



## **Parental Alienation, DSM-5, and ICD-11 (American Series in Behavioral Science and Law) (American Series in Behavioral Science & Law)**

*By William Bernet*

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**Parental Alienation, DSM-5, and ICD-11 (American Series in Behavioral Science and Law) (American Series in Behavioral Science & Law) By William Bernet**

Parental alienation is an important phenomenon that mental health professionals should know about and thoroughly understand, especially those who work with children, adolescents, divorced adults, and adults whose parents divorced when they were children. In this book, the authors define parental alienation as a mental condition in which a child - usually one whose parents are engaged in a high-conflict divorce - allies himself or herself strongly with one parent (the preferred parent) and rejects a relationship with the other parent (the alienated parent) without legitimate justification. This process leads to a tragic outcome when the child and the alienated parent, who previously had a loving and mutually satisfying relationship, lose the nurture and joy of that relationship for many years and perhaps for their lifetimes. We estimate that 1 percent of children and adolescents in the U.S. experience parental alienation. When the phenomenon is properly recognized, this condition is preventable and treatable in many instances. The authors of this book believe that parental alienation is not simply a minor aberration in the life of a family, but a serious mental condition. Because of the false belief that the alienated parent is a dangerous or unworthy person, the child loses one of the most important relationships in his or her life. This book contains much information about the validity, reliability, and prevalence of parental alienation. It also includes a comprehensive international bibliography regarding parental alienation with more than 600 citations. In order to bring life to the definitions and the technical writing, several short clinical vignettes have been included. These vignettes are based on actual families and real events, but have been modified to protect the privacy of both the parents and children.

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## **Editorial Review**

### **Review**

As child psychiatrists, we often come across emotionally disturbed children from broken families in our clinical practice. Research indicates that the emotional well-being of children after parental separation and divorce can often be predicted by the relationship between parents after such a separation. Most clinicians in the field have wondered about how children deal with such dilemmas that are forcibly superimposed on their tender years. In such circumstances, it is not uncommon for children to align with one parent's viewpoint while rejecting outright the other, a phenomenon often referred to as parental alienation. The author of this book, Dr William Bernet, discusses this concept and the accompanying research, while making a fairly convincing argument to introduce this concept in DSM-5 and ICD-11. The author defines parental alienation as when a child, usually one whose parents are engaged in a high conflict divorce, allies himself or herself strongly with one parent and rejects strongly the other parent without legitimate justification (such as abuse or neglect) (p 3). On the basis of a literature review, the author argues that parental alienation may have a prevalence of around 1% of the child and adolescent population in the United States and causes significant impairment in relationships for such children. Furthermore, he suggests that failure to recognize it may lead to unnecessary delays in treatment. The author proposes that this concept needs to be recognized as such and should be included either as a psychiatric disorder or as a relational problem in our future classificatory systems. The initial chapter defines parental alienation syndrome (PAS) as a cluster of characteristic behaviors such as a campaign of denigration led by the child against the alienated parent, lack of ambivalence of the child, and extension of the denigration to family members of the alienated parent. The next chapter thoroughly reviews the 20 reasons why parental alienation should be considered as a diagnostic entity in the upcoming editions of both DSM and ICD. The author suggests that in the newer classification, the syndrome could be clustered with either attachment disorders or relational problems or lumped with the developmental disorders. He acknowledges the overlap in symptoms of parental alienation and parent-child relational problem but argues that PAS merits its own place since there are two separate parent-child relational problems manifested' one between the alienating parent and the child, and another dysfunctional relationship between the alienated parent and the child. The author advocates that by including such a diagnosis, one may be able to shed light on a serious mental condition that has a predictable course that often continues into adulthood (p 110). Making it a diagnosis will help bridge the information among different specialists and get the patient the help needed. It will also permit more research to be conducted on the topic. Dr Bernet has made an excellent attempt to shed more light on PAS, define it, help clarify the controversies around it, and facilitate its inclusion in DSM-5. He further suggests practical criteria to include it as a disorder (in Appendix A) or as a relational problem (in Appendix B). The author provides thorough evidence for the validity, reliability, and prevalence of parental alienation, supporting its integration into DSM-5 while answering the critics of this concept. --Paola Habib, MD

## **Users Review**

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#### **Jose York:**

This book untitled Parental Alienation, DSM-5, and ICD-11 (American Series in Behavioral Science and Law) (American Series in Behavioral Science & Law) to be one of several books in which best seller in this year, here is because when you read this book you can get a lot of benefit into it. You will easily to buy that

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**Wendell Darnell:**

A lot of people always spent their particular free time to vacation or perhaps go to the outside with them household or their friend. Were you aware? Many a lot of people spent they will free time just watching TV, or even playing video games all day long. If you wish to try to find a new activity that is look different you can read the book. It is really fun to suit your needs. If you enjoy the book that you read you can spent 24 hours a day to reading a reserve. The book Parental Alienation, DSM-5, and ICD-11 (American Series in Behavioral Science and Law) (American Series in Behavioral Science & Law) it is rather good to read. There are a lot of people who recommended this book. They were enjoying reading this book. In the event you did not have enough space to deliver this book you can buy the e-book. You can m0ore easily to read this book from the smart phone. The price is not very costly but this book features high quality.

**Gary Lewis:**

The reason? Because this Parental Alienation, DSM-5, and ICD-11 (American Series in Behavioral Science and Law) (American Series in Behavioral Science & Law) is an unordinary book that the inside of the publication waiting for you to snap it but latter it will distress you with the secret the item inside. Reading this book alongside it was fantastic author who also write the book in such wonderful way makes the content interior easier to understand, entertaining technique but still convey the meaning totally. So , it is good for you because of not hesitating having this any longer or you going to regret it. This phenomenal book will give you a lot of gains than the other book have got such as help improving your ability and your critical thinking technique. So , still want to hesitate having that book? If I ended up you I will go to the e-book store hurriedly.

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