

<date>

To: <attorney> <parent>

Initial Impressions: <family> Family Therapy

Scope of Initial Impressions:

<redacted>

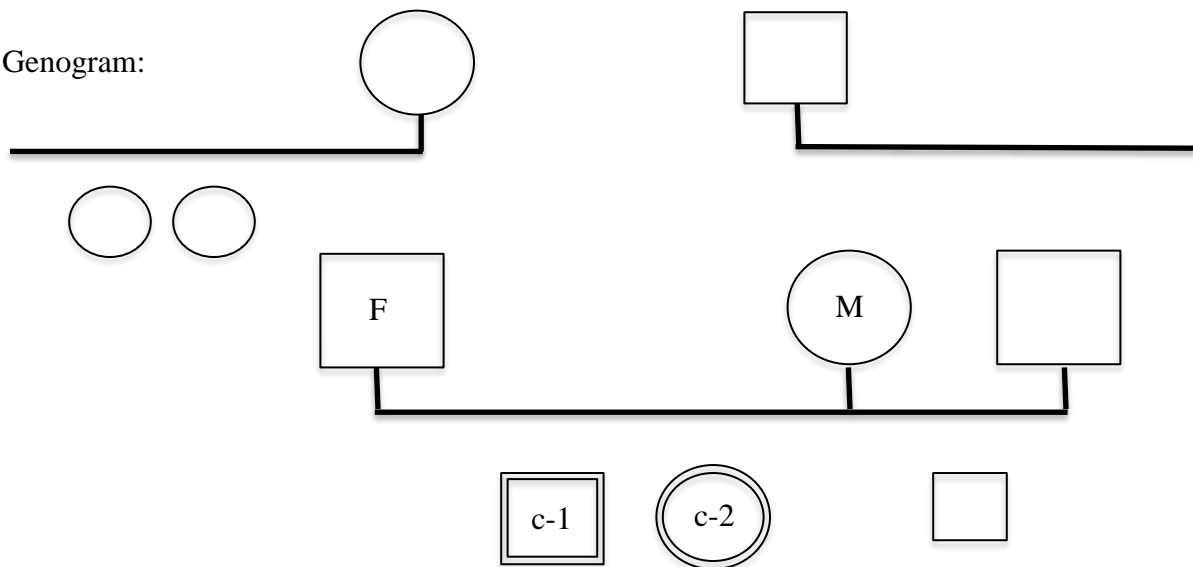
Materials Reviewed:

<redacted>

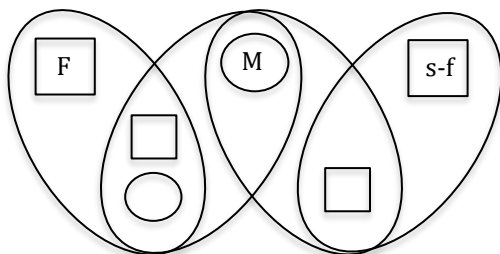
Family Background:

Family background information is still being compiled, but the basic structure is a complex blended family with a divorce in <date> with two children, <c-1 name> and <c-2 name>. The mother remarried and reportedly has a child with the new husband (step-father).

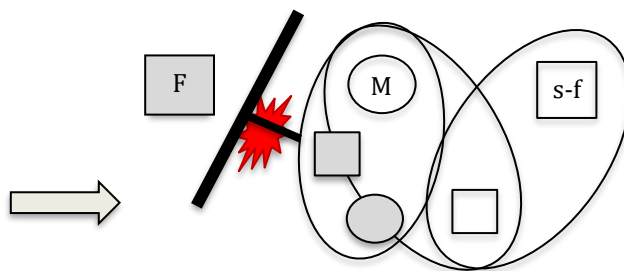
Genogram:



Healthy Separated Family Structure



Pathological Cutoff Family Structure



Clinical Psychology Concern:

Of concern with this pathological cutoff family structure is that the mother may have found the father's continued involvement with his children inconvenient to the formation of her new family, so she created (elicit-inflame-incite-support) a breach in the son's relationship with his father, followed by a breach in the daughter's relationship, thereby expelling the father from the family.

Divorce ends the marriage, not the family.

Of significant clinical concern for the healthy development of <c-1 name> and <c-2 name>) is the loss of the father-son and father-daughter relationship. While the mother may assert that the father has been "replaced" by the children's step-father (a proposal of "psychological replacement"), this is NOT a psychological possibility, and instead creates a warped and damaged psychology of guilt and betrayal in the child. The psychological damage done to a child by an imposed "psychological replacement" of a father (or mother) is deeply damaging to children, with likely lifelong and permanent psychological damage affecting several generations of parent-child (and spousal) bonding.

Within the developing psychology of the child, the child's foundational identity is formed from two families, two heritages of identity unified in the child. When a child rejects one parent – rejects one heritage of self-identity – the child is rejecting a piece of themselves as being "bad" and unacceptable within them. This creates lasting damage in self-identity formation.

Furthermore, the attachment bond informs the development of vital self-esteem structures in the child, not from loving the parent, but from being loved BY the parent. The attachment system is a primary motivational system of the brain developed through evolution that strongly motivates children to want to be loved – to receive the love – from the mother and from the father. A child receiving the love of mother and the love of father creates a healthy psychology for the child. A cutoff in the flow of mother-love or father-love to the child would create severe damage to the child's healthy development with lifelong damaging consequences. The flow of bonded love from a mother to a child and from a father to a child is vital to the child's healthy development, each is unique, and neither is replaceable.

The attachment bond between father and son, father and daughter, is an affectional bond of profound impact, the emotional injury felt by the father in the loss of this important affectional bond is felt measure-for-measure by the children from this rupture to a key father-son, father-daughter, bond. The psychological loss of the father-son/father-daughter bond is analogous to a parent whose child dies from illness or tragedy. The complete loss of a father-son/father-daughter or mother-son/mother-daughter relationship for a child is essentially a death of a parent, and the grief, loss, and emotional suffering is intense.

But the father is not dead. He is alive and available to provide his children with love and affectionate support, with his adoration and admiration for their accomplishments and their growths into young adulthood, as their father. This is important for children to receive. The initial focus of the family will likely be to revive and continue "past problems" in the mis-belief that solution comes from solving problems. It doesn't. Solution comes

from creating solution, now. Not then. Nothing we can do about then. We create solutions now. And many paths become available once a solution is sought.

Treatment Goal:

Parent-child relationships are of four unique types:

mother-son

father-son

mother-daughter

father-daughter

Each of these unique relationships has important developmental consequences for the child's emotional and psychological development. The critical feature in each of these relationships is that the child RECEIVE love from the mother and father. The brain (the attachment system) is set up to grow in response to receiving parental love, and becomes impoverished and then damaged by the absence of RECEIVING parental love.

While <c-1 name> and <c2 name> both protest anger and rejection of their father for his alleged past failures in adequacy as judged by the children (mother?), the actual brain networks of all children deeply seeks to be loved – to receive the love – of the father or mother (father-son; father-daughter).

The treatment goal would therefore be to restore the flow of love from the father to the children. Receiving love is always a good thing for children, receiving the love of one's mother and the love of one's father is critical to healthy emotional and psychological development.

Solution-Focused Family Therapy

Family systems therapy (Bowen; Minuchin; Haley) is the appropriate school of psychotherapy to address and resolve the family attachment bonding issues reported for the family. Supplementing the principles of family therapy with solution-focused therapy (Berg; de Shazer)¹ will be important to release the family from a fixated hold on the past to allow current and future solution.

Extended Family

This family contains significant involvement with extended family, notably the children's grandmother on the father's side, whom the children are also reportedly rejecting, and the step-father and younger sibling in the mother's portion of the family system who are likely to be important figures in the lives of the children. The role of extended family in developing the treatment plan and solution will likely be an important consideration.

¹ Solution-Focused Therapy: <https://solutionfocused.net/what-is-solution-focused-therapy>

Treatment Goal: A Healthy Attachment System

Mary Ainsworth, a preeminent figure in researching the attachment system in childhood and its influence throughout our lifespans, describes the healthy functioning of the attachment system. This description of a healthy attachment system provided by Ainsworth becomes the treatment goal, the creation of an attachment bonding system for the child that reflects this description of a healthy attachment system:

“I define an “affectional bond” as a relatively long-enduring tie in which the partner is important as a unique individual and is interchangeable with none other. In an affectional bond, there is a desire to maintain closeness to the partner. In older children and adults, that closeness may to some extent be sustained over time and distance and during absences, but nevertheless there is at least an intermittent desire to reestablish proximity and interaction, and pleasure – often joy – upon reunion. Inexplicable separation tends to cause distress, and permanent loss would cause grief.” (Ainsworth, 1989, p. 711)

“An “attachment” is an affectional bond, and hence an attachment figure is never wholly interchangeable with or replaceable by another, even though there may be others to whom one is also attached. In attachments, as in other affectional bonds, there is a need to maintain proximity, distress upon inexplicable separation, pleasure and joy upon reunion, and grief at loss.” (Ainsworth, 1989, p. 711)

Ainsworth, M.D.S. (1989). Attachments beyond infancy. *American Psychologist*, 44, 709-716.

Of particular note in this description as treatment goals for the child would be 1) the restoration of “pleasure – often joy – upon reunion,” and 2) to resolve the child’s “grief at loss” as the first two points on the treatment plan.



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