

# Turning Points For Families

## A Therapeutic Vacation

The research study of the Turning Points for Families (TPFF) program published in April 2021 in the peer review Journal of Family Therapy conducted under the auspices of Harman, J. J., Saunders, L., & Afifi, T. found TPFF to be a *safe and effective* treatment

***Healing for Dysfunctional, Violent, and/or Abusive Family Relationships—***

***that include:***

***Child psychological abuse (995.51, confirmed, DSM-5)***

***Parent-Child Relational Problem (V61.20, DSM-5)***

***Child Affected by Parental Relationship Distress (V61.29, DSM-5)***

***High Expressed Emotional Level within the Family (V61.8, DSM-5)***

***(e.g., Domestic Violence, Domestic Violence by Proxy)***

***CAVEAT: this is a SAMPLE treatment intervention. But because all families are individual, some changes may be made to the protocol to tailor it to a particular family's clinical presentation and therapeutic needs***

## Treatment Summary by Day

**Additional intervention:** Should the family arrive in New York at a reasonable hour, Ms. Gottlieb (further referred to as the TPFF therapist) will take the family to dinner. This addition to the intervention has shown to be reassuring and comforting to the children and a joining technique. It also affords the TPFF therapist the opportunity to assess the presenting family and individual family members' functioning,

Day 1	Day 2	Day 3	Day 4
1. The child arrives at TPFF with the rejected/alienated parent and with any extended family members whom the rejected parent had invited; the TPFF therapist introduces or re-introduces herself—from the	1. The rejected/alienated parent, child, and other participating members arrive at TPFF.  2. Feedback requested about Day-1 and discussion is	1. The rejected/alienated parent, child, and other participating persons arrive at TPFF.  2. Feedback is elicited about the prior evening's events and	1. The rejected/alienated parent, child, and other participating persons arrive at TPFF.  2. Feedback is elicited about the prior evening's

<p>pre-planning Zoom conference with the children and parents and from the prior night's dinner.</p> <p>2. TPDF therapist discusses with the family each member's understanding as to why the Court had ordered the therapy and clarifies any misconceptions.</p> <p>3. TPDF therapist provides a brief overview of the agenda planned for the four-day intervention and explains why she has entitled the intervention "A Therapeutic Vacation."</p> <p>4. If the favored/alienating parent had written an approved letter in support of the relationship between the child and the rejected/alienated parent, the letter is read to the child, or the letter is given to the child to read.</p> <p>(Please refer to the TPDF treatment protocol for the letter's requirements)</p> <p>5. Extended family and significant others of the rejected/alienated parent are urged to participate in the intervention—but at the rejected/alienated parent's discretion. If in-person participation is not possible, it is often accomplished via Zoom.</p> <p>6. The TPDF therapist briefly clarifies the Program's purpose and goals, but</p>	<p>elicited about the evenings' events and of the memorabilia intervention</p> <p>3. Various videos that role play the family interactions occurring in alienation are played.</p> <p>4. Discussion of the events depicted in the videos that may—or may not—pertain to the family.</p> <p>5. Rejected/alienated parent displays appropriate affective reaction to the videos' role play of the alienation dynamic—virtually all of which the alienated parent had confronted.</p> <p>6. A discussion is initiated for the rejected/alienated parent to convey his or her perceptions of family history and any distorted or incorrect beliefs child has of her or him.</p> <p>7. TPDF facilitates the discussion and assures that the rejected/alienated parent sensitively, and without anger, corrects any of the child's false perceptions of her or him without pathologizing the favored/alienating parent.</p> <p>8. All family members are expected to express opinions civilly and respectfully.</p> <p>9. The child generally does not</p>	<p>reactions to Day 2's therapy.</p> <p>3. Some clarification of the family history continues as needed.</p> <p>4. Interactive videos on the fallibility of human memory and the ease of planting false memories are played. The children love the challenge to their memories from the interactive videos. (The purpose of the videos is to convey that people are not necessarily lying when they have conflicting perceptions of events than do others.)</p> <p>5. Following the videos, there is a family discussion of the purpose of the videos to the intervention.</p> <p>6. After this discussion, additional videos are played of actual alienated parents and an adult alienated child revealing their respective stories.</p> <p>7. More family discussion of the real-life videos and how they may or may not relate to this family. The rejected/ alienated parent has been touched by the stories of both the parents and children and demonstrates appropriate affect. A goal of this intervention is to spark the child's empathy for the</p>	<p>events and reactions to Day 3's therapy.</p> <p>3. Discussion of life with rejected/alienated parent for a period of time after departing TPDF.</p> <p>4. Rules the child will live by are discussed with input from child commensurate with age.</p> <p>5. TPDF therapist summarizes the course of the therapy.</p> <p>6. Clarification commensurate with child's age is provided as to when and under what circumstances the child will have contact with the favored/alienating parent.</p> <p>7. Questions from child are entertained with alienated parent providing answers.</p> <p>8. Lunch determined by the family. TPDF therapist takes the family to lunch.</p> <p>9. Afternoon activity. More pictures are taken and texted to the favored/alienating parent and appropriate professionals in the case.</p> <p>10. Emotional goodbyes exchanged at end of the activity.</p> <p>11. TPDF contacts favored/alienating parent to update on child and child's departure and finalize any</p>
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<p>controversy is avoided on Day-1.</p> <p>7. The memorabilia intervention promptly begins with the use of videos, photos, cards, letters, gifts, etc. and other memorabilia reflective of the alienated parent-child relationship prior to the onset of the alienation. This is a symbolic, experiential intervention that is virtually always an ice-breaker of the child's resistance/rejection of the rejected/alienated parent.</p> <p>8. All family members are emotionally affected by the stroll down memory lane via the memorabilia.</p> <p>9. The child's increasing resistance to the rejected/alienated parent often pleasantly surprises the rejected/alienated parent.</p> <p>10. TPFf therapist elevates rejected/alienated parent into role of co-therapist. According to family systems therapy, the therapist is a catalyst to the rejected parent, who is the actual healer of the child.</p> <p>11. Rejected/alienated is best able to heal</p>	<p>relinquish the programmed script. But the child's behavior and affect confirm positive changes. Ongoing positive interactions will eventually restructure the child's negative programming and distorted beliefs, myths, and feelings regarding the rejected/alienated parent and the revisionist family history. The child's empathy is nurtured.</p> <p>10. The child is permitted to discuss any legitimate issues with the rejected/alienated parent—as long as it is done respectfully and civilly. False abuse allegations and the revisionist family history is discussed and corrected. The child is not permitted, however, to dwell on distorted beliefs. When that occurs, it perpetuates the alienation narrative and thereby perpetuates child psychological abuse.</p> <p>11. The alienated parent is not asked to accept nor validate the child's delusional opinions and</p>	<p>rejected/alienated parent.<sup>1</sup></p> <p>8. The child is absolved of having maltreated and having hurt the alienated parent—recognizing that the child had been trapped in the “loyalty conflict” thrust upon the child by the favored/alienating. But from hereon in, the child must behave respectfully and act age-appropriately.</p> <p>9. The rejected/alienated parent takes responsibility for assuaging the child's guilt and expresses forgiveness.</p> <p>10. Lunch again determined by the family. TPFf therapist takes the family to lunch.</p> <p>11. Afternoon activity. Healthy family hierarchy is reinforced as rejected/alienated parent resumes an expands parental role.</p> <p>12. TPFf therapist takes leave at dinnertime. Family is instructed to continue enacting their newly-recovered roles with each other.</p>	<p>outstanding expectations of the parent.</p> <p>12. TPFf therapist affirms her commitment to collaborate with the local therapists—the favored/alienating parent's individual therapist and the family therapist for the rejected/alienated parent and children. TPFf commits to being available to the family as needed—for court report on the therapy, to testify about the therapy if so requested; etc.</p> <p>13. In most situations, individual therapy for the child is CONTRAINDICATED—meaning forbidden. Individual therapy at this stage is only a forum for the child to vent the family script—which takes much more time to relinquish than do behavioral changes. As in any cult, brainwashing from alienation can take upwards of two years to relinquish. A forum for the script will adversely affect the reconnection.</p>
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<sup>1</sup> Nurturing the child's empathy is an exceedingly important intervention. Because the favored/alienating parent has often modeled, encouraged, and normalized antisocial behaviors to maltreat and hurt the rejected/alienated parent, there is great risk to the child for developing an antisocial personality disorder—because this process squashes the child's guilt for inappropriate behaviors and for hurting a parent. An antisocial personality disorder is virtually untreatable and irreversible once it becomes characterological some time in adolescence or in early adulthood. This very harmful effect on the child is one of many reasons why the scientific community considers alienation to be a form of child psychological abuse.

<p>the child due to “relationship!”</p> <p>12. Positive affective reactions by all participants (including the TPFF therapist) are evident as the family members discuss the memories that are rekindled by the memorabilia.</p> <p>13. Child’s resistance to and defiance of the rejected/alienated parent begin to diminish.</p> <p>14. Child accepts rejected/alienated parent’s parental role and authority (having already been initiated during travel to TPFF.)</p> <p>15. Lunch determined by the family. TPFF therapist takes the family to lunch.</p> <p>16. Afternoon activity selected by child and parent. Rejected/alienated parent is fully in charge of child, who is generally cooperative, pleasant, and responsive. The spontaneity of the activity overrides the child’s programmed script regarding the revisionist family history and negative perceptions of the rejected/alienated parent.</p> <p>17. Rejected/alienated parent assumes parental role over child during the activity: as nurturer, supporter, advocate, supervisor, playmate, encourager, etc.</p> <p>18. TPFF therapist takes pictures of the child or children during the activity</p>	<p>beliefs and the consequent feelings based upon delusional thinking—doing so is anti-therapeutic.</p> <p>12. The child is sensitively guided to assume an age-appropriate role in the family hierarchy—commensurate also with the child’s maturity.</p> <p>13. The rejected/alienated parent is facilitated in resuming her or his appropriate role in the family hierarchy.</p> <p>14. Lunch determined by the family. TPFF therapist takes the family to lunch.</p> <p>15. Afternoon activity.</p> <p>16. The rejected/alienated parent and child deepen their affective connection that had been initiated during the prior interventions. They have begun the journey to recapture their roles and interactions prior to the onset of the alienation. The activity interventions and other experiential interventions facilitate the reconnection in a way that talking alone cannot accomplish. TPFF does not merely talk about creating new, healthy experiences. TPFF <i>creates</i> the new, healthy experiences for the family to take</p>	<p>13. TPFF therapist calls rejected/alienating parent to update and inquire about parent’s progress towards goals so that the no-contact period can be lifted. Potential qualified therapists are explored who must document that favored/alienating parent is ready, willing, and able to support the relationship between the other parent and their child.</p>	<p>To reiterate, behavioral change is what is important—not words.</p>
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<p>and texts pictures to the favored/alienating parent and to the GAL or child's attorney if involved.</p> <p>19. Close of Day-1 at dinnertime: family members are counseled not to discuss anything controversial and to stay positive as they retire to their local accommodations.</p> <p>20. Family retires to their accommodations. Although the TPDF therapist is available to the family 24/4 during the intervention, TPDF has not been contacted for emergency assistance after the family and therapist separate for the evening and night.</p> <p>21. TPDF therapist calls the favored/alienating parent to assure parent of child's adjustment. TPDF therapist discusses favored/alienating parent's need for services in order to restore contact, such as individual therapy, parent education about subverting negative feelings for the other parent to their child's best interests, etc. If it applies, discussion continues as to what changes are needed for TPDF to approve the support letter.</p> <p>22. TPDF therapist suggests that favored/alienating parent make specific references in the letter to family events in order for child to recognize the parent's support for the relationship with the</p>	<p>home. Healthy family hierarchy is reinforced.</p> <p>17. The TPDF therapist again texts pictures of the child during the activities to the favored/alienating parent.</p> <p>18. TPDF therapist takes leave of the family at dinnertime. Reconnection is generally sufficiently stable for the family to continue discussions of the family history if they choose to do so.</p> <p>19. TPDF therapist calls the favored/alienating parent to update parent on child's adjustment and discuss efforts the parent is making to secure needed services to lift the no-contact period and to discuss letter correction, if applicable.</p>		
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<p>rejected/alienated parent. Suggestions are also made to individualize each child in the respective letters to address each child's individuality and the relationship the child once had had with the rejected/alienated parent.</p>			
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