in crisis-causing situations such as divorce, and that require help/intervention. It is important in terms of custody that the problem is known and recognized by professionals in the health system, legal system and social service system. Parents who alienate the child against the other parent during custody claims sometimes perceive it as a victory that must be won at the risk of impairing the child's mental health. The children can develop serious mental problems in this process and later in their lives. This study concluded that in Case 1, the children were subjected to emotional abuse by their mother; in Case 2, the contested divorce process negatively affected the children's mental health; in Case 3, the child was taken to different health institutions due to the claim that the child had been subjected to neglect and abuse by the mother, and taking the child to unnecessary health checks despite there being no problem was also considered abuse; and in Case 4, the children who were alienated against their mother should receive counselling to protect their mental health.

From the perspective of the alienated parent, this parent also deals with many material and psychological problems. With the increasing awareness and sensitivity of professionals toward PAS, appropriate interventions and assessments will be made and the victimization of children and parents will be prevented (Torun, 2011).

The cases in this article are the cases where the case manager is a social worker who is a team member of a hospital-based Child Protection Centre and who has an educational background of family and marriage therapy. In the process, the Child Protection Centre's social worker has conducted the parent-child sessions, the mental health examinations of the parents and children, the referral to individual therapy, and the mediation between the parents, enabled communication between the therapists and provided all the evaluations as reports to the court.

In PAS cases, separate works carried out with a multi-disciplinary, holistic approach by multiple professionals can be conducted at a low cost with the coordination of a social worker who is the case worker. The reports submitted to the courts will include the evaluations of all the professionals in the team and will transparently and clearly highlight the team's common decision that is made in line with the child's primary benefit. The reports prepared in this way will affect the decisions of the Court and the victimization of children and parents will be prevented.

#### **ETHICAL INFORMATION ON RESEARCH**

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Ethics committee approval has not been received because it was worked with the cases before 2019.

#### **CONFLICT OF INTEREST**

There is no potential conflict of interest in this study.

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