

Single-Case ABA Intervention in Attachment-Based Parental Alienation: A Remedy

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One of the challenges for Courts in responding to attachment-based “parental alienation” is determining what the remedy should be. The child is expressing an alliance with the supposedly favored parent and a rejection for the targeted parent, and it is strongly suspected that the child’s rejection of the targeted parent is being caused by the distorted parenting practices of the allied and supposedly favored parent. However, achieving definitive proof that the distorting influence of the allied parent is the cause of the child’s rejection of the targeted parent can often be challenging.

The actual distorted parenting practices that are inducing the child’s rejection of the other parent are often very subtle and hidden from direct view. The distorted parenting practices of the allied parent are hidden from direct view through a role-reversal relationship in which the child is induced into meeting the emotional and psychological needs of the allied parent. From the outside, a role-reversal relationship looks like a bonded parent-child relationship. However, a role-reversal relationship in which the child is being used by the parent to meet the parent’s emotional and psychological needs is extremely pathological.

One potential approach to proving the distorting influence on the child from the pathological parenting practices of the allied and supposedly favored parent is through a type of research methodology called a “single-case ABA” design. This type of research methodology has an established history in professional research, and was actually a favorite design used by B.F. Skinner, the father of behavioral psychology. The ABA single-case design is frequently used in research with autism and educational interventions. It is one of only two research designs that can definitively determine causality, the other design being a randomized control experimental design.

The principles of the single-case ABA design are relatively simple and straightforward. First, a period of baseline data is collected (the A period), followed by the application of a treatment (the B period), followed by the removal of the treatment and a return to the initial baseline condition (the A period once more; hence its designation as an ABA design). During these periods, the child’s symptom levels are monitored for change based on the presence or absence of treatment.

Diagram 1 gives a sample of what ABA single-case data might look like. Initially, the child’s symptoms were relatively high. Then, when the treatment was applied the severity of the child’s symptoms were reduced significantly. When the treatment was withdrawn, the child’s symptoms returned to their pre-treatment levels. This data from a single-case ABA design would represent very strong evidence for the effect of the treatment on the child’s symptoms.

Diagram 1. ABA Design

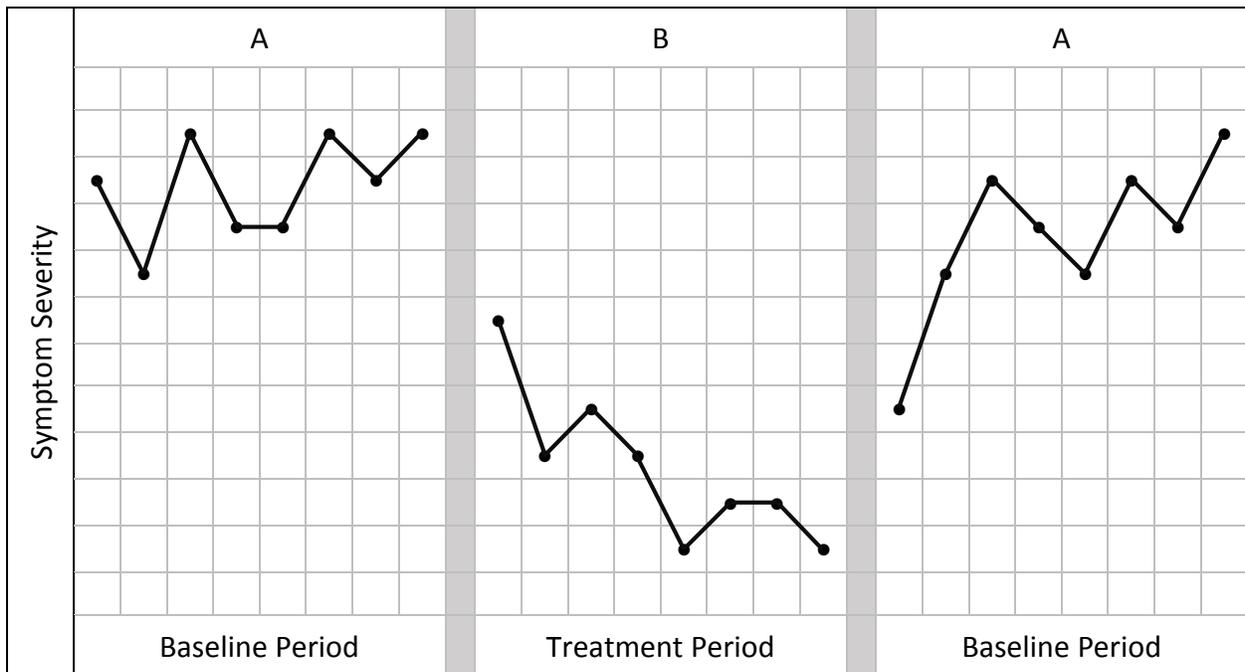
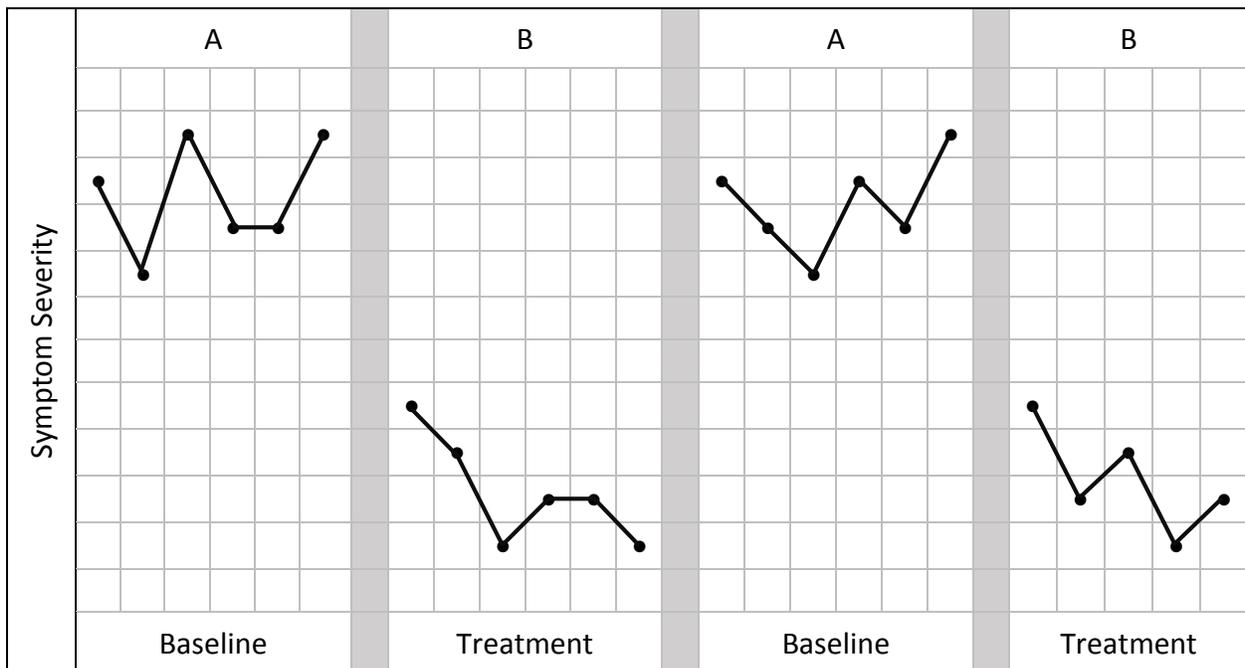


Diagram 2. ABAB Reversal Design

An even stronger experimental procedure is known as the ABAB reversal design. This design adds another treatment phase (the B period) at the end of the standard ABA design.



Application of ABAB Reversal Design to “Parental Alienation”

The single case ABAB reversal design can be applied by the Court as a remedy in cases of attachment-based “parental alienation.” The baseline periods are the child’s exposure to the pathogenic parenting practices of the allied and supposedly favored parent, the treatment periods are the child’s protective separation from the pathogenic parenting of the allied parent and treatment for attachment-based “parental alienation.”

	Period	Description
A ₁	Initial Baseline	This period represents the initial level of the child’s symptom severity while the child is being exposed to the pathogenic parenting of the allied and supposedly favored parent
B ₁	Initial Treatment	The child is protectively separated from the pathogenic parenting of the allied and supposedly favored parent. The child receives treatment to restore a normal-range and healthy relationship with the targeted parent. Daily ratings are made for the child’s behavior (see Appendix 1). The Initial Treatment period (B ₁) ends after 12 weeks of successful days by the child (8 weeks of which are consecutive) and the child will then enter the Second Baseline period (A ₂)
A ₂	Second Baseline	During the Second Baseline, the period of protective separation from the pathogenic parenting of the allied parent ends and the child is re-exposed to the pathogenic parenting of the allied parent through shared physical custody and visitation. Daily ratings are made for the child’s behavior when the child is with the targeted parent.
B ₂	Second Treatment	If the child’s symptoms return upon re-exposure to the pathogenic parenting of the allied and supposedly favored parent, then a Second Treatment phase is implemented. The child is again protectively separated from the pathogenic influence of the allied and supposedly favored parent, and treatment is once again initiated to restore the normal-range and healthy functioning of the child. Since the pathogenic influence of the allied and supposedly favored parent has now been definitively proven, additional safeguards (such as monitored visitations) will be necessary before the child is once again re-exposed to the influence of the pathogenic parent.

In attachment based “parental alienation,” the Baseline period (the initial A₁ period) for the ABAB reversal design would be the child’s pretreatment level of symptom severity. Treatment would then be implemented to restore the child’s normal-range emotional and behavioral functioning (the B period). Treatment would include appropriate therapeutic intervention and a complete protective separation from the allied parent for the majority of this period. The targeted parent would rate the child’s behavior daily during the Initial Treatment period. Once the child displays 12 weeks of successful days, 8 weeks of which are consecutive, then the Initial Treatment period ends and the Second Baseline period will begin.

Operational Definitions:

Successful Day: Ratings of 4 or higher on all three scales.

Successful Week: Six successful days in a 7-day week.

Bonus Weeks: A Bonus Week is a programmatic “virtual-world” week. If the child earns a 7 on any scale on any day, this would represent a successful day in the Bonus Week. Five successful days in the “virtual-world” Bonus Week counts as a successful week toward termination of the Treatment period.

Parental Contact: After 10 successful weeks, the allied parent will receive two 1-hour phone or Skype sessions per week with the child.

Child Empowerment: The single-case ABAB design for “parental alienation” empowers the child. It is in the child’s power to extend or shorten the length of the Treatment period. If the child continues to remain symptomatic, then the Treatment period can be extended to six months or longer. However, if the child chooses to become non-symptomatic, then the Treatment period can be ended in as little as 8 weeks or less, based on the child’s behavior.

De-Triangulation of the Child: The single case ABAB design for “parental alienation” removes the child from being triangulated into the spousal conflict by giving the child permission to bond to both parents without a loyalty conflict. The child is given a path by which bonding to the targeted parent is the way to restore a relationship with the allied and supposedly favored parent. This gives the child permission to bond to the targeted parent while still being “loyal” to the allied parent. The child’s affectional displays and bonding to the targeted parent become a means of **showing** “loyalty” to the allied parent. The result is that the child is freed from any “loyalty conflict” created by the pathogenic parenting of the allied parent.

Second Baseline: During the Second Baseline period, the targeted parent continues to rate the child’s behavior when the child is with the targeted parent. If the child’s symptoms return upon being re-exposed to the pathogenic parenting of the allied parent, then a Second Treatment period of protective separation and treatment is initiated. The potential re-imposition of a Second Treatment period of protective separation provides a powerful incentive for the allied and supposedly favored parent to demonstrate proper parental guidance for the child during the Second Baseline period to ensure that the child’s symptoms toward the targeted parent do not re-emerge.

De-Incentivizing Pathogenic Parenting: The potential for a Second Treatment period of protective separation de-incentivizes the creation of child symptoms by the allied parent, and instead provides motivation for the allied parent to show proper parental guidance in supporting the child's affectional bonding to the other parent.

Probationary Period: The probationary period for the possible re-imposition of a Second Treatment period is two years. If the child's symptoms return within two years after the end of the Initial Treatment period, a Second Treatment period and protective separation can be initiated. Zero visitation refusals are expected during the probationary period. A visitation refusal will be rated as 1 on all three rating scales. If the imposition of a Second Treatment period becomes necessary, additional restrictions will be placed on the allied parent prior to once again re-exposing the child to the pathogenic parenting of the allied parent.

If the child's symptoms emerge after the two-year probationary period, then a second ABAB design for "parental alienation" can be re-initiated, beginning with the Initial Treatment period.

Symptom Relapse: If the child's symptoms toward the targeted parent re-emerge during the Second Baseline period, this would represent definitive proof of the pathogenic parenting of the allied and supposedly favored parent, since the child's symptoms disappear when the child is away from the pathogenic parenting of the allied parent and reappear when the child is re-exposed to the pathogenic parenting of the allied parent. A relapse of child symptoms when the child is re-exposed to the pathogenic parenting of the allied parent should initiate a Second Treatment period of protective separation from the pathogenic parenting of the allied parent, during which time the child and targeted parent should receive additional treatment to restore the child's normal-range and healthy development.

Additional Protection: Because of the child's relapse in symptoms upon re-exposure of the child to the pathogenic parenting of the allied and supposedly favored parent, additional protection of the child from the pathogenic parenting of the allied parent will be necessary before the child is once again re-exposed to the pathogenic parent. Supervised visitation of the pathogenic parent once the child is again symptom free would represent one form of additional protection.

Evidence-Based Practice

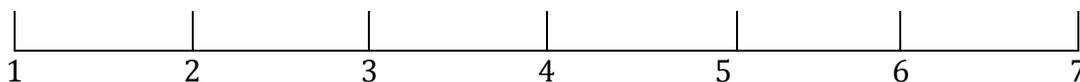
An ABAB reversal design for "parental alienation" represents scientifically grounded evidenced-based practice for both the diagnosis and the treatment of "parental alienation." Single-case designs are recognized scientific designs, and the ABAB reversal design is one of the best single-case designs for identifying causality. Standard of care "reunification therapy" is ineffective and places a multi-year burden on the targeted parent and child for their lost relationship. A single case ABAB reversal design quickly and efficiently identifies the cause of the issues and restores the child's healthy development as quickly as possible, and on-balance offers the minimal burden on the family as whole.

Appendix 1

Relationship Rating Scale

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Hostile to Pleasant Attitude

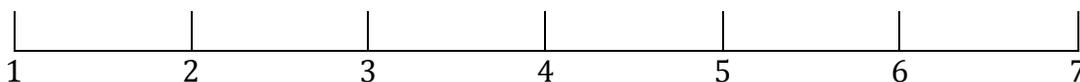


Openly hostile,
mean, rude,
disrespectful
comments

Attitude is generally
respectful. No openly hostile,
mean, rude, or disrespectful
comments. Child accepts
displays of affection

Positive, warm,
affectionate attitude.
Child volunteers
displays of affection.

Behavioral Defiance to Cooperation

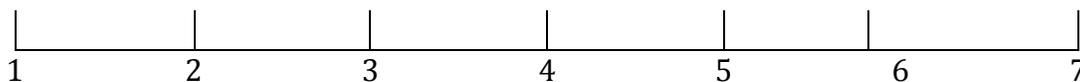


Openly defiant of
parental directives.

May complain and argue
but is behaviorally
compliant with parental
directives within 2-3
additional prompts

Cooperative.
Minimal to no
argument.

Withdrawn to Social



Withdrawn, sullen,
non-communicative.
Offers only one-word
responses to
questions

Is generally responsive to
questions, offering
elaborated responses. May
become withdrawn when
upset or angry.

Smiles easily and fairly
often. Volunteers
self-disclosures of his
or her personal
experiences.