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Severe Attachment Pathology: Risk Assessment Questions to be Answered by Mental Health Assessment

The differential diagnosis for severe attachment pathology (i.e., a child rejecting a parent) is child abuse by one parent or the other.

- Targeted Parent Diagnosis: Is the targeted parent abusing the child, thereby creating the child's attachment pathology toward that parent (a 2-person attribution of causality)?
- Allied Parent Diagnosis: Is the allied parent psychologically abusing the child (DSM-5 V995.51) by creating a shared persecutory delusion and false attachment pathology in the child for the secondary gain of manipulating the court's decisions regarding child custody, and for meeting the parent's own emotional and psychological needs (a 3-person attribution of causality)?

The concern is that the child is being "triangulated" into the spousal conflict through the formation of a "cross-generational coalition" with the allied parent against the targeted

parent, resulting in an "emotional cutoff" in the child's attachment bond to the targeted parent (Bowen, Minuchin, Haley, Madanes). In their book *Family Healing*, Minuchin and Nichols (1993) provide a structural family diagram for the pathology of concern.

Based on the nature of the pathology in the family courts, i.e., 1) a possible shared persecutory delusion, 2) a possible factitious attachment pathology artificially created in the child (for the secondary gain of manipulating the court's decisions regarding

Minuchin: Structural Family Diagram

Triangulation
Cross-Generational Coalition
Emotional Cutoff
Inverted Hierarchy
Enmeshment

Minuchin. S. & Nichols, M.P. (1993). Family Healing:
Strategies for Hope and Understanding, p. 42.

□ yes

□ yes

□ no

 \square no

child custody, 3) possible psychological child abuse by the allied parent (DSM-5 V995.51 Child Psychological Abuse), 4) possible spousal psychological abuse of the targeted parent by the allied parent using the child as the weapon (DSM-5 V995.82 Spouse or Partner Abuse, Psychological), and 5) the child's possible *triangulation* into the spousal conflict through the formation of a *cross-generational coalition* with one parent against the other parent, resulting in an *emotional cutoff* in the child's attachment bond to the targeted parent, the following questions need to be answered by a proper mental health assessment:

Questions for Mental Health Assessment:

1.	Child Abuse Targeted Parent: Is the targeted parent abusing the child, thereby creating the child's attachment pathology toward that parent - a 2-person attribution of causality?	□ yes	□ no	
	 If yes, what is the DSM-5 diagnosis for the abusive parenting by the targeted parent? 			
	 Documenting Parenting: Is the parenting of the targeted parent normal-range or abusive range? 		Target parenting normal range?	
	For clarity, document the clinical opinion from the assessment with supporting examples regarding the parenting practices of the targeted parent using the <i>Parenting Practices Rating Scale</i> (Appendix 1)?	□ yes	□no	
2.	Child Abuse Allied Parent: Is the allied parent psychologically abusing the child (DSM-5 V995.51) by creating a shared persecutory delusion and false attachment pathology in the child (for secondary gain) - a 3-person attribution of causality?	□ yes	□no	
	 If no, what criteria were not met? What more would need to be present to meet criteria for Child Psychological Abuse (V995.51) by the allied parent? 			
3.	Shared Persecutory Delusion: Is there a shared persecutory delusion in the family?	□ yes	□no	
	• If no, why not? What criteria were not met?			
4.	False Attachment Pathology: Is there an artificially created attachment pathology between the child and the targeted parent (i.e., is it a false/factitious attachment pathology)?	□ yes	□no	
	 If no, why not? What criteria were not met for an artificially created false attachment pathology? 			
5.	Spousal Psychological Abuse: Is the allied parent psychologically abusing the targeted parent using the child as a weapon (DSM-5 V995.82)?	□ yes	□no	
	• If no, why not? What criteria were not met?			
6.	Triangulation: Is the child being triangulated into the spousal conflict surrounding the divorce?	□yes	□no	

	• If no, why not? What criteria were not met?		
7.	Cross-generational Coalition: Is there a cross-generational coalition of the child with the allied parent against the targeted parent?	□ yes	□no
	If no, why not? What criteria were not met?		
6.	Emotional Cutoff: Is there an emotional cutoff between the child and the targeted parent?	□yes	□ no
	If no, why not? What criteria were not met?		
7.	Inverted Hierarchy: Is there an inverted hierarchy in the family?	□yes	□ no
	• If no, why not? What criteria were not met?		
7.	Enmeshment: Do the allied parent and child have an enmeshed psychological relationship?	□yes	□ no
	• If no, why not? What criteria were not met?		

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Parenting Practices Rating Scale

C.A Childress, Psy.D. (2016)

Nam	ie o	f Parent:	Date:
cases	s of	abuse allega	y. Do <u>not</u> indicate child abuse is present unless allegations have been confirmed. In ations that have neither been confirmed nor disconfirmed, or that are unfounded, use not rating not Category rating.
Leve	<u>:1 1:</u>	Child Abus	<u>se</u>
	1.	Sexual Ab	use by legal statute. Allegation: Neither confirmed nor disconfirmed
			Allegation: Unfounded
_	ว	Physical A	
Ц	۷.	Hitting the o	child with a closed fist; striking the child with an open hand or a closed fist around the head or triking the child with sufficient force to leave bruises; striking the child with any instrument ich as kitchen utensils, paddles, straps, belts, or cords.
			Allegation: Neither confirmed nor disconfirmed
			Allegation: Unfounded
	3.	Emotiona	l Abuse
		Frequent ve of the child.	rbal degradation of the child as a person in a hostile and demeaning tone; frequent humiliation
			Allegation: Neither confirmed nor disconfirmed
			Allegation: Unfounded
	4.	Psycholog	cical Abuse
_		to meet the	parenting that creates significant psychological or developmental pathology in the child in order emotional and psychological needs of the parent, including a role-reversal use of the child as a bject for the parent's emotional and psychological needs.
		, ,	Allegation: Neither confirmed nor disconfirmed
			Allegation: Unfounded
	5.	Neglect Failure to pr	rovide for the child's basic needs for food, shelter, safety, and general care.
			Allegation: Neither confirmed nor disconfirmed Allegation: Unfounded
	6.	Repeated t	Violence Exposure raumatic exposure of the child to one parent's violent physical assaults toward the nt or to the repeated emotional degradation (emotional abuse) of the other parent.
			Allegation: Neither confirmed nor disconfirmed

Level 2: Severely Problematic Parenting ☐ 7 Overly Strict Discipline Parental discipline practices that are excessively harsh and over-controlling, such as inflicting severe physical discomfort on the child through the use of stress postures, using shaming techniques, or confining the child in an enclosed area for excessively long periods (room time-outs are not overly strict discipline). 8. Overly Hostile Parenting Frequent displays (more days than not) of excessive parental anger (6 or above on a 10-point scale). 9. Overly Disengaged Parenting Repeated failure to provide parental supervision and/or age-appropriate limits on the child's behavior and activities; parental major depression or substance abuse problems. 10. Overly Involved-Intrusive Parenting Enmeshed, over-intrusive, and/or over-anxious parenting that violates the psychological self-integrity of the child; role-reversal use of the child as a regulatory object for the parent's anxiety or narcissistic needs. 11. Family Context of High Inter-Spousal Conflict Repeated exposure of the child to high inter-spousal conflict that includes excessive displays of inter-spousal anger. **Level 3: Problematic Parenting** ☐ 12. Harsh Discipline Excessive use of strict discipline practices in the context of limited displays of parental affection; limited use of parental praise, encouragement, and expressions of appreciation. ☐ 13. High-Anger Parenting Chronic parental irritability and anger and minimal expressions of parental affection. ☐ 14. Uninvolved Parenting Disinterested lack of involvement with the child; emotionally disengaged parenting; parental depression. 15. Anxious or Over-Involved Parenting Intrusive parenting that does not respect interpersonal boundaries. 16. Overwhelmed Parenting The parent is overwhelmed by the degree of child emotional-behavioral problems and cannot develop an effective response to the child's emotional-behavioral issues. 17. Family Context of Elevated Inter-Spousal Conflict Chronic child exposure to moderate-level inter-spousal conflict and anger or intermittent explosive episodes of highly angry inter-spousal conflict (intermittent spousal conflicts involving moderate anger that are successfully resolved are normal-range and are not elevated inter-spousal conflict). **Level 4: Positive Parenting** 18. Affectionate Involvement – Structured Spectrum Parenting includes frequent displays of parental affection and *clearly structured* rules and expectations for the child's behavior. Appropriate discipline follows from clearly defined and appropriate rules. 19. Affectionate Involvement – Dialogue Spectrum Parenting includes frequent displays of parental affection and *flexibly negotiated* rules and expectations for the child's behavior. Parenting emphasizes dialogue, negotiation, and flexibility. 20. Affectionate Involvement – Balanced Parenting includes frequent displays of parental affection and parenting effectively balances structured

discipline with flexible parent-child dialogue.

Permissive to Authoritarian Dimension Rating: 60 100 **Permissive Parenting** Flexible Dialogue Structured Discipline **Authoritarian Parenting** Spectrum Spectrum Abusive Neglect: Hostile Abuse: Extremely disengaged and **Balanced Parenting** Extremely hostile neglectful parenting abusive parenting Normal Range Parenting -> **Capacity for Authentic Empathy Rating:** 1 3 4 Rigidly self-Tends to be rigidly self-Tends to be over-Enmeshed loss of absorbed absorbed; difficulty in involved; diffusion of psychological boundaries; perspective; de-centering and psychological projective identification unable to detaking the perspective boundaries between of self-experience onto center; absence of others self-experience and the child of empathy child's experience Narcissistic **Developmentally Healthy** Borderline Range Empathy Spectrum Spectrum Parental Issues of Clinical Concern (CC) CC 1: Parental schizophrenia spectrum issues Stabilized on medication? ☐ Yes □ No ☐ Variable Parental bipolar spectrum issues Stabilized on medication? ☐ Yes ☐ No □ Variable Parental major depression spectrum issues (including suicidality) Stabilized by treatment? ☐ Yes □ No ☐ Variable CC 4: Parental substance abuse issues Treated and in remission (1 yr)? ☐ Yes □ No □ Variable Parental narcissistic or borderline personality disorder traits CC 5: In treatment? ☐ Yes □ No □ Variable Parental history of trauma Treated or in treatment? ☐ Yes ☐ No □ Variable