APSAC ANNOUNCES REVISIONS TO ITS DEFINITIONS OF PSYCHOLOGICAL MALTREATMENT AND ADDS A CAUTIONARY STATEMENT REGARDING USE TO SUPPORT PARENTAL ALIENATION CLAIMS

APSAC has produced/is producing a number of publications on psychological maltreatment. These include *Practice Guidelines on the Investigation and Determination of Suspected Psychological Maltreatment of Children and Adolescents*, the *APSAC Monograph on Psychological Maltreatment* (in process), and articles in the APSAC newsletter, the *APSAC Advisor* (in process).

APSAC has been advised that advocates for Parental Alienation Syndrome, Parental Alienation Disorder, and/or Parental Alienation have reportedly been using APSAC’s definitions of psychological maltreatment to assert that APSAC supports parental alienation as a type of psychological maltreatment. A claim of parental alienation is too often made without careful evaluation of allegations of child maltreatment, intimate partner violence, and other parental bad acts, especially in custody disputes (See APSAC Position Paper on Allegations of Child Maltreatment and Intimate Partner Violence in Divorce/Relationship Dissolution, 2016).

This mischaracterization of APSAC’s position on parental alienation has been found in training by parental alienation advocates, in their publications, and in their court testimony. The table below provides APSAC’s current endorsed definitions of psychological maltreatment.

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**Psychological maltreatment is defined as a repeated pattern or extreme incident(s) of caretaker behavior** that thwart the child’s basic psychological needs (e.g., safety, socialization, emotional and social support, cognitive stimulation, respect) and convey a child is worthless, defective, damaged goods, unloved, unwanted, endangered, primarily useful in meeting another’s needs, and/or expendable. Its subtypes and their forms follow.

**SPURNING** embodies verbal and nonverbal caregiver acts that reject and degrade a child, including the following:
1. belittling, degrading, and other nonphysical forms of hostile or rejecting treatment;
2. shaming and/or ridiculing the child, including the child’s physical, psychological, and behavioral characteristics, such as showing normal emotions of affection, grief, anger, or fear;
3. consistently singling out one child to criticize and punish, to perform most of the household chores, and/or to receive fewer family assets or resources (e.g., food, clothing);
4. humiliating, especially when in public;
5. any other physical abuse, physical neglect, or sexual abuse that also involves spurning the child, such as telling the child that he or she is dirty or damaged due to or deserving sexual abuse; berating the child while beating him or her; telling the child that he or she does not deserve to have basic needs met.
TERRORIZING is caregiver behavior that threatens or is likely to physically hurt, kill, abandon, or place the child or child’s loved ones or objects in recognizably dangerous or frightening situations. Terrorizing includes the following:

1. subjecting a child to frightening or chaotic circumstances;
2. placing a child in recognizably dangerous situations;
3. threatening to abandon or abandoning the child;
4. setting rigid or unrealistic expectations with threat of loss, harm, or danger if they are not met;
5. threatening or perpetrating violence (which is also physical abuse) against the child;
6. threatening or perpetrating violence against a child’s loved ones, pets, or objects, including domestic/intimate partner violence observable by the child;
7. preventing a child from having access to needed food, light, water, or access to the toilet;
8. preventing a child from needed sleep, relaxing, or resting;
9. any other acts of physical abuse, physical neglect, or sexual abuse that also involve terrorizing the child (e.g., forced intercourse; beatings and mutilations).

EXPLOITING/CORRUPTING are caregiver acts that encourage the child to develop inappropriate behaviors and attitudes (i.e., self-destructive, antisocial, criminal, deviant, or other maladaptive behaviors). While these two categories are conceptually distinct, they are not empirically distinguishable and, thus, are described as a combined subtype. Exploiting/corrupting includes the following:

1. modeling, permitting, or encouraging antisocial behavior (e.g., prostitution, performance in pornography, criminal activities, substance abuse, violence to or corruption of others);
2. modeling, permitting, or encouraging betraying the trust of or being cruel to another person;
3. modeling, permitting, or encouraging developmentally inappropriate behavior (e.g., parentification, adultification, infantilization);
4. subjecting the observing child to belittling, degrading, and other forms of hostile or rejecting treatment of those in significant relationships with the child such as parents, siblings, and extended kin;
5. coercing the child’s submission through extreme over-involvement, intrusiveness, or dominance, allowing little or no opportunity or support for child’s views, feelings, and wishes; forcing the child to live the parent’s dreams, manipulating or micromanaging the child’s life (e.g., inducing guilt, fostering anxiety, threatening withdrawal of love, placing a child in a double bind in which the child is doomed to fail or disappoint, or disorienting the child by stating something is true (or false) when it patently is not);
6. restricting, interfering with, or directly undermining the child’s development in cognitive, social, affective/emotional, physical, or cognitive/volitional (i.e., acting from emotion and thinking; choosing, exercising will) domains, including Caregiver Fabricated Illness also known as medical child abuse;
7. any other physical abuse, physical neglect, or sexual abuse that also involves exploiting/corrupting the child (such as incest and sexual grooming of the child).
EMOTIONAL UNRESPONSIVENESS (ignoring) embodies caregiver acts that ignore the child’s attempts and needs to interact (failing to express affection, caring, and love for the child) and showing little or no emotion in interactions with the child. It includes the following:
(1) being detached and uninvolved;
(2) interacting only when absolutely necessary;
(3) failing to express warmth, affection, caring, and love for the child;
(4) being emotionally detached and inattentive to the child’s needs to be safe and secure, such as failing to detect a child’s victimization by others or failing to attend to the child’s basic needs;
(5) any other physical abuse, physical neglect, or sexual abuse that also involves emotional unresponsiveness.

ISOLATING embodies caregiver acts that consistently and unreasonably deny the child opportunities to meet needs for interacting/communicating with peers or adults inside or outside the home. Isolating includes the following:
(1) confining the child or placing unreasonable limitations on the child’s freedom of movement within his or her environment;
(2) placing unreasonable limitations or restrictions on social interactions with family members, peers, or adults in the community;
(3) any other physical abuse, physical neglect, or sexual abuse that also involves isolating the child, such as preventing the child from social interaction with peers because of the poor physical condition or interpersonal climate of the home.

MENTAL HEALTH, MEDICAL, AND EDUCATIONAL NEGLECT embodies caregiver acts that ignore, refuse to allow, or fail to provide the necessary treatment for the mental health, medical, and educational problems or needs of the child. This includes the following:
(1) ignoring the need for, failing, or refusing to allow or provide treatment for serious emotional/behavioral problems or needs of the child;
(2) ignoring the need for, failing, or refusing to allow or provide treatment for serious physical health problems or needs of the child;
(3) ignoring the need for, failing, or refusing or allow or provide treatment for services for serious educational problems or needs of the child;
(4) any other physical abuse, physical neglect, or sexual abuse that also involve mental health, medical, or educational neglect of the child.

APSAC is adding the following cautionary note to its Psychological Maltreatment Publications:
It is negligent, even reckless for a judge, attorney, guardian, counselor or other professional to cite or otherwise mischaracterize this or any APSAC document or publication on psychological maltreatment as endorsing or even lending credence to a diagnosis or finding of “parental alienation”. To find that a parent has committed psychological abuse of a child in an effort to interfere with that child’s relationship with the other parent requires direct evidence of the parent’s behavior such as significant denigration, efforts to undermine the relationship of that child with the other parent, efforts to get the child to make false allegations of abuse or other
extremely damaging behavior by the other parent. A child’s avoidance of a parent is not sufficient evidence of psychological abuse by the other parent. Professionals seeking guidance on these issues may, as a starting point, wish to review APSAC’s 2016 Position Statement on “Allegations of Child Maltreatment and Intimate Partner Violence in Divorce/Parental Relationship Dissolution” and other relevant publications.