



Papeles del Psicólogo

ISSN: 0214-7823

papeles@correo.cop.es

Consejo General de Colegios Oficiales de Psicólogos
España

Vilalta, Ramón; Winberg Nodal, Maxime
SOBRE EL MITO DEL SÍNDROME DE ALIENACIÓN PARENTAL (SAP) Y EL DSM-5
Papeles del Psicólogo, vol. 38, no. 3, 2017, September-December, pp. 224-231
Consejo General de Colegios Oficiales de Psicólogos
España

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ON THE MYTH OF PARENTAL ALIENATION SYNDROME (PAS) AND THE DSM-5

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El presente artículo aborda la controversia surgida sobre la existencia del Síndrome de Alienación Parental (SAP) o cualquiera de sus denominaciones alternativas. Las críticas al SAP comprenden argumentos de diferente naturaleza: desde las críticas sobre la personalidad del creador del término, hasta la más repetida de que el SAP no consta en el Manual Diagnóstico y Estadístico de los Trastornos Mentales DSM-5. En este artículo se analizan algunas de esas críticas en el contexto judicial español, en particular por su relevancia, las expuestas en la Guía práctica del Grupo de Expertas y Expertos en violencia doméstica y de género del Consejo General del Poder Judicial (CGPJ), publicada en 2016; y se argumenta cómo el SAP sí que es ampliamente reconocido por la comunidad científica y profesional, y puede ser descrito y clasificado en el DSM-5 como un "Problema de relación entre padres e hijos V61.20 (Z62.820)".

Palabras clave: Síndrome de Alienación Parental, DSM, Divorcio, Niños, Distanciamiento afectivo.

This paper discusses the controversy over the existence of Parental Alienation Syndrome (PAS) or any other name it may be given. The negative judgements regarding PAS are diverse in nature: from criticism about the personality of the term's creator, to the most repeated criticism that PAS does not exist in the Diagnostic and Statistical Manual of Mental Disorders DSM-5. This paper analyzes some of these criticisms in the Spanish judicial context, especially those exposed in the Guidelines of the Group of Experts on the Fight against Domestic and Gender Violence of the General Council of the Judiciary (CGPJ), published in 2016. It is argued that PAS is widely recognized by the professional and scientific community and may be described and classified in the DSM-5 as a "Parent-Child Relational Problem V61.20 (Z62.820)".

Key words: Parental Alienation Syndrome, DSM, Divorce, Children, Estrangement.

The Magistrates of the Group of Experts on Domestic and Gender Violence of the Spanish General Council of the Judiciary (CGPJ), at a meeting held on October 13, 2016 approved the Guidelines to Organic Law 1/2004, of December 28, on Measures of Integral Protection against Gender Violence (Carmona et al., 2016). In chapter X of these guidelines, four pages of comments are included about what is known as Parental Alienation Syndrome (PAS), under the heading "Other aspects to consider in the Jurisdictional Activity". We submit to analysis the above mentioned chapter, because—in its brevity—it is intended to dictate doctrine in the forensic field and may serve our analysis of the myth about the non-existence of the PAS phenomenon, based, among other arguments, on its lack of inclusion in the diagnostic classifications, a specific issue on which this article focuses. The problem is of great interest for the work of all legal actors affected by these issues, given the prestige of the CGPJ and the

possible implications of these guidelines at the level of legal and forensic practice.

DEFINITION OF PAS

Gardner (1985) coined the later controversial term *Parental Alienation Syndrome* (PAS), which here we will consider equivalent to the more currently used *Parental Alienation* (PA), mainly within the context of a contentious divorce. Typically with PAS the child repeatedly rejects and criticizes one of their parents. The criticisms are unwarranted or clearly exaggerated. The children speak of the "hated" parent in derogatory terms, without feeling embarrassed or guilty for doing so. Sometimes their discourse flows immediately with the very first question from someone related to the conflict (lawyers, judges, mental health professionals, etc.) and takes on the appearance of "a litany". Sometimes it can even be observed that the discourse and the lexicon of the child are very similar to those of the other parent, to whom they claim to feel exclusively attached. This rejection is a complex process in which both of the parents as well as the child all play their role. In PAS, one parent models or programs the child to reject the other parent. In addition to the brainwashing messages coming from the

Received: 21 abril 2017 - Accepted: 22 mayo 2017

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adult, the child must make their own contributions to the rejection, showing that they have acquired independence in their speech and behavior to maintain it. Obviously, during the psychological evaluation, the existence of actual maltreatment must be discarded, which would be incompatible with the diagnosis of PAS (Gardner, 1992).

This situation has been dealt with using other words by many other authors before and after Gardner as in the description of Duncan's (1978) "programming parent", or what Wallerstein and Kelly (1980) called "Medea Syndrome", a terminology also adopted by Jacobs (1988). Other terms that partially allude to the same concept have also been proposed, such as Blush and Ross's (1987) "SAID" syndrome (Sexual Allegations In Divorce); the term "parentectomy" of Williams (1990); the "malicious mother syndrome" of Turkat (1995); the "parental alienation" of Darnall (1999); or the reformulation of the "alienated child" by Kelly and Johnston (2001). In Spain, Granados (1987) defined some characteristics of these highly conflictive situations, highlighting the irrational aspects of these family conflicts. Subsequently, Ramírez, de Luis and Ibáñez (1994) referred to these situations, comparing them with "Stockholm syndrome." In recent years, the study of the term PAS has been extensive in our country (Arce, Fariña, & Seijo, 2005; Aguilar, 2004, 2014; Bolaños, 2002; Junco, Nieves, & Fernández, 2014; Luengo & Coca, 2007; Muñoz, 2011; Segura, Gil, & Sepúlveda, 2006; Tejedor, 2006; Vallejo, Sánchez-Barranco, & Sánchez-Barranco, 2004; Vilalta, 2011).

In spite of this variety of works and terminology regarding PAS, the aforementioned guidelines intend to censor its use no matter what the denomination, namely: "The use of so-called 'Parental Alienation Syndrome' (hereinafter PAS) or that of an alternative name but with the same virtuality..." (Carmona et al., 2016, p. 271). This premise makes any analysis of the problem impossible and falls under the approach that Carbó (2011) calls fanatical denialism of PAS, emulating nominalist controversies that have already been dealt with successfully by others (Arch, Molina, & Jarné, 2008; Chacón 2008) and that focus the study of the subject in philosophical terms and not as a behavioral problem of a psychological nature.

Regardless of the nominalist debate, if in the forensic context the best legal interest is to protect children from any ill-treatment, it is necessary to describe the behaviors and manifestations that define each specific case. This careful task is carried out by the people working in the Administration of Justice, without entering into nosological discussions, and taking great care to verify that when a rejection occurs, it does not happen because the minor has suffered a situation of ill-treatment, which would justify their immediate protection.

CRITICISMS AGAINST THE EXISTENCE OF PAS

The criticisms of PAS that we are going to examine, following chapter X of the Guidelines (Carmona et al., 2016) can be

grouped into three different arguments: those that include disqualifications of Gardner's personality and the orientation of his work; clinical criticism and criticism of the scientific consensus regarding the PAS construct; and, lastly, those that are alleged to be based on jurisprudential contents.

"AD HOMINEN" CRITICISMS

The group of experts of the CGPJ maintains that Integral Law 1/2004 on Measures of Comprehensive Protection against Gender Violence has led to the emergence of reactions to minimize it, considering the use of "Parental Alienation Syndrome" as one of these reactions. They refer to PAS as a resource that was created by Richard Gardner (1985), a psychiatrist who, in a footnote (citing a judgment of Section 6 of the Provincial Court of Vizcaya of 27-3-2008), is accused of pedophilia (Carmona et al., 2016). It is surprising that he is not also accused of being a fortune-teller, since the psychiatrist created his resource in the United States, some 19 years before the Integral Law was published in Spain. Employing an 'ad hominen' fallacy to criticize someone's work is a resource lacking in subtlety, as those who employ it do not seem to have another line of argument within their reach.

This fallacy seems to be a frequent resource. The text of the Group of Experts cites in a footnote Dr. Fink, former President of the American Psychiatric Association, who in March 2010 stated that the "parental rights groups" had asked the working group of the DSM to include PAS because they did not like to be bothered when they were abusing their children (Fink 2010). However, in May it was retracted in the same publication:

"I apologize for suggesting that all fathers who accuse mothers of PAS are sexually abusing their children. That was clearly an overstatement that I retract... I do not deny that parental alienation occurs and that a lot of people are hurt when there is an alienator (quoted in Lorandos, Bernet, & Sauber, 2013, p.494).

However, one of the conceptually correct elements of the aforementioned text of the Expert Group should be noted here, which also serves to disconnect this syndrome definitively from the object of the Law against Gender Violence, when it recognizes that even Gardner excluded the application of his theory in cases where there was evidence of a situation of violence, abuse or neglect. Indeed, Gardner (1985, 1992) mentions right from the introduction that the term is only applicable when the rejected parent has not shown behaviors that justify this rejection from their child, making it clear that he spoke of other situations with which he established a clear differentiation.

However, the Group of Experts insists on linking the so-called PAS with the Gender Violence Act, and alludes to the work of Escudero, Aguilar, and de la Cruz (2008a, 2008b) in which they denied the existence of PAS as a pathology that involves medical treatment, which at the time was irrelevant in DSM-5 terms because "the diagnosis of a mental disorder does not



equate to a need for treatment" (American Psychiatric Association, 2014, p.20); although they did save the denomination of the phenomenon as PA: *"The present work focuses exclusively on the construction of Gardner's 'parental alienation syndrome' or PAS. It does not therefore refer to the concept of 'parental alienation' with which it can be confused, largely due to its grammatical similarity"* (Escudero et al., 2008b, p.286).

Also published in 2009 was a book advising against using the PAS diagnosis as *alleged* (Váccaro & Barea, 2009). The authors, at the end of the book, also recognized this type of child manipulation. See *Apéndice 1 - Algunas consideraciones [Appendix 1 - Some Considerations]* in the book:

Nothing in this book denies that in some controversial divorces, children cannot be manipulated by one or both parents. For my part, I know that this happens –albeit to a lesser extent than it is believed and supposed– and in general, this action ends up chronifying a litigation that seems to have as a single objective of the couple, "never to separate" ever, although the link that they establish from that moment, is a judicial one and no longer is it love that is at stake but rather power (Váccaro & Barea, 2009).

Indeed, although money is the generalized reinforcer par excellence, perhaps in this case series it is power, namely: *"the possibility of having contingencies that affect the behavior of others"* (Pérez, 2004).

Power, a generalized reinforcer of one or the other parent and the contingency of their action, is also a motivation whose interpretation can be contemplated from within normal psychology without recourse to psychopathology. We fully agree with these authors when they recommend an individualized study of each case.

PSEUDO-CLINICAL CRITICISMS

At the heart of the debate, the above-mentioned Group of Experts aims to issue an authority argument that affects general forensic practice, and it does so through this other type of fallacy, which consists specifically in stating that Parental Alienation Syndrome does not appear in any of the international statistical diagnostic classifications on mental and behavioral disorders, and therefore, in spite of its resonance, it does not exist:

However, in spite of the diffusion and popularization of this alleged syndrome in our country, PAS has not been recognized by any professional or scientific association, having been excluded from the two major mental health diagnostic systems used worldwide, the DSM-V of the American Psychiatric Association, and the ICD-10 of the World Health Organization (Carmona, et al., 2016, p.272).

A "syndrome" was defined by DSM-IV-TR as *"a group of signs and symptoms based on their frequent co-occurrence, which*

may suggest a common pathogenesis, evolution, family history or therapeutic selection" (APA, 2002, p.921). We admit the use of this term on multiple occasions, in fact in Integral Law 1/2004 itself, when in the first section of its Exposition of Motives it mentions another syndrome:

There even exists a technical definition of the syndrome of the abused woman, which consists of "the aggressions suffered by a woman as a result of the sociocultural conditions that affect the masculine and feminine gender, placing her in a position of subordination to the man and manifested in the three basic relationship areas of the person: mistreatment within intimate partner relationships, sexual assault in the social life, and harassment in the workplace" (Integral Law 1/2004, p.42166).

We would all agree that it is ridiculous to attempt to deny the existence of abused women by the mere fact that such a syndrome did not appear in a medical classification.

In fact, the new version of the DSM-5 no longer distinguishes between disorders and syndromes, and, in any of its versions, it is basically a convention of specialists on the state of the question at a given time, because its criteria are variable in time.

The DSM system included homosexuality among its disorders until 1973, and 17 more years went by until the World Health Organization (WHO) excluded it from the International Statistical Classification of Diseases and Other Health Problems (Colegio Oficial de Psicólogos, COP, [Spanish Psychological Association], 2017). On the other hand, different problems that do not appear among the disorders included in these classifications, also occupy researchers and deserve the attention of mental healthcare professionals, without this being reason for the professional to avoid describing them. We can take a new example, "internet addiction", under whose name congresses and conferences are convened, scientific articles are written and clinical care is dispensed. Nobody is worrying about preparing documents or public petitions to suspend such psychological studies, evaluations or treatments, due to them not yet being included in the DSM or ICD diagnostic and statistical manuals. Lastly, DSM-5 still maintains 'gender dysphoria' as a disorder, which was previously classified as F64.x 'Sexual identity disorder' (DSM-IV-TR, 2002), continuing to pathologize transgender and transsexual individuals.

In conclusion, all of the classification manuals have included disorders that have later been eliminated; there are also disorders that are not currently listed but are likely to appear in the future; and perhaps others are retained which will not be included later. Therefore, it cannot be considered that the inclusion or exclusion of a **complex relational and behavioral phenomenon** in these classifications, should provide decisive conclusions about its existence.

Similarly, the Group of Experts (Carmona et al., 2016) also



supports its argument with a 1996 statement from the American Psychological Association (APA) Working Group on "Violence and Family", which they aim to make pass for their official position. However, they fail to cite the press release of 1 January 2008, in which the APA stated that it has no official position on this alleged syndrome, and in which, of course, it appeals to practitioners to take any reports of violence within the family very seriously (APA, 2008).

It could be argued, on the contrary, that several associations include this problem of PAS as belonging to the study of forensic psychology (Asociación de Psicólogos Forenses de la Administración de Justicia [Association of Forensic Psychologists of the Spanish Administration of Justice], 2016; Asociación Iberoamericana de Psicología Jurídica y Forense, [Ibero-American Association of Legal and Forensic Psychology], 2016) as it appears in different psychology manuals (Puckering 2010; Venzke 2010). We can also mention the extensive bibliography contained in the articles by Bernet, Von Boch-Galhau, Baker and Morrison (2010), and Bernet and Baker (2013).

Meta-analytic studies are also beginning to appear, which recognize the growing number of papers concerning the phenomenon as well as the limitations in the empirical status of research on Parental Alienation (Mendes, Bucher-Maluschke, Vasconcelos, Fernandes, & Costa, 2016; Saini, Johnston, Fidler, & Bala, 2012). These limitations are intrinsic to the difficulty of the empirical study of such situations:

As Saini, Johnston, Fidler and Bala (2012) specify in their article, there are significant methodological limitations in the research on PAS, but it is also difficult to think how to obtain a random sample of cases of parental alienation that meets such requirements. The limitations of the research do not question the existence of relevant research on the phenomenon, which goes far beyond informal observations or anecdotal cases. (Hynan 2015, p.201)

In other words, it proves to be another myth that there exists such a consensus in the rejection of the professional associations or the scientific community towards the phenomenon of PAS or PA; rather it seems quite the opposite. Even those who are most critical acknowledge its existence in contradiction: *"The biggest paradox of PAS is that it helps to generate the conditions of a second PAS, now inversely since it is against the parent diagnosed as the alienator, and about the child..."* (Escudero et al. al., 2008b, p.307).

The situation posed by the detractors of PAS with this pseudo-clinical argument, is reminiscent of the dispute between the Jesuit professors with Galileo on the existence of sunspots, because they did not appear in the Bible and they involved recognizing a defect in the "perfection" of the sun. It was of no interest to those individuals to look through a decent telescope in order to see for themselves and draw the logical conclusions. Sunspots existed for them, when finally the ecclesiastical authority concluded, independently of Galileo's observations,

that the sun could have defects because in the Bible it was already stated that Joshua had stopped the sun (a defect) when he asked Yahweh to allow him a longer day in order to kill the Amorites (Joshua 10:13); and because if Job managed to stop the sun from shining (Job 9: 7), it would also be due to a stain (Beltrán Martí, 2005).

CRITICISMS BASED ON PSEUDO-JURISPRUDENTIAL ARGUMENTS

The CGPJ Expert Group also sets out in its recommendations a legal or jurisprudential argument. In the first place they cite the aforementioned Judgment of the 6th Section of the Provincial Court of Vizcaya, March 27, 2008; reiterating in addition the same arguments of their previous exposition of 2013 (Montalbán et al., 2013) that has already been mentioned here. They add references to two later Judgments:

In this sense, the Supreme Court Judgment 162/2016 of 16 March 2016, as well as Judgment 399/2015 of the 6th Section of the Provincial Court of Malaga of June 30, reject the aforementioned syndrome, when stating that *"parental alienation syndrome, known as the set of symptoms that result from the process by which a parent, through different strategies, transforms the consciousness of their children in order to prevent, hinder or destroy their links with the other parent, until it contradicts what would be expected of their condition, the alienating parent succeeding in provoking through a message and a program constituting what is normally called 'brainwashing', developing in their children who suffer from this syndrome a pathological and unjustified hatred towards the alienated parent. This Chamber shares the deep scientific doubts about the existence of this syndrome, and, if it does exist, its causes, consequences and solutions, nevertheless, without entering into this debate (...)"* (Carmona et al., 2016, p.274).

Notice that the judgment that is transcribed does not enter into the debate about the existence or non-existence of the abovementioned syndrome, but it is striking that the first one mentioned does not do so either, since what it states there is that the reports discard that the children in that case suffer from it, without entering into its universal denial (Supreme Court, 2016). There is in fact no sentence of the Supreme Court that in its text explicitly denies the existence of PAS, which is also irrelevant in scientific terms. Therefore, this pseudo-jurisprudential argument of the Group of Experts, becomes self-referential (to its own writing of 2013) and devoid of content.

On the contrary, reference may be made to other Spanish judgments and those of the Strasbourg Human Rights Court, where the existence of Parental Alienation or PAS problems has been recognized or rejected in several specific cases (Gaffal, 2012). In fact, the Spanish Civil Procedure Act itself provides for measures to address situations of interference in parent-child



relationships, namely: *"The repeated failure to comply with obligations arising from the visitation regime, both by the custodial parent and the non-custodial parent, may give rise to the modification by the Court of the regime of custody and visits"* (Law on Civil Procedure, Art. 766.3, 2000)

It is also interesting to note the existence of laws that specifically address the phenomenon of parental alienation in other countries: such as Law 12,318 of August 26, 2010 of the Republic of Brazil; or the addition in 2014 of Article 323 Septimus, to the Civil Code of the Federal District of Mexico, which also defines and addresses this problem (Gaceta Oficial del Distrito Federal [Official Gazette of the Federal District], 2014).

PAS IN THE DSM-5

The truth is that Jarné and Arch (2009) already pointed to the possible inclusion of PAS within the DSM-IV category called *Z63.8 Parent-child problems [V61.20]*, which questioned the fact that the behaviors described by PAS did not find accommodation in this diagnostic classification. This category that they indicate should be used when the object of clinical care is the pattern of interaction between parent and child (e.g., impairment of communication, overprotection, or inadequate discipline) and is associated with a clinically significant impairment of individual or family activity or clinically significant symptoms in the parents or children, specifying Z63.1 if the object of clinical care is the child.

The DSM-5 review working group excluded considering *Parental Alienation* as a mental disorder, but Dr. Regier, vice chair of the working group that wrote the manual, considered in an interview that it was a relational problem (Crary, 2012). In the end the American Psychiatric Association published a revision of its DSM-5 Manual (2013) without including parental alienation disorder, but making a noteworthy update of annotation *Z63.8 Parent-child problems [V61.20]* under the heading of *Other problems that may be the subject of clinical care* and within a section called *Problems related to family education*, inserting the same code *V61.20 (Z62.820): Parent-child relationship problems*. This category *V61.20*, markedly more detailed than in the previous DSM-IV version, allows the diagnosis of what follows (our underlining) and seems to correspond faithfully with what is known mainly as PAS, namely:

In this category the term "parent" is used to refer to any primary caregiver of the child, whether a biological parent, an adoptive or foster parent, or any other relative (such as a grandparent) who plays a parental role to the child. This category should be used when the primary focus of clinical care is to establish the quality of the parent-child relationship or when the quality of the parent-child relationship is affecting the course, prognosis, or treatment of a mental or medical disorder. Usually a "parent-child relationship problem" is associated with a functional impairment in the

behavioral, cognitive or affective domains.

Examples of behavioral problems are: inadequate control, supervision and involvement of the child from the parents, overprotection from parents, excessive parental pressure, arguments that escalate to the threat of physical violence and avoidance without resolution of the problems. Cognitive problems are negative attributions to the intentions of others, hostility or making another a scapegoat, and a sense of distancing for no reason. Affective problems can be feelings of sadness, apathy or rage against the other member of a relationship. Clinicians must take into account the child's developmental needs and cultural context. (APA, 2014, p. 396).

Indeed, PAS is only classifiable in the DSM-5 as a relational problem or mismatched family interaction, since it is not a mental illness (Bernet & Baker, 2013; Lorandos et al., 2013; Siracusano, Barone, Lisi, & Niolu, 2015). The fifth edition of the DSM describes the diagnostic criteria that define the existence of a relationship problem between parents and children with a psychological basis, related to family education; which causes a functional impairment defined in behavioral terms, in the three possible types of response: behavioral, cognitive and emotional. It is of value for a manual of eminently psychiatric origin to resort to this psychological functional description, which quite adequately frames the nature of the problem. This may be due to the existence of excessive pressure from a primary caregiver so that the child or minor in their care makes negative attributions to the intentions of another family member (an unjustified rejection), with the appearance of an unmotivated affective distancing and apathy or anger towards the other member of the relationship.

Gardner's (1985) original definition of PAS as an alteration that usually appears in the context of a divorce, in which the child despises and criticizes one of their parents, when such a negative assessment is unjustified or exaggerated, seems to fit this entry, which is more specific than the previous one regarding the problem described with the category *V61.20*.

A key word from the original English version of the DSM-5 (APA, 2013) is the noun *estrangement*, which has been translated into the Spanish version as *distanciamiento [distancing]*. Consulting the 1989 edition of the Webster Encyclopedia, Extensive Dictionary of the English Language, the verb *estrangle*, root of the noun *estrangement*, is defined as "to change the feelings or the affections" and in the second meaning "to alienate the affections". In fact, the Italian version of the DSM-5 uses such a word when it translates: "*sentimenti non giustificati di alienazione*" (APA, 2014b, p.382). Whether it is distancing without a reason, destruction of the affections or alienation, the categorization of PAS can be effected in DSM-5 terms (APA, 2013) and, therefore, it seems another fallacy to attempt to use this argument of authority to deny its existence.



CONCLUSIONS

Chapter X on PAS in the *Guidelines* approved by the CGPJ does not include systematic reviews, meta-analyses, empirical studies, or jurisprudential or legislative arguments to support its claims. It is curious that, in a context that has to be demanding when it comes to accepting scientific evidence, the authors of a set of guidelines base a decision with important consequences for legal practice on arguments that are so weakly sustained.

The relational and contextual pattern described under the concept of PAS, or any of its previous or subsequent alternative names, is not a resource created to hide situations of family maltreatment against women or the children themselves. In fact, PAS is not diagnosed in such situations.

The statistical diagnostic classifications of mental and behavioral disorders do not exhaust the description of behavioral and relational dynamics, whether psychopathological or not. In reality, these diagnostic classifications are under constant revision, because they only imply a consensus linked to a certain moment and context. Appealing to these classifications to deny or confirm a disorder, syndrome or a behavioral, relational and contextual description, therefore has a very relative value and, in any case, is not an argument that should be used to prevent the description of these dynamics if they are detected in a rigorous forensic assessment.

The relational, contextual and behavioral pattern described under the concept of PAS, or any of the previous or subsequent alternative designations, seems to find a place in the international classification of DSM-5 disorders described as a problem that may be the object of clinical care related to family education. In particular, within the code V61.20 (Z62.820) *Relationship problem between parents and children*.

Perhaps we should consider whether the description and study of the characteristics of the so-called PAS could have been able to provide a psychodiagnostic framework for understanding this relational phenomenon in the judicial and psychological-forensic context; and whether the understanding of this has facilitated that the children involved in these maladjusted family dynamics have been able to evade them. This seems to be the case judging from a survey conducted in 2010 at a meeting of the *Asociación de Juzgados de Familia y Conciliación* [Association of Family and Conciliation Courts] completed by about 300 attendees, 98% of whom claimed to believe that some children are manipulated by one parent to reject the other irrationally and unjustifiably (Baker, Jaffee, Bernet, & Johnston, 2011).

In the first letter that Galileo sent to Marco Velseri on May 4, 1612, on the above-mentioned theme of sunspots, the great astronomer writes: "The names and attributes of things have to adapt to their essence, not the essence to the names; because things existed first and names afterwards." (Panebianco, Gineprini, & Seminara, 2011, p.3).

CONFLICT OF INTERESTS

There is no conflict of interest

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