AN ECOLOGICAL (MULTIFACTORIAL) ASSESSMENT TO RESPOND TO AND ASSESS THE BEST INTERESTS OF POLARIZED CHILD EXHIBITING RESIST-REFUSE DYNAMICS - Garber Proposes . . .

11 QUESTIONS TO BE ANSWERED BY:
1)   CHALLENGING CONFIRMATION BIAS,
2)   USING INDUCTIVE REASONING,
3)   **FOCUSING ON DYNAMICS RATHER THAN DIAGNOSES** FOR THE POLARIZED CHILD

With resist-refuse dynamics, Garber's view of family dynamics can be problematic – that is the idea that "everyone has a part to play," that views parental responsibility as equal or shared - unless you differentiate the levels of the severity of resist-refuse dynamics for a given family.

When resist-refuse dynamics are severe, such as with domestic violence, describing a protective, DV-surviving mom of alienation is tantamount to the abuser's blaming the victim/survivor of domestic violence. On the other end of the spectrum, there are some who say parental alienation, in general, is a family violence issue; for example, the targeted parent can indeed be tormented in a relentless, coercive and controlling way by the abuser. Professional views in the middle of the spectrum may not hold true for many of the severe cases we see in our practices e.g. the targeted parent is tormented and victimized by a delusional co-parent directly, or via their children's antisocial behavior, and there's NOT equal or shared culpability at all in these cases either.

What is always critical is assessing the multiple factors impacting resist-refuse dynamics. "Alienation" as a label is not useful, aside from being politically charged. What the scholarly research and experts maintain is that what is critical is an adequate description of observable behaviors and the inferences made from these. It never serves the clinician to deny that we are inferring from behaviors. It is always useful to have robust descriptions of observable behaviors that have an alienating effect. But referring to "alienation" as a label, as a thing unto itself does nothing to adequately inform the court or to ensure the best interests of the child. Don't use the word "alienation" – instead focus on the multiple behaviors and dynamics impacting resist-refuse dynamics.

"It takes 2 to tango" needs to be applied carefully in any arena involving high conflict co-parents. Every high conflict family's dynamics occur on a continuum. DV perpetrators have made victims of all their family members, and the DV perpetrator can absolutely be the alienator. The issue is that general statements about alienation that fail to distinguish the levels of severity will over-generalize. You *can* have a dynamic that's co-constructed by parents in a family system and this is likely more common in a mild-moderately severe case. The problem is that concepts and labels such as "alienation" are used to describe resist-refuse dynamics in an overgeneralized, overapplied way. Severity level is at least one of the distinguishing features.

Nick & Karen Woodall ask the question: *If it weren't for parental influence, would these children be caught in this resist-refuse dynamic? If the answer is "no" – then they would say the dynamic describes alienating dynamics,* because the rejection of the targeted parent would/could not continue, without the influence of the favored parent. ***What makes the***

predominant dynamic "alienating" is the absence of any reparative processes for what might otherwise be "normal" parental failings . . . Every parent makes mistakes, and yet MOST parents do not find themselves being alienated. If it's within the realm of normative parental failings that's *not* a predictor of an alienating dynamic.

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CAVEATS WHEN USING GARBER's QUESTIONS FOR ASSESSMENTS:
1. Defer to and consider child-centered opinions of MHPs specialists with first-hand knowledge of dynamics of child/family members that fully assess and consider the high conflict family context.
2. Parent = any primary caregiver regardless of biology/genetics/legal ties.
3. Not restricted to divorce – Resist-refuse dynamics can occur in any caregiver-child dyad.
4. Each family has its own unique cultural factors to consider – to do NO HARM, MHPs must enter the world of each unique family and learn/know *their* unique norms.
5. Assess developmentally – Parenting plans must not be fixed in time but anticipate the changing needs of kids; Need developmental professional training.
- Personal experience *may* increase the clinicians empathy,
- But includes significant biases/blind spots.
- Caution: acknowledgement of biases/blind spots NOT sufficient to eradicate them.
6. Consult reliably and regularly.
7. Be mindful of sensory aspects/info we use viscerally to connect and attach when working via videoconferencing. Note any aspects of intimate connection missing - not enough research on the impact of the absence of these via telehealth.
8. For more information about these questions see Garber's website or contact him.
9. Requires use of **induction** – bottom up reasoning. **Look at data and THEN develop hypothesis**. Deductive reasoning begins with hypothesis and seeks data to confirm/refute that hypothesis. Avoid this confirmation bias.
10. *Evidence suggests that clinicians who suspect either estrangement or alienation, exhibit confirmation bias in favor of those dynamics*. Be mindful of preconceptions & assumptions.
11. Ethical duty to remain vigilant to carefully examine any evidence disproving/contradicting your hypothesis.
12. Assumes that multiple dynamics are at play in most cases. **Not as much a matter of "which" dynamics are at play, but the degree and severity** to which different dynamics (e.g. enmeshment, estrangement, alienation) drive the resist-refuse dynamics.
13. Garber's 12 Questions are mutually compatible to **provide a well-rounded understanding of the resist-refuse dynamics for a polarized child.**
14. More effective to approach court-ordered reunification as a ***mutual, exercise in desensitization, requiring multiple therapists to reduce anxiety throughout the system, and contain/limit the polarizing family dynamics.***
15. The **Court supports** professionals **when it**:
- Keeps abreast of progress via regular update hearings, and
- Asserts authority to help a team of professionals keep a family on track.
16. Rejected/targeted parents often don't present as well.
- They are often harshly rejected for extended periods of time –

- hey often have a sense of despair mixed with frustration. Much grief and anxiety.
17. **An enmeshed or alienating parent often presents well**, and may be entrenched in a mutually **reinforcing cycle of fear and anxiety with the child**:
    - Child's fear/anxiety/resist-refuse behaviors, reinforced by Parent A's increased anxiety, concern and (over)protectiveness, which
    - Escalates child's reactions/resist-refuse dynamics.
    - Must achieve extinction of pattern by Parent A's alternative responses (needs to ignore or empower rather than "fixing" or reinforcing the child's anxiety) to child's resist-refuse behaviors, and
    - Increased exposure/systematic desensitization to Parent B with the child's therapist building the child's and the rejected parent's skills.

TERMINOLOGY:
1. **Polarized** Child = Describes:
    - Child's position in a conflicted family system;
    - Dynamic = Child is aligned with Parent A and resists and/or refuses contact with Parent B.
    - "Polarized" is a <u>behavioral description</u> that makes NO assumptions re HOW/WHY a given child ended up in this position or HOW/WHY the child engages in a resist/refuse dynamic.
2. **Dynamic =** Pattern of thoughts, feelings & behaviors occurring BETWEEN people – in relationships;
    - Distinct from Diagnostic labels: A diagnosis is a medical model description of what occurs "inside" an individual. Noting observable behaviors and dynamics is far more useful for assessing the best interests of a child.
    - Controversial view: **Not adult psychometrics but family dynamics that are critical to understanding Resist-Refuse Dynamics**. Ria: Likely that adult psychometrics *can* impact family dynamics – so both psychometrics and dynamics are likely to impact the understanding of resist/refuse dynamics, such as the multiple psych assessments performed by custody evaluators.
    - Ria: understand that confirmation bias/judgments are a risk inherent in "diagnosing" adults, even "lightly."
    - Garber: Invalid and misleading to apply diagnostic model to dynamics – **blame/diagnoses cannot serve best interests of the child** – every child needs to build or sustain viable, healthy relationships with all primary caregivers.
    - Cannot be effective if approach the family making assumptions about causation.
3. **Induction** – bottom up reasoning – **look at data and THEN develop hypothesis**. **Deductive** reasoning begins with hypothesis and seeks data to confirm/refute hypothesis. Deductive reasoning comes with "confirmation bias." To theorize before gathering data biases and narrows our perception and our judgment.
4. **Confirmation Bias –** it's inherently gratifying to find evidence confirming our initial impression/bias. It's inherently uncomfortable to receive information that disconfirms our initial impressions. Consequently, we are inherently rewarded for confirming our biases. In forensics:

- These biases influence interrogators, judges, jurors, and experts.
- Professionals always vulnerable to neglecting to seek evidence that disproves initial impressions about families.
- Parents are just as vulnerable as professionals to interpreting data about a co-parent to confirm a bias, which can confound our understanding of the family system's dynamics (e.g. Daddy showed me all about "sex" – was "in*sects*").
- Emotional polarization and dichotomous thinking risk narrowing professionals' considerations and prematurely closing analysis of alternative explanations.

5. **Transitional Object –** an object that provides psychological comfort; it serves to remind a child of all of a caregiver's "good stuff," their love and caring. Can help soothe children when they are upset or have to spend time away, to transition or be in unusual or unfamiliar situations, or at bedtime. Examples: security blanket, a preferred stuffed animal, or a favorite toy, often referred to by nicknames.

TWELVE QUESTIONS TO ASSESS DEGREE AND NATURE OF FAMILY DYNAMICS
PRESENT WHEN A POLARIZED CHILD EXHIBITS RESIST-REFUSE BEHAVIORS

1. Degree of **Resilience?** Adaptability of the child?
   - To what extent has this been challenged/taught/expected by parents to function effectively in unfamiliar circumstances?
   - Degree to which child operates in a protected bubble of experience that is parent controlled?
2. To what extent are Affiliations with one parent driven by:
   - Temperament?
   - Developmental Differences?
   - Gender (e.g. high school boy may identify more strongly with Dad, and have a temperament like Dad's)
   - Degree to which **affinity** is developmentally relevant/expectable? (e.g. see #1)
3. Any **history** of **healthy attachment/relationship** with Parent B?
   - The history of a healthy attachment bodes well for reunification if that's not actively obstructed by Parent A, historically as well as in the present.
   - Any videos/photos to this effect? Specific descriptions by Parent B?
   - Nature of descriptions of Parent A?
4. Degree to which child saying what s/he believes the **listener wishes to hear?**
   - To what extent is there a desire to please and what is driving that?
5. Are the child's resist-refuse dynamics **"Acute"** (short-term)?
   - **Chronic** (prolonged/unrelenting)?
   - "**Reactive"** to more immediate and situational events?
6. Are resist-refuse dynamics **event- or time-dependent**?
   - Loss of peer(s), activities, responsibilities? (e.g. loses time with regular friend gathering if goes to see Parent B)
7. Does child **resist separation** from Parent A <u>**across contexts**</u>?
   - Separation Anxiety?
   - Parentification?
   - Over-identification?

- Severe enmeshment?
- Does child **resist _all_ separations**?

8. Is child's resist-refuse behavior an attempt to **avoid parents' conflict during transitions**?
    - What happens if neutral transition without parents together?
    - Traumatic re-experiencing?

9. Avoiding **stimuli incidental to Parent B**?
    - Fine with Parent B in different environment? (e.g. noxious noise, smell, sensory challenges, or presence of new partner/spouse?)

10. Avoiding **Culture Shock**?
    - Challenging differences in culture, language, food, rules, expected behaviors, discipline between households.
    - Parenting consistency across environments likely to decrease resistance to transitioning to Parent B.
    - Differences in parenting style may be pathologized or normalized.
    - Transitional objects can help.

11. Degree to which Parent B is a **sensitive, attuned, thoughtful and responsive caregiver**?
    - Realistic rejection to some degree given insensitivity? . . .
    - Incidental/Vicarious experience of mutual partner violence?
    - Estrangement?
    - Any reparative efforts in face of parental failures by Parent B? (Willing and able with support?)

12. Extent that Parent A **undermines child's** experience/thoughts/feelings/behaviors in **relationship** with Parent B? (e.g. plants memories at ages it's highly unlikely the child remembers)
    - Parent A's negative views of Parent B can be transmitted directly (words/actions) or indirectly (overheard conversations, nonverbal cues, Parent A's friends, Parent A's extended family and community).
    - Does the child exhibit antisocial behaviors towards Parent B that Parent A justifies?
    - To what extent does Parent A show a willing ability to redirect and expect prosocial behavior?
    - Is antisocial behavior indirectly reinforced?
    - What drives that for Parent A, given what you've observed?

Must consider the **_extent to which_** (degrees not "whether") the dynamics and behavior suggest:
1) **Intense enmeshment/overidentification (child's autonomy obstructed?),**
2) **Estrangement** (some level of abuse/neglect or ineffective parenting)**, and**
3) **Alienation,**
4) **Note the observable behaviors in each category**, rather than relying on these "labels" as separate, real "things" unto themselves for the reliability and validity of your observations, and
5) **How these dynamics _interact._**

Obviously: Avoid suggesting or even implying custodial recommendations of ANY kind if not licensed as a custody evaluator.