



The Flying Monkey Newsletter

Combating Mental Health Ignorance and Mental Health Complicity with Child Abuse

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Pathogenic Parenting

Patho = pathology

Genic = genesis, creation

Pathogenic parenting is a term used in clinical and developmental psychology to indicate parenting practices that are so aberrant and deviant as to create significant pathology in the child.

The pathogenic parenting of a narcissistic/borderline parent surrounding divorce can be identified by a specific set of three definitive diagnostic indicators in the child's symptom display:

1. **Attachment System Suppression** toward a normal-range and affectionally available parent.
2. **Narcissistic & Borderline Personality Traits** evidenced in the child's symptom display, which the child acquires through the influence of a narcissistic/borderline parent.
3. **Delusional Belief**, a fixed and false belief in the supposedly "abusive" parental inadequacy of a normal-range and affectionally available parent, which the child acquires through the influence of the narcissistic/borderline parent (who is the primary case for the shared delusional belief (ICD-10 F24)

Inducing significant developmental pathology (diagnostic indicator 1), personality pathology (diagnostic indicator 2), and psychiatric/delusional pathology (diagnostic indicator 3) as a means to stabilize the psychopathology of a narcissistic/borderline parent represents a **DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed**

Personality Disorders Exist:

Narcissistic and borderline personalities exist and are diagnostically defined by the American Psychiatric Association in the DSM-5. All mental health professionals are responsible for understanding and appropriately diagnosing all disorders contained in the DSM-5.

Narcissistic and borderline personality pathology is also extensively described in the theoretical and research literature, including the works of such preeminent professionals as Theodore Millon, Aaron Beck, Otto Kernberg, and Marsha Linehan, as well as having substantial research support.

Narcissistic and borderline personality pathology is particularly vulnerable to collapse as a result of the rejection and perceived abandonment by the spousal attachment figure surrounding divorce. As a result, narcissistic and borderline personality pathology will find prominent expression in family relationships as a product of divorce.

The failure to appropriately assess, recognize, and diagnose the impact of narcissistic and borderline personality pathology as expressed within family relationships surrounding divorce may represent practice beyond the boundaries of professional competence in **violation** of Standards 2.01a and 9.01a of the Ethical Principles of Psychologists and Code of Conduct of the American Psychological Association.

About the Newsletter

Urban Dictionary: **"In popular psychology, a flying monkey is someone who does the narcissist's bidding to inflict additional torment to the narcissist's victim."**

Far too many mental health professionals collude with the pathology of the narcissistic/borderline parent because of professional ignorance and incompetence in the recognition, assessment, and diagnosis of narcissistic and borderline personality pathology as it is being expressed within the family. As a direct consequence of their professional ignorance and incompetence, these mental health persons collude with the **psychological abuse of children**, to the developmental and psychological harm of children and families, and in apparent violation of Standard 3.04 of the APA ethics code and their professional "duty to protect."

Each edition of the Flying Monkey Newsletter will answer a false and distorted justification offered for **their collusion with child abuse**.



The Justification for Colluding with Child Abuse: Separating the Child from the Pathogenic Parent is Harmful to the Child

The Justification: This line of argument maintains that the child has such a strongly bonded relationship with the allied narcissistic/borderline parent that separating the child from this parent would be psychologically harmful to the child.

The Truth: Separating a child from the pathogenic parenting of a psychologically abusive narcissistic/borderline parent is **not** harmful to the child. In fact, it is essential for restoring the child's healthy and normal-range development.

Leaving the child with a psychologically abusive parent is harmful to the child.

Pathogenic Parenting is Psychological Child Abuse

Pathogenic parenting that is creating severe developmental pathology (diagnostic indicator 1), personality disorder pathology (diagnostic indicator 2), and psychiatric-delusional psychopathology in a child in order to stabilize the personality disorder pathology of the parent represents a **DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed**.

In ALL cases of child abuse, our first and immediate response is one of **child protection**. We separate the child from a physically abusive parent, we separate the child from a sexually abusive parent, we separate the child from a psychologically abusive parent. In response to all forms of child abuse, we immediately separate the child from the abusive parent. We then treat the child for the consequences of the child abuse in order to restore normal-range and healthy development, and before re-exposing the child to the abusive parent we require that the abusive parent receive treatment that effectively reassures mental health professionals that the abusive parent has obtained insight into the causes of the prior abuse and does not continue to represent an abusive threat to the child.

Pathogenic parenting is not a child custody issue; it is a **child protection issue**.

Role-Reversal Pathology is NOT a Healthy Parent-Child Bond

What superficially appears to be a bonded parent-child relationship with the narcissistic/borderline parent actually represents a pathological **role-reversal relationship** in which the child is being used as a "**regulatory object**" by the narcissistic/borderline parent to stabilize the psychopathology of the parent. Creating severe psychopathology in the child in order to meet the emotional and psychological needs of the parent represents a DSM-5 diagnosis of V995.51 Child Psychological Abuse, Confirmed.

In addition, the child is also **losing** a healthy relationship with a normal-range and affectionally available parent who could otherwise counteract the developmentally distorting influence of the narcissistic/borderline parent. So severe psychopathology is being created in the child AND the child is also losing a nurturing and psychologically protective relationship with a normal-range and affectionally available parent.

Child Protection & the Professional's "Duty to Protect"

NOT separating the child from the psychologically abusive pathogenic parenting of the narcissistic/borderline parent represents **abandoning the child** to psychological child abuse. Whereas separating the child from the psychologically abusive pathogenic parenting of the narcissistic/borderline parent represents a **protective action** consistent with the professional's obligation and duty to protect.

Pathogenic parenting is not a child custody issue; it is a **child protection issue**.



Quotes from Professional Psychology

Theodore Millon:

Founding editor of the *Journal of Personality Disorders*. Inaugural president of the International Society for the Study of Personality Disorders. Professor Emeritus at Harvard Medical School and the University of Miami. Developed the diagnostic questionnaire; the Millon Clinical Multiaxial Inventory (MCMI), which is considered by many as representing the gold standard in the assessment of personality disorders. Contributor to the development of the Diagnostic and Statistical Manual of Mental Disorders (DSM).

From: Millon, T. (2011). *Disorders of personality: introducing a DSM/ICD spectrum from normal to abnormal*. Hoboken: Wiley.

“Under conditions of unrelieved adversity and failure, narcissists may decompensate into **paranoid** disorders. Owing to their excessive use of fantasy mechanisms, they are disposed to misinterpret events and to construct **delusional beliefs**. Unwilling to accept constraints on their independence and unable to accept the viewpoints of others, narcissists may isolate themselves from the corrective effects of shared thinking. Alone, they may ruminate and weave their beliefs into a network of fanciful and totally invalid suspicions. Among narcissists, **delusions** often take form after a serious challenge or setback has upset their image of superiority and omnipotence. They tend to exhibit compensatory grandiosity and jealousy **delusions** in which they **reconstruct reality** to match the image they are unable or unwilling to give up.”

“**Delusional** systems may also develop as a result of having felt betrayed and humiliated. Here we may see the rapid unfolding of **persecutory delusions** and an arrogant grandiosity characterized by verbal attacks and bombast. Rarely physically abusive, anger among narcissists usually takes the form of oral vituperation and argumentativeness. This may be seen in a flow of irrational and caustic comments in which others are upbraided and denounced as stupid and beneath contempt. These onslaughts usually have little objective justification, are often colored by **delusions**, and may be directed in a wild, hit-or-miss fashion in which the narcissist lashes out at those who have failed to acknowledge the exalted status in which he or she demands to be seen” (Millon, 2011, p. 407-408; emphasis added).

From MediLexicon:

Encapsulated Delusion: 1. a delusion that usually relates to one specific topic or belief but does not pervade a person's life or level of functioning.¹

From the ICD-10:²

Diagnosis Code F24: Shared Psychotic Disorder

“Clinical Information: A condition in which closely related persons, **usually in the same family**, share the same delusions.” (emphasis added)

¹ MediLexicon, retrieved 3/1/16 from <http://www.medilexicon.com/medicaldictionary.php?t=23471>

² International Statistical Classification of Diseases and Related Health Problems (ICD): A medical classification list developed by the World Health Organization (WHO).