

Alternative DSM-IV TR Diagnostic Consideration: Adjustment Disorder with Mixed Disturbance of Emotions and Conduct

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From my perspective, the most appropriate child diagnosis for pathogenic parenting as expressed in a parental alienation process is a Shared Psychotic (delusional) Disorder.

However, such a strong diagnosis, while accurate, may make some mental health professionals uncomfortable. An alternative diagnostic conceptualization for mental health professionals who feel less confident about asserting the presence of the cognitive distortions associated with a shared persecutory delusion would be an Adjustment Disorder diagnosis.

In the case of an Adjustment Disorder diagnosis, the specific stressor would be the child's triangulation into the spousal conflict by the actions and communications (both relational and overt) of the pathogenic parent. The specific stressor for the child's chronic display of symptoms is NOT the divorce itself, but rather the child's ongoing triangulation into the spousal conflict by the actions and communications of the pathogenic parent. While the marital separation has an endpoint in the finalization of the divorce, the child's triangulation into the spousal conflict by the pathogenic parent is chronic, which undermines the child's ability to appropriately adjust to the family dissolution.

DSM-IV TR Diagnosis

Axis I	309.4	Adjustment Disorder with Mixed Disturbance of Emotions and Conduct (chronic)
	V61.20	Parent-Child Relational Problem (child triangulation into post-divorce parental conflict)
Axis II	V71.09	No diagnosis on Axis II (the child's symptom display evidences narcissistic and borderline personality disorder features)
Axis III	None	by report
Axis IV	Problems in primary support (specific adjustment disorder stressor: chronic child triangulation into post-divorce parental conflict)	
Axis V	GAF =	

Application of the DSM Diagnostic Criteria

Criteria A: The onset of the child's symptoms are in response to identifiable stressor and within 3 months of onset of stressor.

The "identifiable stressor" is the child's triangulation into the spousal conflict through the communication to the child of distorted and aberrant meaning constructions regarding the targeted parent. These distorted meaning constructions can be communicated either directly to the child or through emotional communications and relational moves emanating from the pathogenic parent. The onset of this identifiable stressor can occur prior to the actual divorce, during the active phase of the divorce process, or following the marital separation and divorce.

Criteria B: The child's symptoms are clinically significant by either 1) marked distress in excess of what would be expected, or 2) significant impairment in functioning

Both of these criteria are met for the child's symptom presentation, 1) the child's distress relative to being with the targeted parent is in excess of what would be expected from the targeted parent's behavior, and 2) the normal-range parent-child attachment bonding with the targeted parent (i.e., family functioning) is significantly impaired.

Acute: If the disturbance lasts less than 6 months

Chronic: if the disturbance lasts longer than 6 months

Note: regarding the diagnosis of an Adjustment Disorder, the DSM-IV TR explicitly states that **"The specific stressor(s) can be specified on Axis IV."** Therefore, it is on Axis IV that the child's triangulation into the spousal conflict can be noted as the "specific stressor." Personally, I would also specify the child's triangulation into the spousal conflict on the "Axis I V-Code" diagnosis of Parent-Child Relational Problem in order to clearly indicate that while the parent-child conflict is manifesting in the relationship with the targeted parent, the source-origin of this conflict is in broader family relationship dynamics.

Subtypes:

With Depressed Mood

With Anxiety

With Mixed Anxiety and Depressed Mood

I would interpret the child's emotional symptoms as induced rather than authentic to the child's nervous system, so I would tend to avoid the specific emotional identifiers of Depressed Mood and Anxiety, as the use of these specifiers would suggest an authentic disturbance to the child's emotional system rather than an induced disturbance.

With Disturbance of Conduct

With Mixed Disturbance of Emotions and Conduct

In my view, the "Mixed Disturbance of Emotions and Conduct" best captures the comprehensive disturbance to the child's emotional functioning and behavior (including attachment system suppression) that is being induced by the child's triangulation by one parent into the spousal conflict.

Axis II Personality Disorder Qualifier

The DSM-IV TR allows for the specification of Personality Disorder "features" or "traits" on Axis II that may not meet criteria for a full Personality Disorder. Therefore, I would use this ability to specify personality disorder "features" or "traits" on Axis II to indicate that the child's symptom display evidences personality disorder "features" that do not warrant the child diagnosis of a personality disorder.