

Krivacska, J. J., Psy.D. (1989). [Review of the book *The Parental Alienation Syndrome and the differentiation between fabricated and genuine child sex abuse*, by Richard A. Gardner]. *Issues in Child Abuse Accusations*, 1(1), 55-56.

Title: *The Parental Alienation Syndrome and the Differentiation between Fabricated and Genuine Child Sex Abuse*
Author: Richard A. Gardner, M.D.
Publisher: Creative Therapeutics. © 1987

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155 County Road
Cresskill, NJ 07626-0317

Description:

Dr. Richard Gardner, a well known child psychiatrist with a specialty in child psychotherapy, has brought his years of experience in child custody cases to this work. Dr. Gardner first traces the history of the adversary system (our societal sanctioned means of conflict resolution) with particular emphasis on the evolution of child custody litigation. He outlines the gradual shift in child custody litigation from the tender years presumption (presumption that unless the mother was demonstrably unfit, the child is better off living with the mother) to the more sex-neutral position of best interest of the child presumption.

The evolution of the latter concept has, along with a new tendency toward granting joint custody, reduced the likelihood that custody will be automatically granted to the mother. Within the last decade, Dr. Gardner reports an ever increasing number of custody litigations which involve extreme and irrational levels of hatred and vilification of the non-custodial parent (at the time of the litigation) on the part of the child.

Labeling this the Parental Alienation Syndrome (PAS), Dr. Gardner describes four factors which contribute to its presence: (1) Brainwashing of the child by the mother; (2) Subtle and unconscious parental programming; (3) Factors arising within the child; and (4) Situational factors. Dr Gardner attributes the emergence of PAS to the fact that mothers no longer are automatically granted child custody and fearing the loss of their child, engage consciously and unconsciously in activities and behaviors which engender the PAS.

An increased awareness of sexual abuse among children dating to the early 1980s has resulted in a new weapon for such mothers to use in the custodial wars. Mothers have learned that a sexual abuse allegation results in the immediate attention of the court and usually means immediate cessation of visits with the non-custodial (now accused) parent. Dr. Gardner notes that pre-1980, it was generally accepted, and correctly so, that children rarely fabricated sex abuse allegations because of their lack of knowledge of such encounters.

This is no longer the case given the frequency with which child sexual abuse is discussed and described in the media, greater sexual explicitness on television (particularly the soaps and cable), and the introduction of sexual abuse prevention programs which provide students with all of the information they may need.

Dr. Gardner goes on to describe the Sex Abuse Legitimacy Scale (SAL Scale) which he uses in his evaluations of cases of sexual abuse allegations. The criteria delineated may be applied to three individuals: the child, the complaining parent and the accused parent. In each case, three levels of validity are noted: Those which, based on his experience, are very valuable as differentiating

criteria; those which are moderately valuable; and a third category of criteria which are of low (but potentially higher) value in differentiating true from false allegations.

Dr. Gardner goes on to discuss aspects of the clinical evaluation including who should be seen, the length of the evaluation, use of audio or videotapes, issues in the interview with the child including data collection techniques, use of drawings, dolls and, in particular, anatomically correct dolls. Dr. Gardner stresses the importance of not serving as a contaminant in the process, of remaining objective, and not introducing aspects of the alleged abuse to the child prematurely. Of special importance, the greater the interim between accusation and evaluation, the greater the likelihood that contamination will occur relative to the child.

In the final two chapters, Dr. Gardner turns to interview techniques for judges who become involved in custody and allegation cases and to his recommendations for changes in the legal system and different therapeutic approaches that may help prevent the PAS and false allegations of sexual abuse. He takes up the controversial position in which he suggests a return to the presumption that the mother is the preferred parent in child custody cases. Dr. Gardner recommends custody decisions be based on a determination of which parent the child has the strongest, healthy psychological bond with. This would be essentially a sex-blind decision, but one which would, more typically result in custody being given to the mother. As a child gets older and environmental factors become stronger, this presumption would become weaker.

Finally, Dr. Gardner presents his views on child abuse reporting laws. Expressing concern about the counter-productive results of requiring therapists to report suspicions of abuse, he proposes that they be exempt from such reporting as long as the individual or family remains in and is benefiting from treatment. Dr. Gardner expresses his concern that the current state of affairs penalizes those who voluntarily seek out treatment and actually increases the likelihood of abuse continuing. He additionally calls for penalties to be levied against those who would make malicious or frivolous accusations of sexual abuse.

Comments

Discussions of false allegations of child sexual abuse have become controversial in recent years and one is not surprised by the reactions reported by Dr. Gardner to his attempts to share his views with others. Despite such attempts at limiting access to the data, Dr. Gardner has boldly published a book detailing the results of his experiences with evaluations of false allegations of child sexual abuse. For this, he is to be commended. He provides a sound and reasoned foundation for the emergence of the Parent Alienation Syndrome and an increase in the number of false allegations of sexual abuse.

Professionals involved in child custody litigation in which either the PAS or an allegation of sexual abuse is present will welcome the formulation presented by Dr. Gardner as one which probably crystallizes many of the experiences and thoughts they have had themselves. His detailed description and numerous examples as he describes each of the criteria listed in the Sex Abuse Legitimacy Scale are invaluable. The Scale additionally provides a structure by which an evaluator may probe for information or structure the data which has been collected.

Dr. Gardner's scale and description of the PAS represent one of the first attempts to objectify the process by which one can distinguish true from false allegations of abuse. Though describing a scoring process by which an evaluator may determine whether or not abuse was real, the real value of this scale lies not in the final score, but the information collected along the way. In fact, the final score obtained may be unreliable for at least two reasons. First, there is no report of the independent measure against which the accuracy of the scale was measured and one can only presume it to be Dr. Gardner's clinical judgment. Secondly, psychometrically, the placement of

criteria into three categories (very, moderately or of low value) and attempting to quantify the result is not sound. Placement of some criteria can be questioned and appears to be based on Dr. Gardner's clinical experience rather than on any empirical data. For example, several criteria are noted to be moderately useful with the caveat that the divorce itself may stimulate the occurrence of the behavior (such as regressive behaviors, psychosomatic symptoms, etc.). Yet, it would seem that sleep disturbance would fall into this category as well and yet that criteria is placed in the low value category. Additionally, with such items, if the criteria is met, a determination must then be made as to whether the behavior is due to the divorce or actual abuse. The scale does not allow for this. Furthermore, there does not appear to be a good rational basis for equating criteria applied to the child with those applied to adults in the case. Child centered criteria would appear to have greater significance. Perhaps the most significant concern relative to the SAL scale is the potential for misuse and over-interpretation.

Essentially, the information presented by Dr. Gardner in both his book and with respect to the SAL scale represents a step forward in the pursuit of the truth in child custody cases. In helping to illuminate some of the issues in these cases, this book has been invaluable. In helping potential evaluators of sex abuse allegations, the SAL scale is a useful tool by which to structure the evaluation process and assist the evaluator to make discriminations regarding the information that is being collected.

Reviewed by James J. Krivacska, Educational Program Consultants, Milltown, NJ 08850.