

Statement 1 by Dr. Childress  
Delivered June 7, 2018  
National Press Club

### The Petition to the APA: Protecting Children from Psychological Child Abuse

Hello. I'm Dr. Craig Childress. I am a clinical psychologist from Southern California and I am the author of this version of the Petition to the APA. I'm in my role today as a clinical psychologist, serving as a conduit for these families to the American Psychological Association. Professional psychology is failing these families. Forensic psychology is failing these families.

We are here delivering a Petition to the APA seeking their help in securing the necessary professional knowledge and professional competence required to solve severe family pathology in court-involved high conflict divorce.

There are two domains of psychology, forensic psychology which handles all court-involved cases, such as affecting these families, and clinical psychology which treats and solves everything else, ADHD, schizophrenia, trauma, autism, family conflict... everything else besides court-involved cases is clinical psychology. I am a clinical psychologist. It is my job to solve pathology.

The world of court-involved high conflict divorce is the world of forensic psychology. And it's a mess.

Clinical psychology was banished from court-involved practice many years ago by the forensic psychologists. If a clinical psychologist offers an opinion about child custody or visitation they'll lose their license. Only forensic psychologists are allowed to discuss custody and visitation issues involving the family, and only after having completed an extensive child custody evaluation costing between \$20,000 - \$40,000 and taking six to nine months to complete.

This places the input of professional psychology to the court surrounding high conflict divorce beyond the financial capability of most families, and even when a child custody evaluation is conducted the conclusions and recommendations reached are idiosyncratic and arbitrary. Custody evaluators are free to apply, misapply, or not apply, any, some, or none of the established constructs of professional psychology.

As a clinical psychologist, I spent my career treating a variety of pathologies, from ADHD, to trauma, to schizophrenia, to autism-spectrum pathology. I came to the world of forensic psychology about a decade ago treating one client. Before entering private practice, I was the Clinical Director for a childhood assessment and treatment center working with complex developmental trauma in the foster care system. When I left this position to enter private practice I accepted a case of high family conflict and attachment bonding pathology referred to me by a family law attorney and ordered by the court. That was my entry into the deeply troubling world of forensic psychology.

The level of professional knowledge and professional standards of practice in forensic court-involved psychology are substantially below what would be considered acceptable in clinical psychology. Forensic court-involved psychology makes up new forms of pathology that are not found in established domains of clinical psychology, and they define these supposedly new forms of pathology

in arbitrary, idiosyncratic, and deeply troubling ways. Their conclusions reached by their assessments of family pathology are not scientifically supported or valid, and they know this. As for their treatments, they simply make up whatever they want on an individual case-by-case basis with no description or foundation in any of the professional literature of clinical psychology.

In the world of forensic psychology surrounding high conflict divorce, the fox has been put in charge of the hen house, and a critical examination of the professional practices within forensic psychology is desperately needed. The lives of children and families are being irrevocably destroyed by rampant and unchecked professional ignorance and incompetence in forensic psychology regarding the established knowledge base, constructs, and principles of professional psychology that serve as the ground foundation of clinical psychology.

That is a strong allegation. The Petition to the APA makes strong allegations. I can back them up. Professional psychology through the APA needs to take a look at what is occurring in forensic psychology surrounding high conflict divorce and child custody. It is deeply troubling.

I'll have more to say about this in a few minutes, but first I want to introduce a man who knows the pathology better than most. Rod McCall had his life devastated when he lost his son to this pathology. I wish I could say his experience was unique. It's not. While his experience was at the extremes for the pathology, the pathology he endured and its ultimate result is also not surprising. The experience of Rod McCall is entirely consistent with the clinical psychology understanding for the pathology.

So it is my great privilege and pleasure to introduce Rod McCall to speak to you of his son, and of the pathology.

Statement 2 by Dr. Childress  
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Rod's story is moving. I wish it was unusual.

Rod physically lost his son when his mother killed Eryk rather than allow Eryk and his father to have a loving and bonded father-son relationship.

This occurs in each and every family, only in most families the death is not physical, it's psychological. The allied narcissistic-borderline parent kills the child's relationship to the other parent. The targeted-rejected parent used to have a child before the divorce. But after the divorce, they no longer have children. The child refuses to any spend time with the targeted parent, and what little time is spent together is marked by the child's excessive hostility, conflict, and the child's efforts to avoid and isolate from the parent.

Soon the child refuses all visitation to the targeted parent, leading to parents who deeply love their children not seeing their children for years – for years. The parent used to have a child before the divorce, but the pathology of the narcissistic-borderline parent kills this child's relationship with the other parent as surely as Eryk died at his mother's hands.

As a clinical psychologist, I've worked with all types of pathology, ADHD, autism, trauma, and this is the most horrific pathology I have ever encountered in my professional practice... to kill someone's children in revenge for the divorce, and to use the child as the weapon, to coerce and manipulate the child into psychologically killing their own parent is abhorrent.

I came across my first case of this attachment pathology surrounding divorce about a decade ago when I entered private practice. Despite a career in professional psychology in which I had treated nearly every form of child and family pathology, I had never heard the term "parental alienation." You see, there's no such thing as "parental alienation" in clinical psychology. Oh, the pathology most definitely exists and it's extensively described in clinical psychology, we just haven't made up a "new form of pathology" unique in all of mental health to describe it.

In clinical psychology, this pathology is described as a "cross-generational coalition" by the preeminent family systems therapists Murray Bowen, Salvador Minuchin, and Jay Haley. The pathology of a cross-generational coalition and the psychological boundary violations that cause it, called a "perverse triangle," is extensively described in the family systems literature. Family systems therapy is one of the four primary schools of psychotherapy, and it is the only school to address current family relationship problems.

As I entered into the domain of forensic court-involved psychology, I became appalled and shocked by the incredibly poor standards for knowledge and for standards of practice in forensic psychology, which are substantially below the acceptable standards for knowledge and standards of practice in clinical psychology.

My first discovery was that forensic psychology simply makes up supposedly "new forms of pathology" that are not grounded in established psychological principles and constructs. They just make stuff up, like this supposedly new form of pathology called "parental alienation."

Then, when I looked at how forensic psychology was defining this supposedly "new form of pathology," it is an amazingly bad definition. The quality of the definition for "parental alienation" in forensic psychology is substantially below the standards of practice expected in clinical psychology. They are simply making stuff up.

Again, the pathology absolutely exists. There is no arguing with the truth of Rod McCall and the tens of thousands, hundreds of thousands, of families experiencing this pathology, its just that the definition offered by forensic psychology is incredibly poor, unsupported by the professional literature, and substantially below professional standards of practice.

So as a clinical psychologist, I set about defining the attachment-related family pathology people call “parental alienation” using the standard and established constructs and principles of professional psychology. That’s my book, *An Attachment-Based Model of Parental Alienation: Foundations*. *Foundations* is not a theory, it is a diagnostic treatise. In clinical psychology, we absolutely know what this pathology is – using the standard and established constructs and principles of professional psychology – and we don’t ever resort to just making up new forms of pathology for types of child symptoms that we may not understand because of our ignorance.

That’s what an attachment-based model of “parental alienation” is (AB-PA), it is the return of clinical psychology to court-involved practice. In my writings, I always put the term “parental alienation” in quotes to indicate that it is not a real form of pathology in clinical psychology, but instead represents a common-culture term created within forensic psychology for a complex attachment-related, personality disorder, family systems, developmental trauma pathology.

Forensic psychology is sacrificing children to a horrific family pathology that requires the child to psychologically kill a beloved parent following divorce. The child used to have a mother or a father. Yet after the manipulative influence of the narcissistic-borderline parent, the child’s mother or father is now dead – at least psychologically and relationally – to the child. The child no longer has a mother, no longer has a father, even though they do, even though their mother or father is still here, and desperately wants to love the child.

But the failure of forensic psychology doesn’t stop there. As I continued into the world of forensic psychology, my professional concerns mounted. Not only does forensic psychology simply make up “new forms of pathology,” they also make up an entirely new form of therapy that they never describe in any book or article, called “reunification therapy.” I kept hearing this term, “reunification therapy,” being used by forensic psychologists and the court, I’m a clinical psychologist. My Psy.D. degree rather than a Ph.D. degree means I’m a super-focused clinical psychologist. My specialty is all forms of therapy and the solution of pathology. That’s what a Psy.D. degree means.

There is no such thing as “reunification therapy.” There is no book, no article, nothing that ever describes any basis or procedures for something called “reunification therapy.” It is a term used to cover the fact that the individual therapist is simply making stuff up and has no idea what they are actually doing. This supposed “reunification therapy” that’s so prevalent throughout forensic psychology is a snake-oil remedy pure and simple; “Who knows what’s in it, and it’ll most likely kill ya rather than heal ya.”

Forensic psychology simply makes up new forms of pathology that do not exist in clinical psychology, and they simply make up therapy that equally does not exist in clinical psychology. They’re just making stuff up. Is it any wonder they can’t solve pathology in the family.

But it doesn’t stop there. Possibly the most egregious aspect of forensic psychology are the child custody evaluations they use to assess family pathology and make recommendations. There is zero validity to the conclusions and recommendations reached by child custody evaluations. Zero. And all psychologists know this. It has to do with an issue called “inter-rater reliability” of assessment procedures. Child custody evaluations have no inter-rater reliability, meaning that different custody evaluators can reach entirely different conclusions and recommendations based on the exactly same data. If an assessment procedure is not reliable, it cannot, by definition, be valid.

If you start pulling on the string of inter-rater reliability with child custody evaluations, all of forensic psychology regarding child custody decision-making will begin to unravel. The conclusions and recommendations of child custody evaluations are no more valid than a monkey throwing darts at a dartboard, and the monkey is likely to be a lot less expensive and a lot more entertaining.

Child custody evaluations cost between \$20,000 to \$40,000 to complete for each one, and typically take between six to nine months to complete. They spend hours and hours meticulously collecting information, all billable time. They spend hours upon hours meticulously writing reports describing the collected information, all billable time. Yet when it comes to what the family information means, they just make stuff up. Literally, the custody evaluators just make up their conclusions and recommendations, not necessarily based on any established professional knowledge base, constructs, or principles in professional psychology.

As an expert consultant and witness in these high-conflict family cases, I've had the opportunity to review these custody evaluations which are typically sealed by the court. They're bad. As a clinical psychologist... they're really bad. They are far-far below the standard of practice for assessment in clinical psychology.

If the conclusions and recommendations of child custody evaluations are not valid, and if every psychologist knows this, why isn't anyone in professional psychology disclosing this? \$20,000 to \$40,000 per evaluation. There is a financial incentive in forensic psychology to remain quiet, a conspiracy of silence in forensic psychology. The fox is in charge of the hen house.

Someone needs to take a look at forensic psychology. Turn over the rock of forensic psychology in high-conflict divorce and you'll find all sorts of deeply troubling creepy-crawly things living under that rock. It's no wonder that forensic psychology can't solve pathology, especially the complicated family pathology of high-conflict divorce. They are just making stuff up over there.

While in Washington, we are meeting with the offices of our congressional representatives to request congressional hearings into forensic psychology and child custody decision-making in the family courts. Yesterday we also delivered the Petition to the American Psychological Association, asking that the APA convene a conference of experts to look into forensic psychology and child custody decision-making in the family courts. Today we are holding a press conference, asking the press to look into forensic psychology and child custody decision-making in the family courts.

Pull the string of "inter-rater reliability" for child custody evaluations, and it will start to unravel. Ask if forensic psychologists are required to have training in the attachment system? No. Ask if forensic psychologists are required to have training in personality disorder pathology? No. Ask if forensic psychologists are required to have training in family systems therapy? No. Ask if forensic psychologists are required to have training in complex trauma? The answer is no. Instead of knowledge, they allow themselves to just make stuff up, and it is destroying the lives of children and families.

Parents are no longer tolerating the profound professional ignorance and incompetence in forensic psychology that is destroying their children and families. Clinical psychology is returning to court-involved high conflict divorce. The world is changing. Professional ignorance and incompetence are no longer acceptable.