Diagnostic Checklist for Pathogenic Parenting: Extended Version

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All three of the diagnostic indicators must be present (either 2a OR 2b) for a clinical diagnosis of attachment-based "parental alienation." Sub-threshold clinical presentations can be further evaluated using a "Response to Intervention" trial.

1. Attachment System Suppression Sub-The child's symptoms evidence a selective and targeted suppression of Present Absent Threshold the normal-range functioning of the child's attachment bonding motivations toward one parent, the targeted-rejected parent, in which the child seeks to entirely terminate a relationship with this parent (i.e., a child-initiated cutoff in the child's relationship with a normalrange and affectionally available parent). Secondary Criterion: Normal-Range Parenting: ves The parenting practices of the targeted-rejected parent are assessed to be broadly normal-range, with due consideration given to the wide spectrum of acceptable parenting that is typically displayed in normal-range families. Normal-range parenting includes the legitimate exercise of parental prerogatives in establishing desired family values through parental expectations for desired child behavior and normal-range discipline practices. 2(a). Personality Disorder Traits Sub-Present Absent Threshold The child's symptoms evidence all five of the following narcissistic/(borderline) personality disorder features displayed toward the targeted-rejected parent. **Sub-Criterion Met** yes no **Grandiosity:** The child displays a grandiose perception of occupying an inappropriately elevated status in the family hierarchy that is above the targetedrejected parent from which the child feels empowered to sit in judgment of the targeted-rejected parent as both a parent and as a person. **Absence of Empathy:** The child displays a complete absence of empathy for the emotional pain being inflicted on the targeted-rejected parent by the child's hostility and rejection of this parent. **Entitlement:** The child displays an over-empowered sense of entitlement in which the child expects that his or her desires will be met by the targeted-rejected parent to the child's satisfaction, and if the rejected parent fails to meet the child's entitled expectations to the child's satisfaction then the child feels entitled to enact a retaliatory punishment on the rejected parent for the child's judgment of parental **Haughty and Arrogant Attitude:** The child displays an attitude of haughty arrogance and contemptuous disdain for the targeted-rejected parent. **Splitting:** The child evidences polarized extremes of attitude toward the parents, in which the supposedly "favored" parent is idealized as the all-good and nurturing

parent while the rejected parent is entirely devalued as the all-bad and entirely

inadequate parent.

2(b). Phobic Anxiety Toward a Parent

Present	Sub Thresl	Ansent					
			The child's symptoms evidence an extreme and excessive anxiety toward the targeted-rejected parent that meets the following DSM-5 diagnostic criteria for a specific phobia:				
Criter yes	ion Met no						
		of the targete	nwarranted Fear : The child displays a persistent and unwarranted fear d-rejected parent that is cued either by the presence of the targeted inticipation of being in the presence of the targeted parent				
		Severe Anxiety Response: The presence of the targeted-rejected parent almost invariably provokes an anxiety response which can reach the levels of a situationally provoked panic attack.					
		Avoidance of Parent: The child seeks to avoid exposure to the targeted parent due to the situationally provoked anxiety or else endures the presence of the targeted parent with great distress.					
3. Fixe	d Fals	se Belief					
Present	Sub Thresh	Ahcant					
			The child's symptoms display an intransigently held, fixed and false belief regarding the fundamental parental inadequacy of the targeted-rejected parent in which the child characterizes a relationship with the targeted-rejected parent as being somehow emotionally or psychologically "abusive" of the child. While the child may not explicitly use the term "abusive," the implication of emotional or psychological abuse is contained within the child's belief system and is not warranted based on the assessed parenting practices of the targeted-rejected parent (which are assessed to be broadly normal-range).				

DSM-5 Diagnosis

If the three diagnostic indicators of attachment-based "parental alienation" are present in the child's symptom display (either 2a or 2b), the appropriate DSM-5 diagnosis is:

DSM-5 Diagnosis

309.4 Adjustment Disorder with mixed disturbance of emotions and conduct

V61.20 Parent-Child Relational Problem

V61.29 Child Affected by Parental Relationship Distress

V995.51 Child Psychological Abuse, Confirmed (pathogenic parenting)

Checklist of Associated Clinical Signs (ACS)

evident	not evident						
		ACS 1: Use of the Word "Forced"					
		ACS 2: Enhancing Child Empowerment to Reject the Other Parent					
		evident	not evident				
				"Child should decide on visitation"			
				"Listen to the child"			
				Advocating for child testimony			
		ACS 3: The Exclusion Demand					
		ACS 4: Pare	ement				
		ACS 5: The Unforgivable Event ACS 6: Liar – "Fake"					
		ACS 7: Themes for Rejection					
		evident	not evident				
				Too Controlling			
				Anger management			
				Targeted parent doesn't take responsibility/apologize			
				New romantic relationship neglects the child			
				Prior neglect of the child by the parent			
				Vague personhood of the targeted parent			
				Non-forgivable grudge			
				Not feeding the child			
		ACS 8: Unw	arranted Us	se of the Word "Abuse"			
☐ ACS 9: Excessive Texting, Phone Calls, and Emails							
	ACS 10: Role-Reversal Use of the Child ("It's not me, it's the child child the child t						
		ACS 11: Targeted Parent "Deserves" to be Rejected					
		ACS 12: Allied Parent Disregards Court Orders and Court Authority					
		evident	not evident				
				Child disregard of court orders for custody			
				Child runaway behavior from the targeted parent			