Threatened Mother Syndrome (TMS): A Diverging Concept of Parental Alienation Syndrome (PAS)

JOANNA L. KLASS, PSYD AND JOEL V. KLASS, MD

During the 1970s, Richard Gardner formulated the concept of Parental Alienation Syndrome (PAS), which involves a cluster of child symptoms developed during parental divorce. The syndrome is described as a combination of the alienating parent’s influence and the allegiance of the offspring to that parent upon whom they are most dependent. The affected child not only shows a compulsive allegiance to the alienating parent, but becomes an active contributor to the campaign of denigration against the alienated/target parent. The alienating parent solicits the child’s allegiance through devious means and manipulates a campaign to malign the father.

As PAS became more readily identified in contested custody cases, fathers became quicker to proclaim and accuse the mother on less clear grounds of PAS. A major backlash to PAS developed in which mothers were put on the defensive any time a child showed any negative reaction to visitation with the father or any time a mother showed upset at the turmoil of a divorce. Mothers became especially targeted when their intense emotional reactions were seen as evidence of PAS and unfitness to parent.

The Threatened Mother Syndrome (TMS) is the reaction the major caretaker of the child manifests when the bond to the young dependent offspring is threatened. Maternal responses to such perceived threats include rage, screaming, manipulativeness, intolerance, subterfuge, irritability, and even aggressiveness. This reaction is characteristic of the day-to-day general nature of the mother and is only provoked by the primitive instinct to protect and safeguard the welfare of her helpless young. This well-recognized response in animals carries over to the human species, but is altered and modified by cultural and social influences. Lack of recognition and understanding of this syndrome may lead to unfair appraisal of a mother and result in what is not in the best interest of a child.

JOANNA KLASS, PsyD, has contributed to the nation’s first mental health court during completion of her internship through Nova University at Henderson Mental Health Center’s C.O.U.R.T. Project. She was an advocate for therapeutic jurisprudence for adult defendants with mental illness through this program and participated in Jackson Memorial Hospital’s Child and Adolescent Psychiatry Clinic in Miami, Florida. She has also been recognized for her studies in Terror Management Theory. Dr. Klass can be contacted at (954) 205-1455 or jlklass@yahoo.com.

JOEL KLASS, MD, PA, a board-certified psychiatrist, has been a professor of psychiatry at the University of Miami School of Medicine, president of the Broward County Psychiatric Society, and chairman of the department of psychiatry at Hollywood Medical Center and Hollywood Memorial Hospital. He has been a court-appointed psychiatrist for the Dade, Broward, and Palm Beach County courts, and contributor to numerous continuing legal education programs for the Florida bar. Dr. Klass has evaluated over 10,000 patients in his 30-year practice of adult and child psychiatry.
It is all the more threatening to the human species’ mother when the perception is that the divorcing father or other agents are designed to separate her from the continuous protective bond to her cultivated since the child’s birth. When the threatened mother responds with rage, impulsivity, or aggression, it is ready grist for the legal mill to charge her with Parental Alienation Syndrome, or unfitness to parent.

What distinguishes TMS is that the mother’s design is to protect the bond between herself and offspring and not to alienate the offspring from the father. In PAS, there is a calculated campaign to separate the father from the offspring, to protect the bond between the mother and offspring.

Another distinguishing characteristic is that TMS must be a response out of character to the mother’s general nature. A caustic, hostile virago continues in character when there is a divorce action. In contrast, TMS is one in which a generally socially acceptable-behaving woman develops the protective reaction of becoming over-controlling, aggressive, manipulative, and hostile to protect her young. Once the threat is no longer present, the reaction subsides so that the mother reverts back to her characteristic personable and appropriate self.

**DISTINGUISHING CHARACTERISTICS**

Exhibit 1 is a list of distinguishing characteristics between TMS and PAS.

TMS must also be distinguished from the pathological and deranged parent who is a real threat to others. Characteristics often found in such parents include alcoholism and drug abuse, prior criminal behavior and violent behavior history. Manic disorders with violent outbursts are also occasionally found in such parents.

Responses include rage, screaming, manipulations, intolerance, subterfuge, irritability, even aggressiveness.

It is unfortunate that when TMS is unrecognized, the mother who is reacting solely to protect the maternal child bond actually jeopardizes the very bond she is trying to protect. This is all the more so with current sensitivity given to allegations of PAS. For this reason, it is most important to identify and understand this syndrome so that the overall best interest of the child can be preserved.

Treatment for this syndrome involves communicating with the mother such that there is recognition and delineation of the syndrome and how her feelings are provoked. It is necessary for her to understand that the natural protective instincts can lead to self-defeating and counterproductive consequences. Consultations with a psychiatrist may be required to use medications to alleviate the intense compulsions evoked in the threatened mother.

Guardians and judges need to understand that the reaction is an unusual one for the mother and not indicative of her general manner of relating. This is important because all too often, assessment of motherhood characteristics is prejudicial when the syndrome is unrecognized. Inexperienced guardians and clinicians may turn in reports disfavoring a mother because observing the enraged, out-of-control, hostile mother biases their appraisal. Without an evaluator recognizing that these are deeply felt primal and protective responses, injustice results.

### POTENTIAL EVALUATOR PREJUDICE

Evaluators may become prejudicial and side with the contrastingly more self-controlled father. They may erroneously conclude that it is understandable that the father presents the mother as an unfit parent. A campaign begins whereby the father, in concert with a guardian, will look to malign the mother by exploiting her TMS reaction. Both may feel personally pro-

<table>
<thead>
<tr>
<th>Exhibit 1.</th>
<th>TMS</th>
<th>PAS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Duration</strong></td>
<td>Subsides after threat gone</td>
<td>Alienation efforts persist</td>
</tr>
<tr>
<td><strong>Pattern</strong></td>
<td>Episodic</td>
<td>Continuous</td>
</tr>
<tr>
<td><strong>Manner</strong></td>
<td>Impulsive and reactive</td>
<td>Calculating, designed behavior</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Protect mother/child bond</td>
<td>Alienate father</td>
</tr>
<tr>
<td><strong>Consistency</strong></td>
<td>Uncharacteristic reaction</td>
<td>Characteristic personality</td>
</tr>
<tr>
<td><strong>Involvements</strong></td>
<td>Mother alone, more often</td>
<td>Solicits and manipulates others</td>
</tr>
<tr>
<td><strong>Relationship</strong></td>
<td>Maintain same relationship w/child</td>
<td>Solicits child as accomplice</td>
</tr>
<tr>
<td><strong>Father</strong></td>
<td>Accepting of mother’s prior mothering</td>
<td>Resentment about her attitude of being primary parent</td>
</tr>
<tr>
<td><strong>Anger</strong></td>
<td>More uncontrolled quality</td>
<td>More focus on father</td>
</tr>
</tbody>
</table>
voked because of the mother’s
defiance, hostility, and even ag-
gressiveness. They may feel per-
sonally offended by a dimin-
ished sense of self-importance
and power as the mothers ap-
ppear impervious to their re-
quests. They resent having a lack
of control over the threatened
mother who may ignore and
defy recommendations. TMS
mothers are easy to dislike, and
prejudice results.
The fact that there are general
characteristics of TMS does not
exclude the nuances that may
vary from mother to mother as
much as any two individuals can
differ. However, it is important
to understand the general nature
of the syndrome, and its poten-
tial for bias, so that the judicial
outcome can protect the best in-
terests of the child.