WORKING WITH MATERNAL ALIENATION IN DOMESTIC/FAMILY VIOLENCE AND CHILD SEXUAL ABUSE

A Resource for Practitioners who deal with
• Issues of violence against women and children
• Issues for survivors of child sexual abuse

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Working Groups
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1. Preamble

This Resource for Practitioners is based on two action research projects on maternal alienation. The first project in 1999, undertaken by Northern Metropolitan Community Health Service (Northern Women’s) in partnership with Adelaide University, first identified maternal alienation and described its strategies (Morris 1999).

The second project, the Maternal Alienation Project, was initiated as a partnership between Northern Metropolitan Community Health Service, Women’s Health Statewide and Adelaide University in 2002-3, to educate services across sectors about maternal alienation and develop practice responses to it. Practice responses were developed in two working groups with practitioners from

1) Violence Intervention Program (Northern and Central) and
2) Women’s Health services in Adelaide,

with the input of an Advisory Group, drawn from a range of government and non-government agencies in South Australia (See Maternal Alienation Project Report). As part of the input into the project was unfunded as a PhD undertaken by the project officer, the project work also received the input of two distinguished researchers who were supervisors of the PhD: Professor Liz Kelly C.B.E., Director of Child and Woman Abuse Studies Unit, London Metropolitan University, U.K.; and Dr Margie Ripper, Senior Lecturer at the University of Adelaide.

This project was designed as a three-year project, but funding shortfalls meant that it completed only eleven months. The project worker and practitioners involved in developing practice approaches were aware that limitations in time meant that this document represents beginnings and suggestions in re-thinking this work with women, children, and
perpetrators of violence and abuse, rather than well-worked out solutions.

Despite the limitations of time, what emerged from this collaborative work was a realisation that an awareness of maternal alienation called for particular approaches to working with:

- women and children who had been subject to violence
- survivors of child sexual abuse and their families
- perpetrators of violence and child sexual abuse

**Best Practice**

This Resource documents these approaches, while also building on the best practice in these areas. We (the project officer, and practitioners in the working groups) consider that best practice is based on:

- honouring and working with the meanings of abuse that women and children give to their experience;
- ensuring that issues of safety for women and children are paramount; this includes ensuring that therapeutic and other interventions do not re-traumatise victims of violence and abuse;
- placing responsibility for violence and abuse wholly with the perpetrator of that abuse, and shaping all aspects of interventions accordingly;
- seeking to work in ways that are transparent and accountable to women and children;
- seeking to minimise the power differentials between service providers and the women and children who receive their services; this includes putting decision-making and control of therapeutic and support processes, as much as possible, into the hands of those who have been subject to the manipulation of power and control against them.

**Domestic violence and child sexual abuse**

Maternal alienation was found to be a feature of both domestic violence and child sexual abuse (Morris 1999). This prompts questions about the similarities of tactics used by perpetrators within domestic violence and child sexual abuse, and the co-incidence of these forms of violence. While recognising the need to understand violence as a continuum (Kelly 1988),
this Resource also deals separately with the suggestions for practice for working with women and children subject to domestic violence, and adult and child survivors of child sexual abuse. Many suggestions for practice are common to both these areas. However, they have been separately dealt with following the design of the Maternal Alienation Project, in which a working group was established to concentrate on both these areas.

Maternal alienation occurs primarily within families. Yet it is important that professionals, and the systems and services within which they work, understand the ways in which maternal alienation also takes place at a systemic level. This is discussed further within this Resource.

2. **Maternal alienation**

Maternal alienation occurs in a context of violence against women and children, whereby perpetrators of abuse deliberately try to destroy the relationship between children and their mother (Morris 1999). Research shows that maternal alienation is used as a strategy of abuse across a continuum of violence and abuse, which includes child sexual abuse, and domestic violence. It is a form of emotional abuse that is used in conjunction with other types of abuse to enforce secrecy, maintain power and control, injure and punish.

Research into the tactics used by child sex offenders to entrap their victims and enforce secrecy show that their strongest target is to break the mother-child relationship (Hooper 1992; Laing 1999). In the area of domestic violence recent reports draw attention to the manipulation and undermining of the mother-child relationship by men who use violence and abuse (Irwin 2002; Mullender 2002).

The 1999 research project on maternal alienation identified that within both domestic violence and child sexual abuse similar strategies are used to undermine the mother child relationship. These strategies both disparage the mother as a figure to be despised, and elevate the father as combination of victim-hero (Morris 1999).
3. The strategies used in maternal alienation

Messages about mothers

- "Your mother doesn’t love you";
- "Your mother is crazy";
- "Your mother is lazy";
- "Your mother is loathsome";
- "Your mother is a bad mother";
- "Your mother is to blame for everything".

Messages about themselves – alienator as victim/hero

- “I’m poor - your mother took everything from me”;
- (with daughters) "Poor me - I need you to look after me";
- (with sons) "As men we're special, and the more you join me in laughing and degrading the females in the family, the more you become a real man like me".

Actions to alienate

- 'Buy' children;
- Stop mothers having contact;
- Threaten or punish children who don’t comply with his regime;
- Hold out 'carrots' – children constantly have to perform to get his notice, affection or approval;
- Tell children to defy their mothers (coach them in degrading and abusive acts towards women);
- Involve community, neighbours, and her family in her degradation.

4. Overview of the strategies

- The strategies are used in powerful combinations, in matrices which lock the meanings of the acts and messages together, which makes it difficult for those at whom these strategies are directed to unravel where they have come from.
- The messages are contradictory and tyrannical. They use rhetorical devices to provoke an extreme emotional response.
• The process of maternal alienation is relentless and ongoing, often for decades.
• They shape children’s views of their mother, their abuse and the environment they live in, in powerful ways.
• They contradict children’s own experiences, and therefore can block their own healing.
• Children are generally not aware that these messages are lies or distortions of events.
• The messages serve to conceal or excuse the abuse that these men perpetrate.
• In blaming mothers, alienators direct children’s anger towards their mothers, and community anger towards the women in these families, who are themselves victims of violence.

5. Effects of maternal alienation

Practitioners have noted a number of severe and ongoing effects of maternal alienation. Documentation of these effects is important in bringing to public and professional awareness the serious and brutal consequences of emotional abuse. They indicate that child protection services, police and courts need to take the occurrence of maternal alienation very seriously, and act appropriately to address it.

Effects on children

• Children’s access to their mothers as their supporters is blocked. Children feel rejected by their mother, or angry with her.

• Children become strongly aligned with the perpetrator of abuse, who then has almost total access to the child and can continue the abuse against him or her.

• Children become entrapped in a world created and controlled by the abuser - the abuser defines and constructs children’s experiences, memories, and their ‘reality’.

• This distorted reality, inconsistent with children’s experience, leads to cognitive dissonance and blocks children’s healing. Children are
persuaded to believe that they can trust and depend on the parent who is violent, unpredictable and unresponsive to their needs, but must distrust their non-offending parent.

• Children are often coached to perpetrate violence and abuse against their mother and their siblings.

• Children who grow up experiencing distorted relationships are likely to develop dysfunctional relationship skills, which may lead to destructive behaviour and problematic parenting and relationships in the future.

• Children's social development is impaired, with children experiencing anxiety, depression, anger, frustration, lack of concentration, delayed development in speech and education, low confidence and self-esteem.

• Children become emotionally isolated, in particular from those who could offer support, such as their mother, siblings and, grandparents.

• Children who reside with the alienator lack appropriate emotional and behavioural guidelines, based on their developmental needs and their safety. They are therefore at risk from harm from themselves and others.

• Many children develop hostility to women which may then be expressed in abusive relationships with women in the future.

Effects on women

• Women tend to blame themselves for the breakdown of their relationships with their children, and believe they are failures as mothers and partners.

• They are seen by others as bad mothers - as neglectful, or having poor parenting skills.

• Women's authority and control over their children has been undermined or destroyed. Their mothering may break down and they may not be able to look after their children.
• They become isolated and alienated from their families and communities.

• Women can 'become' the woman they are told they are, and present poorly to others.

• The effects of maternal alienation combine with the effects of violence, (traumatised, low self-esteem, guilt, shame and self-blame) to incapacitate women. These bring about a situation in which women present poorly to others.

• Women are constantly positioned in a no-win situation which limits their capacity to act positively and strongly. Whatever women do, the alienators adapt and use it to bolster their story.

• Women's sense of reality is skewed by the manipulations of the perpetrator.

• Women often become the focus of professional intervention, and are seen and treated as the problem.

• Women experience enormous pain and grief at the 'loss' of their children.

• Women experience depression and anxiety, and can feel and appear confused.

• The effects of trauma and despair may lead to women appearing indifferent to their children, and generally apathetic. Or they may appear frustrated as nothing works to improve their relationships with their children.

**Effects on mother-child relationship**

• The relationship may break down entirely, and for a lifetime.

• The end result may be that the child is totally aligned with and living with the offending parent, and alienated from the non-offending parent.
6. Systemic maternal alienation

It is important to understand the ways in which the wider socio-cultural context tends to support maternal alienation. There are two problematic practices that contribute to systemic maternal alienation:

1. Tendency to blame the mother

2. Invisibility of the perpetrator

Together they lead to a situation in which the system continues the abuse against the woman, and augments her children's alienation from her, sometimes removing the children from her (Morris 2003).

1. Tendency to blame the mother

Women often become the scapegoats for community and professional incapacity to protect both children and women from male violence and abuse [it is generally agreed that 95% perpetrators of domestic violence and 95% perpetrators of child sexual abuse are male (NIJ Report 1995)]. This is partly due to the socio-cultural aspects of mothering in western English-speaking societies in the late twentieth century and the twenty-first century. An important part of appropriately addressing maternal alienation is to reflect on and guard against the tendencies in our society to unreasonably scrutinise, judge and blame mothers, but not actually support them in their role. The following section details some of this context of mothering.

Socio-cultural context of mothering

• We focus on mothers' faults, not on their strengths. Mothers are often scrutinised and told what to do, but their opinions are not so often sought or valued.

• Mothers are seen as being responsible for everything that happens within families. Children’s problems are attributed to mothers, with little understanding of the contributions fathers and other family members make to children’s development, as well as the wider social context comprising children’s communities, schools, peer group, the effects of poverty, and so on.
• Mothers are expected to be the sole protectors of their children (rather than this being a community responsibility, as well as a shared responsibility with fathers).

• Mothers are judged against unrealistic and impossible expectations that they should be constantly available to care for all family members, including their partner and children, 24 hours 7 days a week, while always being positive, and providing endless quantities of unconditional love.

• Mothers themselves are given little or no support or positive acknowledgement, and yet are expected to constantly put others’ needs before their own. Yet mothering is not considered ‘real’ work, and as such is not adequately paid for. Mothers are often condemned for trying to meet their own needs.

• Mothers are expected to always know what is happening to their children, without being told and without being there.

• In women’s prescribed role as carers for partners and children, it is generally believed that women’s responsibilities and loyalties to partners are in harmony with their responsibilities to their children. When women and/or their children are subject to violence, women as mothers are put in a situation of conflicted loyalties and expectations. This means that for many women, being a ‘good’ mother means becoming a ‘bad’ partner, which often creates for women an intolerable conflict.

• The ideas of ‘good’ and ‘bad’ mothers are moral categories against which women measure themselves, and others measure them. To be seen as a ‘bad’ mother is to be seen as a moral failure.

The manipulation of stereotypes of women and mothers in maternal alienation

The messages used in maternal alienation manipulate these unrealistic and unreasonable expectations of mothers, as well as creating images of women that are monstrous and sub-human. Women are portrayed as malicious and conniving (Morris 1999/2000), while the person who is
manipulating these images is, like the puppeteer, invisible, and free from such judgements.

For practitioners assessing maternal alienation and dealing with its effects, it is crucial to be aware of how these expectations of mothers affect one’s practice, and to likewise help the women and children involved to understand these stereotypes and their consequences in their relationships. Walking the metaphoric middle line is the challenge here, for, in becoming aware of these unreasonable expectations, practitioners should neither expect that mothers should be saints, nor should they believe that women are never abusive, and should not be expected to take responsibility for their abuse. The middle line here is found in the equation whereby our expectations of responsibility are consistent with actual power. To believe that mothers should be solely responsible for the well-being and safety of their children, while removing from them the means to ensure that safety (such as the tendency for women not to be believed in law courts when they allege child abuse (Humphreys 1999); the fact that most single mothers live below the poverty line) is unreasonable, unjust, and dangerous for children.

'The system' and women who have been alienated from their children

Women in 1999 research on maternal alienation reported that they rarely found a professional person who understood that maternal alienation had happened in their family (Morris 1999). Women who have been abused, who have had their children turned against them, and who have had others take up their partners' story about them, can feel in absolute despair and have nowhere to turn. Being at the centre of a campaign of emotional abuse, being blamed and insulted, and yet being expected to care for their partner and children, who hold them in contempt, is not a situation that enables women to see clearly what is happening to them. When they encounter services that do not understand maternal alienation they are readily seen as the problem, their situation with their children can be interpreted as a problem of 'neglect', and services may act against them.

As Mullender et al. point out:

"Mothers who are abused for protracted periods of time typically feel that they have failed as mothers and are encouraged in this view by their abusers who commonly threaten to report them to social services. This
does not necessarily give an accurate reflection of the quality of care the woman gave before the violence started or of the type of parent she would be if she could be helped to feel safe as the head of a lone parent family. Assessments need to look beyond current circumstances and to be conducted by professionals with a good understanding of the dynamics of abuse" (Mullender 2002).

If we are not aware of the complexities of these matters, we may jump to simple solutions, such as holding the mother responsible for not protecting her child. However, it is inappropriate to expect the mother, another victim of the perpetrator, to be solely responsible for protecting her children from an abuser. Furthermore, in taking this stand, we usually don't see the many ways that women do act to protect their children, continually monitoring their partner’s violence, getting their children out of his way, and so on. Very often mothers are condemned for systems' failure to protect children.

2. Invisibility of the perpetrator

Chris Burke refers to the ongoing problem of "the invisible man", the tendency for services to leave out of the picture the man who has perpetrated violence, and to make women accountable for the effects of his actions (Burke 1999).

From his interactions with child protection workers in the U.S. Jeffrey Edleson says:

"I find that the male abuser is almost always missing or invisible. It is true that the legislated goal of child protection is child safety, but how this safety is achieved if the child’s primary caregiver herself is unsafe has always been puzzling to me. It is also puzzling how the mother’s safety can be assured if the person perpetrating violence against her and/or her children is so often left untouched by our interventions" (Edleson 1998 294).

He discusses the many ways in which violent men are invisible in the system, and continues:

"Battered women and other mothers, under whose names cases are often listed, almost always become the focus of efforts to make children safe. This situation sets a foundation for what Susan Schechter has called gender-bias' in the system, one in which women are held to different standards than men" (Edleson 1998 294).
Maternal alienation tends to be invisible

Maternal alienation has been invisible to most people, professional and non-professional, for the following reasons:

- They intervene at a time when they perceive the end result, not the process by which a woman is removed from her children, her community and herself.

- The man has developed a convincing 'spin' and tends to appear more credible and rational than the woman, who shows the effects of abuse in her lack of confidence, lack of self-esteem and fearful responses. As Judith Herman notes, traumatised individuals "often tell their stories in a highly emotional, contradictory, and fragmented manner which undermines their credibility" (Herman 1994 1).

- Children can become aligned with the abuser and their reality is shaped by him. In family assessments their attachment to their father and non-attachment to their mother may be obvious, and may cloud the assessment if the practitioner is unaware of the dynamics of maternal alienation.

- The perpetrator of violence becomes 'invisible' in our systems (see above).

- We tend to direct our efforts at the woman. "Women are often held accountable for not protecting their children, even when they are not the perpetrators of the violence" (Irwin 2002).

- The offender often actively recruits professionals into his campaign.

- We are brought up with degrading stereotypes of women. These stereotypes are manipulated in maternal alienation, to engage our sympathy with the alienator and our sense of moral outrage at the mother.

- The process and purpose of maternal alienation is to disguise the abuse, and hide its traces.
7. Developing practice responses to maternal alienation

- The Maternal Alienation Project operated across sectors, creating relationships with Child Protection systems, Family Court, the criminal justice system, domestic violence services, child and family services, community health. These sectors and others such as schools and early childhood services impact strongly on families who have been subject to violence and abuse, and all can adapt these practice responses to their own circumstances, for the benefit of the women and children they interact with.

- These practice responses can be adapted to one-to-one interventions with women, children, adult survivors, to family interventions with mothers and child(ren), with adult survivors and mothers. They can also be used in therapeutic and support groups.

- They can be used in the immediate work with children, mothers, siblings, non-offending fathers after disclosure of child sexual abuse, and for work with mothers and children during and after domestic violence. They are also applicable to work with adult survivors of child sexual abuse.

- There are correspondences and cross-overs between the work with child sexual abuse and work with women and children in domestic violence. This question of correspondences and co-incidence is enlightening, suggesting there may be more similarities than we’d realised between the tactics used by child sex offenders and those used by perpetrators of domestic violence. This area needs to be researched further.

- It is helpful to the individuals and families involved if these understandings are introduced to all the services involved with the child, woman or family, so that a consistency of approach is developed. This is important in the light of the many inconsistencies and contradictions that the alienator has used to his advantage to confound his victims and divide them from any sense of control or being able to make sense of what is happening.
Principles/Framework

The principles of Best Practice, outlined on page 4 of this Resource are given as the basis upon which the following principles have been developed. The principles for working with maternal alienation remain the same whether working with child sexual abuse or domestic violence.

In response to the tendency to blame the mother, and the invisibility of the perpetrator, positive practice responses should be built on the following principles:

1. **Supporting the mother**

It is important that practitioners support the mother and resist tendencies to blame her or hold her accountable for her partner's violence. This framework recognises that children's well-being will be enhanced by a positive relationship with their non-offending parent. Given appropriate support mothers and children can rebuild their relationships, and mothers can be enabled to support and protect their children in the future.

2. **Making the perpetrator's tactics visible**

Effective work in this area depends on making the perpetrator and his tactics visible and accountable for the violence, abuse and alienation and their effects on women and children. This enables women and children to understand how they were alienated from one another, and puts the responsibility for this on the alienator.
Practice approaches

The mother-child system/alliance

All interactions should be based on the idea that mothers’ and children’s relationships form a system, which the practitioner is helping to rebuild. Practitioners can enable women and children to talk together and develop mutual understandings of their situation and of the violence they have been subject to, and explore together the different meanings they have attached to events. They can help them form an alliance, with common goals and shared activities.

Meeting separately and together

It is beneficial to meet with mothers and children separately sometimes, and together often. Mothers and children might need to express their pain, grief, anger, frustration, and this is best done alone, so as not to exacerbate their alienation. It is generally more appropriate to give information on maternal alienation to women while their children are not present. For children, it may not be helpful to put them in a position where they feel they have to choose between both parents. However, where children are realising some of the tactics used by their father to control them and alienate them from their mother, they may feel more able to discuss this. They may wish to do this without their mother being present however, so they don’t feel they have to ‘protect’ their father’s image. Once perpetrators’ tactics or “tricks” (Whittington 2001) have been identified with children, this can be shared with mothers. Mothers and children can work through these realisations together, as they require making new meaning of past events, and reframing past experiences.

Give information on maternal alienation

Give women information on maternal alienation; explain it and explore its incidence in their families, its effects on them, their mothering, and their relationships with others, particularly their children. Women usually report that this information is liberating for them. It enables them to understand what had been operating in their families, and helps them make appropriate decisions, something that is impossible while they do
not have all the necessary information. Information and the realisation that are not failures allow them to behave differently and initiate changes themselves.

**Uncover the tactics used in maternal alienation**

Where it is possible to interact with programs that work with perpetrators of violence, there is the potential to find out some of the tactics that men have used to divide mothers and children. Realising they have not been responsible for the problems in their relationship can be a very reassuring experience for women and children. The work done with child sex offenders in programs like Cedar Cottage (NSW), where offenders are required to admit how they planned and set up sexual abuse of children, enforced the secrecy, and undermined children's relationships of trust, would be useful also within programs for perpetrators of domestic violence.

Where the tactics cannot be discovered from the men themselves, women and children may be helped to become aware of them in other ways. For example, children can be asked questions that explore the 'reality' they have adopted from the alienator, such as:

- Where did you get the idea that your mother doesn't care about you?
- How did you get the idea that she is to blame for your family breaking up?
- Where did you get the idea that your mother took everything from your father?

Help mothers and children trace the effects of these messages on them and their relationships with other family members. By making the strategies and messages visible, they begin to unravel and lose their power.

**Develop an alternative narrative**

Alternative images and narratives of mothers and children can be developed to stand up to the distortions and lies that are part of maternal alienation. Finding out how mothers have protected their
children from the violence - something that has probably been invisible to
the women and children involved - can become the basis of a new and
positive narrative about a mother.

Questions can be asked to explore what mothers value and love in their
children, and what children value and appreciate about their mothers.
These stories can be enriched by further questions, and the use of
devices such as the Strength Cards (St. Lukes’ Innovative Resources), to
bring attention to the positive qualities and actions that have been made
invisible by maternal alienation. Find examples from children’s own
experiences of their mothers' actions that contradict the alienating
messages. Build on and enrich these ‘alternative narratives’ by examining
them in more and more detail, and by engaging mother and child in how
these positive experiences of one another can be strengthened in the
future.

Other useful questions are:

• What do you like and love about (mother/child)?

• How does it make you feel to hear your mother/child say (s)he loves
  those things about you?

• What can you do to have more of that in your life?

Respect

Model respect towards the mother to counteract children’s belief that
she is not worthy of respect. This will also help her rebuild her
confidence, shattered by the violence/abuse. Encourage other services or
key people in the woman’s and child’s lives to treat her with respect. This
respectful attitude can then become part of an alternative behaviour
towards her. When children see their mother treated with respect by
people of authority it can counteract the authority of their father’s acts
of disrespect.

Using authority positively

When maternal alienation takes place, mothers are positioned as the ones
least able to make changes. A mother’s words are discredited before she
even utters them, and her actions are reviled before she takes them. Whatever she does, she has been painted as the mad one, the bad one, the stupid one, the one who can’t be trusted. Her children will not listen to her or cooperate with her. Professional interventions that put pressure on her to make changes within the family such as changes to children’s behaviour, exacerbate this situation. From this point, problems tend to escalate, with the woman being seen more and more by practitioners as the cause.

What is needed from practitioners is understanding of how maternal alienation has operated to disempower and discredit mothers. Their role as an outsider and an authority figure is important here in generating change. By following the suggestions for practice in this Resource, practitioners can work with mothers and with children to counteract the messages of maternal alienation, and make space for different ways of seeing one another and interacting together. Practitioners can use their authority positively to counterbalance the power and status of the alienator’s voice, and to generate alternative narratives and behaviours.

**Advocacy and information giving**

Practitioners that are working in these ways report that their positive work is rapidly undone by services that are ignorant of maternal alienation and unwittingly reinforce the negative conditioning set up by maternal alienation. On the other hand, they have found significant changes when they have worked together with these services to address the family’s problems. Therefore, it appears that it is important for practitioners to educate services that interact with mothers and children on the effects of violence and maternal alienation, so they too can support them and not become a part of the problem. Inasmuch as maternal alienation operates with family and community foundations, services that collaborate in 'joined-up' responses to support mothers and children will produce strong foundations for enhancing the relationships between mothers and children. Furthermore, collaborative approaches develop consistency in the way a family is treated. This is also important to counteract the many inconsistencies and contradictions that the alienator has used to confound his victims and remove their sense of control or understanding.
III Maternal Alienation and Child Sexual Abuse – Practice Responses

These practice responses were developed for support and therapeutic counselling with adult survivors of child sexual abuse (CSA) and incest, for use individually, with family members, and also for application in groupwork. However, these responses can also guide interventions with victims of child sexual abuse and incest – child, siblings and non-offending parents – soon after disclosure.

Principles/Framework

The principles of Best Practice, outlined on page 4 of this Resource, are given as the basis upon which the following principles have been developed. The principles for working with maternal alienation remain the same whether working with child sexual abuse or domestic violence.

In response to the tendency to blame the mother, and the invisibility of the perpetrator, positive practice responses should be built on the following principles:

1. Attending to mother-blame and disruptions in relationships with important others

Soon after disclosure of CSA, it is important to support children’s relationships with their mothers, and resist tendencies to blame her or hold her accountable for the perpetrator’s abuse. The mother’s position in CSA has been a difficult one, caught within a professional culture of mother-blame that has taken many forms over the years (Hooper 1992; Humphreys 1994; Freer 1997; Humphreys 1999). It is therefore an important principle of this work to not join in pillorying the mother, but understand that mothers and other non-offending family members have also been victimised by perpetrators’ emotional and psychological abuse, in particular by their tactics to divide and isolate. Given appropriate support, mothers and children can rebuild their relationships, and
mothers can be enabled to support and protect their children in the future.

When working with adult survivors of CSA, it is still important to attend to the relationship with the mother, but this needs to be done in a different way, acknowledging that for many years this relationship has been a casualty of CSA, and may for many years have been a source of pain.

2. Making the perpetrator's tactics visible

Interventions need to make all those involved aware that the perpetrator and no-one else is to be held accountable for the abuse and its effects on victim/survivor and those close to him/her (most likely to be mother and siblings). The perpetrator's tactics to entrap, enforce secrecy, shift blame and responsibility, and destroy relationships of trust, need to be discovered and exposed as much as possible.

Practice approaches

Safety of client is paramount

The practitioner needs to be guided by what is happening for the client, and see that clients' control over the intervention isn’t undermined. The client’s safety is the guiding principle, and this includes taking care that interventions do not retraumatise him/her. In working with all the issues outlined in this Resource, timing and sensitivity to the needs of the client are paramount.

Anger and blame toward mothers

Knowledge of maternal alienation and the deliberate strategies to alienate children from mothers within child sexual abuse - strategies to isolate, entrap, enforce secrecy, shift blame - adds a further dimension to the work with child sexual abuse already developed and based on feminist principles. Practitioners report that the majority of survivors of CSA and incest are more angry with their mothers ‘for not protecting them’ than with the perpetrator of the abuse. This displacement of blame
and anger appears to be a direct result of maternal alienation. The undermining of the mother-child relationship (Laing and Kamsler 1990; Hooper 1992) has created a source of ongoing loss for the child and mother, and affects the rest of the family as well.

This injustice needs to be addressed in some way. Yet, the longer it has been allowed to become the status quo between victim/survivor and her mother, the more difficult it is to address. Maternal alienation and the tactics of the perpetrator have formed particular relationships between mother and child which may well be problematic. These problems are compounded by the many complex and contradictory issues that besiege mother and child individually and in their relationship after disclosure of CSA, amongst them what Dwyer and Miller call "disenfranchised grief" (Dwyer and Miller 1996). If there has not been early intervention to support children, mothers and other family members in dealing with these difficult issues, and in overcoming the distortions caused by maternal alienation, there are likely to be years ahead of misunderstandings, pain, anger and blame. Those who work with adult survivors of CSA may find that a survivor’s relationship with her/his mother may be too difficult to work with. In these cases, practitioners may need to work with their clients through their grief and pain at losing this relationship.

Work in this area with adult survivors obviously takes time and requires sensitivity to their needs. Yet questions can be posed that begin to loosen the rigidity of much of this anger towards mothers. Questions that help reframe the abuse:

- In talking about betrayal, “I was really curious that you feel betrayed by your mother, but not by the abuser”;

- “What were some of the tactics the perpetrator used to entrap you?” “What were the effects of these on you? On your relationship with…. (mother, sister, etc)?”

- “Why didn’t your father protect you?” (instead of question being asked of the mother);

- “Where did the idea that your mother knew (or was somehow responsible) come from?”
• "What is it that makes it possible to feel forgiveness for the person who abused you, but not for your mother?"

**Challenging dominant constructions of mothers**

As maternal alienation manipulates so effectively the dominant socio-cultural constructions of mothers, it is necessary as part of this work with mother and child or adult survivor, to discuss how these constructions have shaped the views that victims/survivors hold of their mothers. Challenging these unhelpful constructions of mothers and becoming aware of how these beliefs impact on the way we carry out this work is important for practitioners as well. Particularly in cases of CSA, mothers are judged for not living up to constructions such as 'the protective mother', 'the all-knowing mother', 'mother the mind-reader', 'the perfect mother', etc. Challenging these expectations one can discuss whether it is fair to expect only the mother to protect (while many services and institutions that are far more powerful fail to protect children, and while fathers are not judged against these measures), and also discuss the common notion that the mother knew, "or should have known".

**Contextualising the mother's position**

Part of addressing the injustice to the mother is to help adult survivors of CSA to contextualise their mother's position, such as their relative position of power within family and community. This is an important part of the picture, given that a perpetrator of CSA has manipulated and acted against the mother as well, and she may also be a victim of other types of violence or abuse. It is also important to question whether the mother really did know that the abuse was happening (which victims of abuse generally think is so, but which research shows is not often the case), and about their knowledge about CSA in general. Part of this picture is considering the effects of mothers' position of conflicting loyalties to partner and children, or offending son and victim daughter.

To understand the position of victims/survivors and that of their mothers it is also necessary to situate this work within an understanding of child sexual abuse and domestic violence as male misuse of privilege, power and control.
**CSA embedded in severe emotional abuse**

From understanding the embedding of incest and CSA in powerful and severe emotional abuse, it becomes necessary to develop responses to address this. It may be helpful to explore the idea that a victim/survivor's story may be to some extent the perpetrator's story, as he has been the major influence shaping her view of herself, her abuse, her mother, her siblings, her community, her reality, and of the perpetrator himself. Anna Salter draws our attention to the offence itself as "merely the weed that appears above the surface; it is supported by a vast network of roots - [perpetrator's] thinking errors, deviant arousal patterns, SUDs [seemingly unimportant decisions], planning and grooming activities, target selection, techniques for maintaining secrecy. ... To understand the sequelae of sexual assault, one must understand how each of these is processed and internalized by the survivor" (Salter 1995 102).

The perpetrator has also been active in creating an image of the 'victim' in the eyes of all those in her orbit - mother, siblings, grandparents, neighbours, friends, school community, and so on. This deliberate entrapment and alienation is an essential and profoundly destructive aspect of CSA, yet on the whole, the victim and family are usually blind to it (Laing and Kamsler 1990). Practitioners may also be blind to it in their responses to CSA.

A result of this alienation and isolation is that victims/survivors can be quite unaware of how others have been affected by the perpetrators' tactics. Working through these effects on all involved, and the deliberate strategies used to isolate and distort, can be part of helping victims/survivors to recreate their relationships with important others.

**Making perpetrators' tactics visible**

As Cathy Humphreys emphasises, "Crucial information from offenders, such as how the abuse was set up, what things were said to the child about the mother, how the secrecy was maintained, what steps were taken by the abuser to make sure that the child would be disbelieved, can be asked when the role of the abuser is centralised and understood" (Humphreys 1994), 52). The work of exposing these tactics is being undertaken with offenders and their families at Cedar Cottage in NSW. Offenders are required to admit how they isolated and entrapped the
child and maintained the secrecy. Mothers and children have usually been unaware of the extent and sophistication, the planning and the thoroughness of these tactics. Knowing how they have been set against one another, and understanding where their difficulties come from, they are usually able to rebuild trust and understanding, with the mother becoming an active player in protecting and supporting her child.

However, we need to develop ways of uncovering the tactics used to damage this relationship when there is no way to discover them from the offender himself. Helen Whittington, in her work with children and their mothers after disclosure of CSA, helps them identify the "tricks" the perpetrator used, and the wedges that are put between them (Whittington 2001). When working with adult survivors this can be a very difficult, if not impossible task. A diagram that graphically illustrates how perpetrators operate in creating webs to entrap their victims is useful in helping victim/survivors understand these hereto invisible tactics. The diagram shows how the perpetrator creates such a web in his control over every relationship the child has. He is the one who comes between child and mother, child and sister, child and brother, child and school, child and doctor, child and neighbour, and so on. He is constantly and actively disrupting these relationships and constructing an image of the child as problematic, perhaps also the mother as problematic, and as himself as victim/hero. As emphasised before, he works most actively on the mother child relationship. See diagram on page 27.
Diagram 1

Illustrating web-like structure of communication created by child sex abuser to entrap and isolate child.

perpetrator

mother

siblings

grandparents

abused child

school

friends

professional workers

neighbours

Alienated, distorted relationship

Perpetrators ongoing messages about child
Maternal alienation is one powerful way in which demeaning attitudes and disrespectful and abusive behaviours to women are passed on from one generation to the next. Where maternal alienation has not been addressed, children are likely to continue these behaviours towards their mothers, and again in their adult relationships. Within a shorter time span, the casualties of maternal alienation are great, with youth homelessness, drug and alcohol use, depression, anxiety, young people’s violence to mothers, being amongst the many outcomes.

Recognising maternal alienation, and working effectively to address it, then, become important factors in an early intervention/prevention framework. Effective service responses to women and children are also preventative measures, leading to a range of positive outcomes, one of which would be to remove many of these families from the need for recurring services.

The following table (p. 29) outlines how awareness and effective practice responses would impact within a preventative, early intervention framework.
### Table 1: How integrating awareness of maternal alienation would change responses and outcomes

<table>
<thead>
<tr>
<th>PROBLEM</th>
<th>CHANGES TO SERVICE RESPONSE</th>
<th>EARLY INTERVENTION/PREVENTION OUTCOME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mother and child alienated by strategies of perpetrator of violence</td>
<td>Support mothers and children to understand this and then build a new alliance, to re-form as a family</td>
<td>Prevention of family breakdown and youth homelessness in aftermath of violence</td>
</tr>
<tr>
<td>Children unable to access their mother as main supporter due to maternal alienation</td>
<td>Models of Practice that enhance mothers' support of their children, and allow children to access their mothers as the main agents of their own protection</td>
<td>Decreased need for statutory bodies to be involved in protecting children. Decreased need for other services to be involved in the future (mental health, drug &amp; alcohol, criminal justice, etc)</td>
</tr>
<tr>
<td>Demeaning and disrespectful attitudes to women are taught within families</td>
<td>Work with children, young people and women on gender stereotypes, especially how they construct mothers</td>
<td>More positive community attitudes to women, more realistic perceptions of mothers/motherhood, better future relationships.</td>
</tr>
<tr>
<td>Children coached to commit acts of abuse and disrespect to their mothers</td>
<td>Explicit work with children and young people, possibly using an adaptation of the Power and Control wheel, facilitation of discussions between women and children.</td>
<td>Decreases in adolescent violence to mothers. Decreases in violence against women in future relationships. Decreases in abuse of elderly women by adult children.</td>
</tr>
<tr>
<td>Inappropriate responses by agencies which blame women and further damage family relationships</td>
<td>Professional training across services and sectors providing new models and tools</td>
<td>Increased safety and well-being for women and children. Decreased family breakdown post separation. Decreased reception of children into care.</td>
</tr>
<tr>
<td>Gaps in knowledge of DV perpetrators' deliberate use of strategies to manipulate, punish and control.</td>
<td>Enhanced perpetrator programs which explicitly address ways children are abused, manipulated and alienated from their mothers.</td>
<td>Increased effectiveness of programs. Decrease in children being used in custody disputes, and/or as a route to tracing/controlling the woman.</td>
</tr>
<tr>
<td>Lack of knowledge of maternal alienation in Family Court.</td>
<td>Training for Family Court officials.</td>
<td>Better living and contact arrangements for children.</td>
</tr>
<tr>
<td>Lack of knowledge in criminal justice system of DV perpetrators' deliberate use of strategies to manipulate, punish and control.</td>
<td>Training for professionals in criminal justice system</td>
<td>Better understanding amongst police officers and prosecutors resulting in enhanced law enforcement and appropriate sanctions and controls on perpetrators.</td>
</tr>
</tbody>
</table>

(Morris 2003b).
V References

U.S. Department of Health and Human Services.


VI Appendix

Working Groups
In the working groups, the Project Worker worked with:

1. Workers from Violence Intervention Program (Central and Northern), working on practice responses to domestic violence:
   Dina Sorvanis, Emma Angel, Lou Blackie, Beverley Ramsay, Julie Felus, Liz Teesdale-Smith, Andrea Gregory, Ceridwyn Owen, Elaine Lloyd.

2. Workers from Women’s Health services (Dale Street, Northern Women’s, Southern Women’s, Women’s Health Statewide) working on practice responses to working with adult survivors of child sexual abuse:
   Celia Karpfen, Fran Noack, Ann Horskins, Brenda Lennon, Maria Fiorito, Beth Tinning, Glenda Sudholz, Marg Rowntree.

Advisory Group
Agencies represented:
Central VIP, Northern VIP, Southern Women’s, Northern Women’s, Dale St Women’s, Women’s Health Statewide, Centacare, Family and Youth Services, Northern Domestic Violence Service, Western Domestic Violence Service, NE Domestic Violence Service, Child and Adolescent Mental Health Service, Northern Metropolitan Community Health Service, Adelaide Central Community Health Service, Inner Southern Community Health Service, Murray-Mallee Health Service, Side Street (Adelaide Central Mission), NADA, Family Court.
Other agencies were invited but did not attend or participate.

Reference Group
Agencies represented:
Northern Metropolitan Community Health Service, Women’s Health Statewide, Adelaide University, Office for the Status of Women, Coalition of Women’s DV Services, Department of Human Services, Family and Youth Services, Child and Adolescent Mental Health Service, Family Court, Attorney-General’s Department, NW Children & Families Integration Program, Child and Woman Abuse Studies Unit, London Metropolitan University, U.K.