Visitation Resistance 1

News you can use
April 12, 2017

Matthew J. Sullivan, Ph.D.

Statement of Problem

- Presenting Problem: Child resisting or refusing contact with one parent (usually non-custodial parent)
- Rejected parent seeking contact
- 25% cases remain high-conflict 2-3 years post-divorce;
- 12% cases where children resisting contact;
- Up to 20% in disputed custody cases.
- Changes in cultural and legal presumptions of shared parenting

Why Are These Cases So Important?

- Relatively low frequency, but on the rise;
- They take up an unusually large percentage of the Court’s time and parents’ resources;
- Outcomes for children can be very poor;
- Especially as children get older, it can be very difficult to make effective changes.
- We have tried to fit the problem into our traditional interventions (e.g., litigation, individual therapy); but we need to fit the intervention to the problem. We need to get creative and work outside the box.
Syndrome to System

Parental Alienation Syndrome

- Linear causal, reductionistic
  - Focus on alienating parent
  - Lack of focus on other factors
- It is NOT a Syndrome
  - Evidentiary challenges

Hybrid Cases

- Mixed case with both parents engaging in alienating conduct or having some responsibility for breakdown in relationship with one parent.

- Examples:
  - Action that exacerbates the conflict
  - Ruthless rigid parenting
  - Lack of warm involvement
  - Parentification – role reversal, enmeshment
  - Mental health or substance abuse issues
Child Alienation

  • Not a syndrome
  • Not a ‘mental disorder’ of the child
  • Often not the fault of ‘alienating’ parent
  • Focus on “alienated child” and consider
  • Conduct of both parents, interparental conflict
  • Vulnerability of child
    • Age; temperament; Anxiety, dependency

Resistance Refusal Dynamics

• Addition of extra-familial factors
  • Legal context - litigation
  • MHP – the helping hand strikes again
  • Systems change over time
    • Problem with presentation in the Court, child custody evaluation

Factors contributing to & sustaining parent-child contact problems

Adapted from Kelly & Johnston, 2001
The voice of the child

• "Although a child's wishes, particularly the wishes of a child of S.'s age (13), should certainly be considered by a court prior to making an access order, once the court has determined that access is in the child's best interests a parent cannot leave the decision to comply with the access order up to the child."

  • Godard v. Godard, 2015 ONCA 568

Current Perspectives on Intervention

1. Not screening for substantiated domestic violence, child abuse/neglect, substance abuse, severe mental illness.
2. Only focus on Favored Parent
3. Only focus on Rejected Parent
4. Only focus on the Child

Grave Errors
Interventions

• Internet survey of 1172 Mental Health and Legal professionals indicates most frequently recommended intervention for alienated child is individual therapy for child and for parents (Bow, Gould & Flens, 2006).

CHILD THERAPY

• Difficulty if child resists
• Role of Parents in Therapy
• Harmful therapy

REUNIFICATION THERAPY

• Focus on Strained/Estranged relationship
• Child likely to resist
• Does not address relationship with favored parent
• Does not address the coparenting conflict/dysfunction
• Not systemic solution
FAMILY SYSTEMS INTERVENTIONS

• Well trained, experienced MHP (sometimes team)
• Work with entire system
• Sessions sometimes dyad, sometimes individual, sometimes entire family
• Over time focus of intervention changes
• Requires patience, especially on Rejected Parent’s part

Essential Components

• Comprehensive understanding and formulation
  • Sometimes through intervention

• Inclusion of all relevant individuals in the intervention
  • Need that mandate - OCB requirement

• Coordination of interventions
  • Teams don’t run themselves – splitting rampant

• Case Management
  • Linkage to the authority of the Court

A Family Systems Model:

• Family-focused intervention presented in Johnston, Walters & Friedlander (2001, FCR; 2010, JCC)
• Careful assessment
• Stipulation or Court Order/Service Agreement
• Therapeutic work with Aligned Parent (AP)
• Therapeutic work with the Rejected Parent (RP)
• Therapeutic work with the Alienated Child (AC)
• Therapeutic work with selected combinations of family members
Additional Considerations

1. Aligned parent must release the child
2. Work with rejected parent to reconnect
   • Reconnect does not necessarily mean contact
   • Not just therapy, titration of positive experiences
3. Coparenting work is essential – goals depend on relationship
   • Parallel – managing/reducing conflict
   • Implementing shared legal custody

Progression Of Interventions

• The interventions progress systematically from:
  • supporting the parents’ ability to solve problems and make decisions;
  • to providing the minimal amount of support that is necessary when parents cannot exercise those skills and abilities;
  • to increasingly coercive interventions that attempt to “motivate” parents to comply with mandates from authority
Progression of types of interventions in High Conflict

- Information to Parents: ISSUE RESOLVED
- Therapy: ISSUE RESOLVED
- Coaching: ISSUE RESOLVED
- PC/Case Management: ISSUE RESOLVED
- Focused Intervention: ISSUE RESOLVED
- Court Orders (Behavior): ISSUE RESOLVED
- "Coercion"/Consequences: ISSUE RESOLVED

Residential Family Interventions

- Overcoming Barriers: overcomingbarriers.org
  - Multi-family camp
  - Single family intensive
- Transitioning Families: transitioningfamilies.com
  - Single-family Intensive
- Family Bridges: warshak.com/services/family-bridges.com
  - Single-family intensive
  - Based on change of custody
INTENSIVE WEEKEND

• Entire family Court-Ordered
• Screened for abuse, drug and alcohol, mental health issues
• Single family goes to site with clinical team
• 3 days, 2 nights of education, intensive therapy, social activity
• After care developed and agreed upon before going home.

REALITY-CHECK

Interventions are often neither practical nor realistic

• Time, money, human resources can be greater than possible in particular cases
• Intervention with and without the benefit of a Custody Evaluation
  • Must know the relevant dynamics
• Intervention without the benefit of Court oversight - accountability and support

Untreatable Cases

NO SUCCESS

• Often the cases in this category involve
  – DV
  – Severe MH problems
  – Intractable substance abuse
  – Child Abuse
  – Severe Alienation
  – Child vulnerability
CHANGE CUSTODY TO REJECTED PARENT

- When all other interventions have failed
- The alienating behavior rises to abuse
- Work separately with the favored parent
  - No contact with the favored parent for specified period of time
    - Need to enforce
    - Provide necessary support to child
    - Require specific behavior for resumption of contact
    - Requirements for resumed contact to continue
  - Intensive transitional program

REJECTED PARENT LETTING GO

- What are the considerations of sole custody with the favored parent?
  - In the child, favored parent, rejected parent, larger system
- How do you implement this decision?
  - Components of ritual
  - Ongoing work with the child
  - Expectations of the favored parent

Some Key Points

- Complex family problems most often require work with all parties and children. While the rejected parent may be the most willing and eager to participate in therapy, it is imperative that the favored parent also be included.

- Coordination among treating professionals is key. It’s not unusual for divisiveness in the treatment team to mirror the divisiveness in the family.

- Many families have already been engaged in some kind of therapeutic medium. This is a mixed blessing.

- Sometimes work is aimed at preventing resistance to time with a parent from becoming refusal to spend time.