



# Assessment

with clinical trial (ACT)

[www.familyseparationclinic.com](http://www.familyseparationclinic.com)

## General information

The Family Separation Clinic is able to provide a number of court-based services, under court instruction, including expert assessment and recommendation for treatment. In many cases, we may also be able to deliver a treatment programme once the court has agreed it.

Please note that the Clinic does not carry out psychological assessments.

All treatment recommendations are planned and presented as part of the assessment process. The cost of any recommended treatment route is provided to the court after the assessment has been completed.

Exceptional costs associated with either assessment or treatment are agreed in advance.

***It should be noted that our rates exceed LAA legal aid hourly rates and we are, therefore, unable to carry out work more than one third funded by legal aid.***

The Clinic uses a differential approach to understanding the problem of a child's rejection of a parent and all assessments and recommended treatment routes are based on international research and established frameworks.

Occasionally, we may carry out an initial paper-based assessment as a precursor to a full assessment.

## Assessment with clinical trial (ACT)

A child's vehement rejection of a parent after divorce or separation can present the court with significant challenges. Our assessment with clinical trial is designed to offer the court unparalleled clarity in uncovering the underlying dynamics that are causing the rejection and proposals for treatment that are supported by the international research.

Whilst psychological reports are able to offer the court a view on the psychological functioning of the parents and a *snapshot* of the problem, our assessment with clinical trial provides the environment for a depth analysis of the family dynamics, how the child has entered into the rejecting position and how receptive each parent is likely to be to clinical input. Through this, we are able to offer the court a comprehensive opinion on the causes of the child's rejection and detailed proposals for treatment. All of our assessments are carried out by the UK's foremost experts in children's post separation relationship refusal and what is often referred to as *parental alienation*.

The ACT is a clinically based assessment which occasionally utilises a team approach to working with the family. Based on the work of Habib Davanloo<sup>1</sup>, this intervention is designed to bring the dynamics which have caused the child's resistance to a relationship with one parent to the surface. The ACT runs over a period of approximately twelve weeks and is a behaviourally contracted intervention in which parents are initially assessed and then informed about the dynamics that have caused the child's rejection. Throughout the process, parents may be invited to work alone with a therapist using psychoeducational input and, very occasionally, together with the other parent, to test the family's capacity to change the dynamics that have caused the child to use the rejection

of a parent as an unconscious coping mechanism. The process is designed to produce a comprehensive analysis of the capacity of each parent to recognise and change behaviours in a clinical setting.

Each programme is tailored to suit the individual family following assessment of the paperwork. Intake of the family is based upon the analysis of dynamics to date and the willingness of parents to agree to the requirement to enter the process under strict conditions of non-confidentiality between the parties, therapist and court. The purpose of this non-confidential approach is to bring clarity to the process and to reduce behaviours such as triangulation.

As part of the process, children are observed with the parent they are rejecting and this is a condition of the family being accepted into the programme. The following table outlines our typical assessment structure.

PHASE	ACTION	PURPOSE
Phase One	Reading of the paperwork.	To understand the background to the case.
Phase Two	A meeting with each child, separately, of up to 1 hour per meeting.	To hear and understand the children's experiences of the family dynamics, to understand the children's relationship with each of their parents, and to observe, in a clinical setting, the responses of each child to input which is designed to test and evaluate their receptiveness to clinical input.
	A meeting with each parent of up to two hours.	To hear from each parent their perspective of the current position, their view of what needs to happen to create change and their understanding of each other's perspective.
Phase Three	A facilitated clinical observation of the children with the rejected parent in controlled conditions (and, where appropriate, with the aligned parent)	To observe the responses in the children in relationship to each of their parents and to test their responsiveness to clinical input.
Phase Four	Such work as considered appropriate to complete the assessment having considered outputs from Phase One Two and Three.	To observe the family dynamics and its responsiveness to clinical input.
Phase Five	Report to court.	To advise the court whether sustainable change may be achieved through further clinical input or whether alternative interventions are indicated.

Please note that this table is for indicative purpose only and interventions may vary at the discretion of the Clinic.

<sup>1</sup> Davaloo, H. (1980). *Short Term Dynamic Psychotherapy* (Ed). New Jersey: Aronson.

Legal advisors should note that, in proposing the ACT for a family, the requirement that children are made available for clinical observation with the parent they are currently rejecting should be included in the court order. Additionally, there is a requirement for permission for the case to be returned to court should one parent not comply with the order. The ACT can also produce significant clinical information about one or both

parent's capacity to respond to clinical input, thereby triaging those cases which are likely to need a stronger intervention from those capable of healthy responses.

The programme will, for example, indicate where a parent is unlikely to be able to respond to clinical intervention due to personality disorder or other problematic behaviours, thereby dramatically reducing the period of time a family has to be in therapy in order to determine the capacity of the family system to respond to change.

### **Costs**

The cost of our Assessment with Clinical Trial is £6,000 (plus VAT) plus travel and accommodation costs for cases outside London. Any exceptional costs are agreed on a case-by-case basis.

### **Timescales**

Subject to the availability of the parties (including children) we aim to complete the Assessment with Clinical Trial and report to court within 12 weeks from instruction.

### **Legal Requirements**

There are a number of legal requirements attached to our Assessment with Clinical Trial and these should be explicitly included in any court order and instruction:

- instruction must be made under Family Procedure Rules Part 25 - Experts and Assessors;
- the case must remain in court for at least the first twelve weeks of the programme delivery;
- the Clinic must have permission to return the case to court for guidance at any point that it considered necessary;
- the court must give permission for the Clinic to see the children in clinical observation with each parent as required.
- the parties accept our right to record as digital video or audio files any interviews, meetings and/or other sessions with them and their child(ren).

**PLEASE NOTE: You should not ask a court to instruct the Family Separation Clinic to carry out an assessment or undertake any other work unless you have the express written permission from us to do so. Please contact the Clinic if you would like to ask the court to instruct the Clinic to carry out an assessment or other court-based intervention.**

## Frequently asked questions

### **Is this programme a form of therapy?**

No, this is an assessment programme. The ACT allows us to report to the court the severity of a child's rejection of, or resistance to, one of their parents and the dynamics that are causing the problem. It also tests the degree to which the child's difficulties may be alleviated through clinical input; that is the clinical trial.

### **Do the parents meet at any point during the ACT process?**

It is not necessary for parents meet at any point during the ACT process.

### **What if one parent refuses to take part?**

This does not prevent us from completing our assessment. Their willingness and ability to participate is something that provides material information for the assessment process and helps us in formulating our opinion for the court.

### **Are you able to carry out the assessment without seeing the child with the parent they are rejecting or resisting?**

We are unable to carry out a full assessment without attempting to see the child with the parent they are rejecting or resisting. This is why we ask for the court's permission to do so.

### **What if the child is not made available?**

This does not prevent us from completing our assessment. You will note that our legal requirements section states that the court must give permission for the Clinic to see the children in clinical observation with each parent, as required. This is a condition for the Clinic agreeing to carry out an assessment. It is then a matter for the parent with whom the child lives to choose whether to fulfil the order of the court or not. Their willingness and ability to do so is something that provides material information for the assessment process and helps us in formulating our opinion for the court.

### **Why do you require consent to audio and/or video record sessions?**

This is primarily to ensure transparency but is also intended to offer reassurance to parents. It, additionally, offers us the opportunity to review a session to make sure that what we report is absolutely accurate.