

Turning Points For Families

LLC

Linda J. Gottlieb, LMFT, LCSW-R
New York State Licensed Mental Health Practitioner
347-454-8840 Telephone

Sample 4-day Treatment Intervention at Turning Points for Families (TPFF)

*To jumpstart the healing of unjustifiably damaged or severed
parent-child relationships*

Outcome Data thus far also provided

Table 1 Treatment Summary by Day

Day 1	Day 2	Day 3	Day 4
1. The child arrives at TPFF with either the alienated parent (the program's preferred means of transport) or with the alienating parent (AP), who	1. Alienated parent, child, and other participating family and friends of the alienated parent arrive at TPFF.	1. Alienated parent, child, and other participating persons arrive at TPFF. 2. Feedback is elicited about the evening's	1. Alienated parent, child, and other participating persons arrive at TPFF. 2. Feedback is elicited about the evening's

¹ As of this update on 12/21/2020, 79 of the 85 children who had participated in TPFF came under the auspices of their *alienated* parent. They took plane rides from the West Coast and from the south of Florida; they took car rides for five hours and for as much as 13 hours—all without incident. This is what almost always occurs when the Court order frees the child from the loyalty conflict and thereby enables the child to get in touch with his or her true loving—but repressed—feelings for the alienated parent. The explanation for the child's cooperation is quite understandable: because of our long dependency period, the instinct for a parent is part of the instinct for survival. Although highly counterintuitive, freeing the child from loyalty conflict is *not traumatic* to the child because it is working with the child's instinct for survival.

<p>promptly transfers the child to the care of the alienated parent.</p> <p>Parents are expected to exchange civil greetings.</p> <p>2. As had been discussed with the AP in pre-planning conferences for the intervention and <i>if</i> it had been previously approved by TPF, the AP reads to the group the letter that he or she has written in support of the relationship between the child and the alienated parent.</p> <p>3. The AP's letter must include the following: 1) support the reunification and the reasons <i>why</i>; 2) the parental qualities that the alienated parent has to offer the child; 3) why it is important for the child to have the alienated parent to meaningfully involved in child's life; 4) that the child is safe with the alienated parent.²</p>	<p>2. Feedback and discussion are elicited about the evenings' events and of the memorabilia intervention</p> <p>3. Various videos that dramatize the family interactions occurring in alienation are played.</p> <p>4. Discussion of the events depicted in the videos that may pertain to the family.</p> <p>5. Alienated parent displays appropriate affective reaction to the videos' that dramatized the dynamics of alienation—virtually of which the alienated parent had confronted.</p> <p>6. A discussion is initiated as the alienated parent attempts to correct the revisionist family history that had unjustifiably turned the child against the</p>	<p>events and reactions to Day 2's therapy.</p> <p>3. Some clarification of the family history continues as needed.</p> <p>4. Interactive videos on the fallibility of human memory and the ease of planting false memories are played. The children love the challenge to their memories from the interactive videos—even though the end result demonstrates the fallibility of human memory.</p> <p>5. Following the videos, there is a family discussion of how the videos relate to the family history—that is, the children's memories may not be exactly as what they believe them to be.</p> <p>6. After this discussion, additional videos are</p>	<p>events and reactions to Day 3's therapy.</p> <p>3. Discussion of life with alienated parent for a period of time after departing TPF.</p> <p>4. Rules the child will live by are discussed with input from child commensurate with age.</p> <p>5. The alienated parent may need help relating to the child at the child's current age instead of at the age the child had been prior to the alienation—which may have been upwards of five years. The child has significantly matured and developed since the last meaningful contact, so the alienated parent must adjust her or his parenting accordingly.</p> <p>6. TPF therapist summarizes the course of the therapy.</p> <p>7. Clarification commensurate with child's age</p>
---	---	--	---

² The letter is NOT a requirement for admission to TPF; nor is the letter needed—although helpful—for a successful reunification. The primary purpose of the letter is to initiate the learning process for the AP to recognize her or his role in the alienation; the letter is one measure for assessing the AP's *genuine* support for the relationship between the other parent and their child.

TPF makes the assumption of safety because the Court had transferred custody to the alienated parent after hearing the evidence. Or, if by settlement and then approved by the Court, the AP and the Court had determined that the child is safe in the care of the alienated parent.

<p>4. If the alienating parent had transported the child to TPF, the AP departs promptly after the transition and/or having read aloud to the group the TPF-approved letter.</p> <p>5. Extended family and significant others of the alienated parent are recommended to participate in the intervention—but at the alienated parent’s discretion.</p> <p>6. The TPF therapist briefly clarifies the Program’s purpose and goals. There may be brief discussion of questions the family has. Controversy is avoided at this time.</p> <p>7. The memorabilia intervention promptly begins with the use of videos, photos, cards, letters, gifts, etc. and other memorabilia indicative of the</p>	<p>alienated parent.</p> <p>7. TPF facilitates and assures that the alienated parent sensitively and calmly corrects child’s revisionist history without pathologizing the alienating parent.</p> <p>8. The child is receptive to hearing the alienated parent’s side of the family history.</p> <p>9. Discussion of the family history between child, alienated parent, and any participating extended family</p> <p>10. The child generally does not relinquish the programmed script. But the child’s behavior and affect confirm positive changes and which will eventually restructure the child’s negative programmed and distorted</p>	<p>played of actual alienated parents and adult alienated children telling their respective stories.</p> <p>7. More family discussion of the videos of the actual stories and how it relates to this family. The alienated parent has been touched by the stories of both the parents and demonstrates appropriate affect. the child’s empathy for the alienated parent emerges and is nurtured.</p> <p>8. The child is absolved of having maltreated the alienated parent—recognizing that the child had been trapped in the “loyalty conflict” thrust upon the child by the AP. But from hereon, the child is expected to behave respectfully and act age-appropriately—</p>	<p>is provided as to when and under what circumstances the child will have contact with the alienating parent.</p> <p>8. Questions from child about life going forward are entertained with alienated parent providing answers.</p> <p>9. TPF therapist responds to questions the family may have about the future unknown.</p> <p>10. Lunch determined by the family. TPF therapist takes the family to lunch.</p> <p>11. Afternoon activity. More pictures are taken and texted to the AP.</p> <p>12. Emotional goodbyes are exchanged at end of the activity.</p> <p>13. TPF contacts alienating parent to update on child and summarizes</p>
--	---	--	--

⁴ Nurturing the child’s empathy is an exceedingly important intervention. Because the alienating parent has modeled, encouraged, and normalized the antisocial behaviors to maltreat the alienated parent, there is great risk to the child for developing an antisocial personality disorder. The discussion that usually occurs in response to watching the real-life videos of people who had experienced some aspect of alienation generally evokes the children’s guilt and empathy for their inappropriate behaviors. Nurturing one’s guilt stimulating empathy are mechanisms that prevent an antisocial personality disorder from emerging. An antisocial personality disorder is virtually untreatable and irreversible once it becomes characterological at the end of adolescence or in early adulthood. This detrimental effect on the child as a result of the alienating parents condoning of the child’s maltreatment of the alienated parent is one of many reasons why the scientific community considers alienation to be a profound form of psychological child-abuse.

<p>alienated parent-child relationship prior to the onset of the alienation. This is a symbolic, experiential intervention that is virtually always an ice-breaker of the child's resistance to/rejection of the alienated parent. The intervention complies with child psychiatrist Salvador Minuchin's structural family therapy model.</p> <p>8. All family members are emotionally affected by the stroll down memory lane via the memorabilia.</p> <p>9. Child's resistance to the alienated parent increasing diminishes.</p> <p>10. TPFf therapist elevates the alienated parent into role of co-therapist.</p> <p>11. Alienated parent assumes the role of healer of the child.</p> <p>12. Positive affective reactions by all are evident as the family members discuss the memories that are rekindled by the memorabilia.</p> <p>13. Child's defiance of the alienated parent virtually always disappears.</p>	<p>beliefs, myths, and feelings regarding the alienated parent.</p> <p>11. The child is permitted to discuss any legitimate issues with the alienated parent—as long as it is done respectfully and civilly. False abuse allegations and the revisionist family history are discussed and corrected. The child is not permitted, however, to dwell on distorted thinking—which is generally permitted in traditional reunification therapy.</p> <p>12. The alienated parent is not asked to accept the child's delusional opinions and beliefs and the consequent feelings based upon delusional thinking. It is antitherapeutic to support delusional thinking!</p> <p>13. The alienated parent is also not asked to apologize for deeds not done. This is also an antitherapeutic. To validate a child's false belief about having been</p>	<p>not only toward the alienated parent but in all interpersonal relationships.</p> <p>9. The alienated parent takes responsibility for assuaging the child's guilt and expresses forgiveness.</p> <p>10. Lunch again determined by the family. TPFf therapist takes the family to lunch.</p> <p>11. Afternoon activity. Healthy family hierarchy is reinforced as alienated parent resumes and expands the parental role during the activity. Photographs are again texted to the AP.</p> <p>12. TPFf therapist takes leave of the family at dinnertime. Family is instructed to continue enacting their newly-recovered roles with each other.</p> <p>13. TPFf therapist calls alienating parent to update and inquire about parent's progress towards goals so that the no-contact period can be lifted as soon as the AP produces documentation from a qualified</p>	<p>expectations of the AP to lift the no-contact period.</p> <p>14. TPFf therapist affirms commitment to collaborate with the local therapists—the AP's individual therapist and the family therapist for the alienated parent and children. TPFf commits to being available to the family as needed—for example, a court report on the therapy, to testify about the therapy if so requested; to reaffirm the TPFf treatment protocol, etc.</p> <p>15. In most situations, individual therapy for the child is CONTRAINDICATED—meaning forbidden. Individual therapy at this stage is only a forum for the child to vent the family script. As in any cult brainwashing, it can take upwards of two years to relinquish. A forum for the script will adversely affect the reconnection. To reiterate, behavioral change is what is important—not words.</p>
---	---	--	---

<p>14. Child accepts alienated parent's parental role and authority.</p> <p>15. Lunch determined by the family. TPDFF therapist takes the family to lunch.</p> <p>16. Afternoon activity selected by child and parent. Alienated parent is fully in charge of child, who is cooperative, pleasant, and responsive. The spontaneity of the activity overrides the child's programmed script regarding the revisionist family history and negative beliefs about the alienating parent.</p> <p>17. Alienated parent assumes parental role over child during the activity: as nurturer, supporter, advocate, supervisor, playmate, etc.</p> <p>18. TPDFF therapist takes pictures of the child or children during the activity and texts the pictures to the AP in order to reassure AP of the child's adjustment.</p> <p>19. Close of Day 1 at dinnertime: family members are counseled not to discuss anything controversial and</p>	<p>abused or maltreated by the alienated parent only subjects the child to risk for developing PTSD—as if the abuse and/or maltreatment had actually occurred.</p> <p>14. The child is sensitively guided to assume an appropriate role in the family hierarchy—to a position that is commensurate with the child's age.</p> <p>15. The alienated parent is facilitated in resuming her or his appropriate role in the family hierarchy.</p> <p>16. Lunch determined by the family. TPDFF therapist takes the family to lunch.</p> <p>17. Afternoon activity. Alienated parent and child deepen their affective connection that had been initiated during the prior interventions. They have begun the journey to resume their roles and interactions prior to the onset of the alienation. This</p>	<p>therapist that she or he is ready, willing, and able to support the relationship between the other parent and their child.</p>	
---	--	---	--

<p>to stay positive as they retire to their local accommodations. They are encouraged to relax together and enjoy another activity such as board games or a movie.</p> <p>20. Family retires to their accommodations. Although the TPFF therapist is available to the family 24/4 during the intervention, TPFF has not been contacted for emergency assistance after the family and therapist separate for the evening and night.</p> <p>21. TPFF therapist calls the AP to assure parent of child's adjustment. TPFF therapist discusses AP's need for services, such as individual therapy, parent education about subverting negative feelings for the other partner to their child's best interests, etc. If it applies, discussion continues as to what changes are needed for TPFF to approve the letter.</p> <p>TPFF therapist counsels AP to make specific references to family events in the letter in order</p>	<p>healthy reconnection is significantly facilitated by the activity—an experiential intervention that surpasses talking. Healthy family hierarchy is established.</p> <p>18. Therapist again texts pictures to the AP of the child during the activities.</p> <p>19. TPFF therapist takes leave of the family at dinnertime. Reconnection is sufficiently stable for them to discuss any issue that arises.</p> <p>20. TPFF therapist calls alienating parent to update parent on child's adjustment and discuss efforts at securing needed services and letter correction, if applicable.</p>		
--	---	--	--

for child to recognize AP's support for the relationship with the alienated parent. AP is also counseled to individualize each letter to address each child's individuality.			
--	--	--	--

Table 2

Travel to TPFf or Zoom accommodations: 85 children.

Via Zoom

<i>With alienating parent: 6</i>	By car: 1	By plane: 5	
<i>With alienated parent: 79</i>	By car: 43	By plane: 36	10

Table 3

Children, by age, who reconnected to their alienated parent during the 4-day intervention at TPFf: 83⁵ of 85

# of children age 5-7	# of children age 8	# of children age 9	# of children age 10	# of children age 11
3	1	5	4	7
# of children age 12	# of children age 13	# of children age 14-15	# of children age 16	# of children age 17
10	9	17	18	9
# of children age 18+				
2				

Table 4

Length of time of severed/severely damaged relationship with alienated parent

# of years: 1-2	# of years: 2-3	# of years: 4	# of years: 5	# of years: 8
# of Children: 19	# of Children: 57	# of Children: 6	# of children: 1	# of children: 2

⁵ The two children who did not reconnect were siblings who had repeated, surreptitious, sabotaging contact with their alienating parent throughout the intervention. They did not reconnect because the treatment protocol had been violated, and therefore the treatment was not followed.

Table 5

Time since departure from TPF

Less than 90 days:	91 days - 1 year:	# of years: 1	# of years: 2	# of years: 3	# of years: 4	# of years: 5+
# of children: 3	# of children: 13	# of children: 17	# of children: 15	# of children: 11	# of children: 13	# of children: 13