To: attorney

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Dr <name>: Parenting Practices Rating Scales

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Interpretive Guidelines for the Parenting Practices Rating Scale: Levels of Parenting

The general interpretation guidelines for the Parenting Practices Rating Scale collapse the four Levels of Parenting into two categories, abusive-pathogenic parenting (Levels 1 and 2) and normal-range parenting (Levels 3 and 4).

Level 1 Parenting: Abuse and Violence.

Confirmed Level 1 parenting warrants an immediate child protection response.

Level 2 Parenting: Severely Problematic Parenting

Level 2 parenting is extremely damaging to the child's emotional and psychological development and needs to be altered or child protection considerations emerge. Identification of Level 2 parenting should become the immediate focus of treatment and careful monitoring of the child's development and symptoms is warranted relative to pathogenic parenting (creating pathology in the child) and possible child protection considerations.

Level 3 parenting is normal-range that has problematic features. While level 3 parenting may not be the optimal recommended parenting (from a professional psychology standpoint), it is not sufficiently problematic to create pathology in the child. Changing Level 3 parenting may warrant additional focus as a secondary treatment goal, but is not necessarily a primary focus of treatment. Level 3 parenting is also subject to parental cultural, religious, and personal values which merit respect.

Level 4 Parenting: Normal-Range Healthy

Level 4 parenting is considered healthy parenting. Some parents tend to favor structure and family rules, some parents tend to favor parent-child dialogue and negotiation, and some parents blend the two approaches. Level 4 parenting is considered normal-range and healthy parenting.

Abusive-Range Parenting

Normal-Range Parenting

Parenting Practices Rating Scale: Father

Level 1 Parenting:

There are allegations of emotional and psychological abuse and domestic violence, but these allegations are neither confirmed nor disconfirmed. Allegations generate professional concerns, and the indication that these allegations are not disconfirmed is of professional note (and possible concern). Additional constellations of data suggesting associated features of emotional-psychological abuse and domestic violence, such as indicators of narcissistic pathology (the absence of empathy, entitlement, haughty arrogance) would elevate the level of concerns regarding potential emotional-psychological domestic violence abuse potential surrounding the father's parenting practices and toward his ex-wife.

Of concern surrounding divorce allegations of emotional-psychological abuse and domestic violence, would be the potential that the father would use the child as a weapon of retaliation and revenge against the mother for the rejection surrounding the divorce (called a "narcissistic injury"). Because the Level 1 allegations of abuse (emotional-psychological abuse and domestic violence) have not been disconfirmed, continuing assessment and domestic violence monitoring would be recommended until clarity on these allegations is achieved.

Level 2 Parenting:

Dr. <name> identifies the father's parenting as severely problematic, and just short of child abuse. Dr. <name> identifies the father's parenting as over-involved and intrusive (Item 10). This item describes the parenting as, "Enmeshed, over-intrusive, and/or over-anxious parenting that violates the psychological self-integrity of the child; role-reversal use of the child as a regulatory object for the parent's anxiety and narcissistic needs." This is an extremely damaging form of parenting for the child's development.

Levels 2 parenting is extremely damaging to the emotional and psychological development of the child and would warrant immediate focused treatment and careful monitoring of the child's development and symptoms for the potentially damaging impact of severely pathogenic parenting. Concerns are elevated regarding Dr. <name>'s identification of Level 2 severely problematic parenting by the father and allegations (neither confirmed nor disconfirmed) of emotional-psychological abuse and domestic violence. Level 2 parenting would be consistent with the allegations and concerns as legitimate.

Dr. <name> also identifies concerns regarding narcissistic-borderline traits in the father and narcissistic-range absence of empathy. These are extremely concerning parental qualities, elevating the risk of emotional and psychological damage to the child. Careful monitoring of the child's symptoms and development is warranted to ensure the stability of the child's emotional and psychological functioning and development.

Conclusion: Other family and child behavior factors are likely of secondary treatment concern to addressing the severely problematic and potentially damaging Level 2 pathogenic parenting of the father. Child symptoms and pathology of any degree and nature could likely be caused by Level 2 pathogenic parenting. Level 2 parenting is extremely bad parenting.

Parenting Practices Rating Scale: Mother

Level 1 Parenting: Allegations Unfounded

Dr. <name> indicates that unfounded allegations of abusive parenting have been made against the mother, including unfounded allegations of physical abuse, emotional abuse, psychological abuse, and neglect, and domestic violence allegations that are neither confirmed nor disconfirmed.

The fact that these allegations are unfounded is significant, because it means the source of the allegations is not grounded in a consensually validated reality and may have exceedingly hostile and distorted perceptions of the mother. Also of concern would be the use of false allegations made against the mother as a hostile-aggressive and manipulative tactic of power, control, and domination (domestic violence). To the extent that there are hovering domestic violence allegations, the potential use of unfounded abuse allegations as a hostile-aggressive spousal tactic of power, control, and domination (spousal violence) is of concern.

Level 2 Parenting: None.

Level 3 Parenting:

Dr. <name> identifies normal-range anxious over-involved parenting (Item 15) for the mother. The treatment for anxious over-involved parenting would be to assist the mother in becoming less anxious, and to become more relaxed and happier. The reported high level of family conflict is likely a prominent source of tension and stress for the mother. So the most likely treatment plan to address the mother's anxious over-involved parenting is to successfully resolve the family conflict and create a more relaxed and pleasant family context for her parenting.

Level 4 Parenting:

Dr. <name> also notes Level 4 parenting for the mother, Affectionate-Involvement: Structured Spectrum (Item 17). This is likely to be the mother's usual parenting when free from the stresses and anxiety created by the ongoing family conflict.

Dr. <name> indicates that the mother's parenting is entirely normal range along the permissive to authoritarian dimension (rating of 60), and has normal-range healthy empathy (rating of 3), and a trauma history that has treatment (trauma with treatment should be considered resolved; trauma without treatment should be considered unresolved and therefore a continuing influence on relationships).

Conclusion:

Dr. <name> indicates that the mother's parenting is normal-range and healthy, and could likely benefit from a reduction in family tensions and stress. Of prominent concern are the multiple <u>unfounded</u> allegations of abusive parenting that indicate allegations that are not consistent with reality (and may therefore have manipulative or hostile-vengeful components). Of prominent concern is a potential hostile-aggressive process directed toward the mother as the target, with possible domestic violence overtones of power, control, and domination.

Diagnostic Checklist for Pathogenic Parenting: Child 1

Dr. <name> indicates that Child 1 presents all three of the diagnostic indicators for pathogenic parenting by an allied parent (the supposedly "favored" parent) who has formed a *cross-generational coalition* with the child against the targeted parent (the supposedly "rejected" parent), resulting in an *emotional cutoff* in the child's relationship with the targeted parent. This family process is abundantly described in the family systems literature (Minuchin, Bowen, Haley).

The preeminent family systems therapist, Salvador Minuchin, has a structural family diagram depicting this type of family process; the *triangulation* of the child into the spousal conflict though the formation of a *cross-generational coalition* with the allied parent against the targeted parent, resulting in an *emotional cutoff* of the child's relationship with the targeted parent.

The presence of these three diagnostic indicators in the child's symptom display is definitive symptom evidence of a cross-generational coalition with an allied narcissistic-borderline parent against the targeted parent. The child is essentially being weaponized in the spousal conflict by one parent (the allied parent; the father in this case) against the other spouse (the targeted parent; the mother in this case). The three diagnostic indicators on the Checklist are the symptom evidence of the child's weaponization by one parent against the other parent (spouse).

Cross-generational coalition & cutoff

(Minuchin & Nichols,

1993, p. 42)

The data from the Diagnostic Checklist for Pathogenic Parenting indicates that Child 1's conflict with her mother is not authentic to their relationship, but is instead being created by the pathogenic parenting of the father (through the cross-generational coalition with the child).

The degree of symptom severity being created in the child by the father's parenting – severe attachment pathology; personality disorder pathology; delusional-psychiatric pathology – rises to the level of a DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed (as indicated on page 2 of the Checklist). This DSM-5 diagnosis is entirely symptom based. The presence of these three extremely severe symptoms of significant pathology cannot be created by the mother's normal-range parenting (Parenting Practices Rating Scale) and can ONLY be created by the child's manipulation and psychological seduction into a crossgenerational coalition with an allied parent (the father in this case) against the targeted parent (the mother in this case).

The indications by Dr. <name> regarding the father's Level 2 over-involved intrusive parenting that violates the psychological autonomy of the child elevates clinical concern considerably that the child's development is being severely damaged by the pathogenic parenting practices of the father.

Diagnostic Checklist for Pathogenic Parenting: Child 2

No concerns are evident for Child 2. Monitoring of Child 2 for symptom development, given the family context, is warranted.

Treatment Reports from Dr. <name>

Dr. <name> confirms by report the symptom features and pattern indicated on the rating scales.

Conclusions:

Prominent and immediate child protection concerns are present. Pathology created by a pathogenic parent does not resolve while exposed to the pathogenic parenting. The pathology of pathogenic parenting¹ is similar to Muchausen by Proxy – a parent creating pathology in a child – and the pathology in the child does not resolve as long as the child is exposed to the pathogenic parenting that is creating the pathology.

The Level 2 parenting reported for the father and the level of symptom severity reported for Child 1 raise prominent child protection concerns surrounding a DSM-5 diagnosis of V995.51 Child Psychological Abuse (pathogenic parenting). However, Dr. Childress did not conduct the clinical interviews to collect the data reported by Dr. <name> on the Parenting Practices Rating Scale and Diagnostic Checklist for Pathogenic Parenting, and Dr. Childress cannot independently confirm the accuracy of the data reported by Dr. <name>.

Diagnoses by Dr. Childress would require clinical interviews with Dr. Childress. Dr. <name> should be consulted on his DSM-5 diagnosis relative to child psychological abuse, and the degree of symptomatology evidenced by the child. Other clinicians may also have differing identifications of symptoms for this family, and interpretation of information would change based on changes in information.

The opinions of Dr. Childress are based in the accuracy of the data on which those opinions are formed.

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Clinical Psychologist, PSY 18857

¹ patho=pathology; genic=genesis, creation. Pathogenic parenting is the creation of significant psychopathology in the child through aberrant and distorted parenting practices. Pathogenic parenting is an established construct in both developmental and clinical psychology, and is most often used in relation to attachment-related pathology, since the attachment system never spontaneously dysfunctions but only becomes dysfunctional in response to pathogenic parenting – parenting causing pathology.