Rick Biesinger, LLC 1220 North Main Street, Bldg. 4 Springville, UT 84663

PSYCHOLOGICAL EVALUATION WITH A PARENTING COMPONENT

Name: Josh Kepka

Age: 34

DCFS Caseworker: Jane Beckster

Dates of Assessment: 11/1/17, 11/16/17, 11/22/17, 12/2/17, 12/13/17

Location of Testing: Examiner's office (Collateral information was gathered by phone.)

Examiner: Rick Biesinger, Psy.D., NCC

REASON FOR REFERRAL:

Josh, a 34-year-old male, was referred for testing by the Division of Child and Family Services (DCFS) in order to evaluate and determine his psychosocial functioning, degree of psychopathology, diagnoses, and appropriate treatment recommendations. DCFS also requested that a parenting component be added to the evaluation.

TESTING INSTRUMENTS:

Clinical/Diagnostic Interview

Wechsler Abbreviated Scale of Intelligence: Second Edition (WASI-II) Minnesota Multiphasic Personality Inventory: Second Edition (MMPI-2)

Millon Clinical Multiaxial Inventory: Fourth Edition (MCMI-IV)

Beck Depression Inventory: Second Edition (BDI-2) Child Abuse Potential Inventory: Form VI (CAPI)

Substance Abuse Subtle Screening Inventory: Fourth Edition (SASSI-4)

Parenting Stress Index: Fourth Edition (PSI-4) Parent-Child Relationship Inventory (PCRI)

Current Difficulties:

At the time of his interview, Josh reported having relatively few psychological symptoms or difficulties. Of the roughly 130 symptoms the examiner asked him about, he only reported having 7 of them. He stated that he has had a really frightening experience, is a perfectionist, that his heart pounds at times, and that he has a difficult time breathing at times. He also stated that he cannot stay seated very long, is easily agitated, and has a history of temper tantrums. He denied having any additional symptoms or difficulties. He stated that he feels good "for the most part."

When asked about his reportedly frightening experience, Josh stated that he was referring to some past abuse. When asked about his reported history of temper tantrums, he stated, "I've had them once or twice at work; once or twice at home." No additional information was provided.

Overall, Josh stated that he does not tend to feel anxious or depressed. When talking about it, however, he stated, "I don't like going into stores by myself at all." When asked for more information, he stated that if he is with his family, he will tough it out, but that if he is by himself, he will not go into crowded places. He stated that he will only go into a crowded place by himself if he has to do so for work (e.g., going into a store to buy materials for work etc.). When asked if he feels anxious in crowds, he stated that he simply dislikes crowds, but does not feel anxious in them.

Treatment History:

Josh stated that he saw a therapist when he was in school, which he described as "just like a counselor." When asked for more information, he stated, "I think I went [in]...the 8th" grade and again in high school. No additional information was provided. He also stated that he went to detention when he was about 15, for "minor possession and consumption of alcohol." He stated that he was supposed to pay a fine, but did not pay it in time, so he went back to detention a second time a short time later. He stated that he did not remember how long he was in detention. He denied any additional history of treatment.

Family History:

When asked about his childhood, Josh stated that his parents were never married and that he was "raised by [my] mother [and stepfather]." He stated that his "grandfather was my [role model]." When asked how discipline was handled in his home, he stated that his stepfather "was very strict." He stated that after his mother and stepfather divorced (when he was 13 or 14), "I...had little to no discipline." When asked what he would change about his childhood or family, if he could change anything, he stated that he wishes he never started smoking, and wishes that he spent "more time with my grandfather."

Josh stated that when he was growing up, he would see his father "occasionally" when "he'd come into town." He stated that he ended up moving in with his father when he was 17, and lived with him until he was 18. He stated that that was the only time he lived with his father when he was younger (His father reportedly moved in with him for a brief period of time when Josh was an adult.). When asked why he moved in with his father at the age of 17, he stated, "I wasn't going to school...I wasn't working." He also stated that he was "in a relationship with a married woman." He stated that his mother sent him to live with his father because he (Josh) was getting into trouble. No additional information was provided.

When asked to describe his mother, Josh stated that she is a "hard worker" and "has always been around." He also stated that she is "a very [strong-willed] woman." When asked about his relationship with her, he stated, "We talk several times a week." Overall, he stated that he has a good relationship with his mother.

When asked to describe his father, Josh stated that he "works [a lot]." He stated that his father lives in Arizona. When asked about his relationship with him, he stated that he and his father do "not really" have a relationship. When asked what happened, he stated, "I don't know. We had an argument...I got him a job and let him stay with me and my family...It just didn't go too well." No additional information was provided.

When asked more about his stepfather, Josh stated that his mother and stepfather married when he was about 4, and divorced when he was about 13 or 14. He stated that he does not currently have a stepfather. He stated that his father has remarried, but that he is "not close to her at all," referring to his stepmother.

When asked about siblings, Josh stated that he has one younger brother and one younger sister. He did not provide any information about his relationship with them.

Josh stated that he has been married three times. He stated that he married his first wife when he was 20, and that they divorced when he was 23. When asked what led to the divorce, he stated, "I was just way too immature. I...wasn't ready to be married...I'd say most of it was my fault." He stated that he married his second wife when he was 26, and that they divorced when he was 28. When asked what led to the divorce, he stated, "She had...chemical dependency issues" and "a serious problem with the truth...story telling...tall tales."

Josh stated that he married his current wife in 2012. When asked about his relationship with her, he described it as "complicated." When asked why, he stated, "the whole DCFS thing." He stated that he and his wife still live together, but that their marriage is strained due to the complications associated with DCFS' involvement.

When asked about children, Josh stated that he has a 17-year-old son named Kevin, a 16-year-old daughter named Bethanie, a 14-year-old daughter named Melanie, an 11-year-old son named Joseph, and two 7-year-old twin boys named Thomas and Timothy. He stated that his first wife is the mother of Kevin and Bethanie and that his second wife is the mother of Melanie and Joseph. He stated that his current wife is the mother of Thomas and Timothy.

Josh stated that after he and his first wife divorced, he was "not in the picture [for] 10 years." He stated that he and his two oldest children "still talk," however. He stated that he is "very close" to Melanie and Joseph. He also stated that he is "close" to his two youngest sons. "They are usually happy to see me," he stated.

When asked if there were any divorces, deaths, or other family tragedies growing up that may have contributed to his current difficulties, Josh mentioned his mother's divorce and his "abusive stepfather," but when asked if they contribute to his difficulties, he stated, "I [don't] think so."

When asked if any mental health difficulties run in his family, Josh stated, "yes." When asked for more information, he stated that one of his maternal aunts has "[severe] depression." He also stated that his paternal grandfather had a "nervous breakdown." No additional information was provided.

Developmental History:

Josh denied having any history of developmental delays. No collateral information was available to verify whether or not that is true.

Abuse History:

Josh denied any history of neglect or sexual abuse. When asked about verbal abuse, he stated that his stepfather was verbally abusive. He stated that he does not remember when it started, but that it continued until "I was 12 or so." When asked for more information, he stated, "He just had nicknames for me." He stated that he could not remember much. Overall, he was quite vague when discussing it. When asked how often it occurred, he stated, "I...couldn't tell you."

Josh also stated that he was physically abused by his stepfather. When asked about it, he stated that it occurred a "couple times." He stated that his stepfather "drug me up the stairs by my hair once or twice." He then stated, "I remember one time, he just about took me to the hospital." No additional information was provided. Overall, he did not provide a lot of details, other than stating that the abuse occurred between the ages of 4 and 10. He stated that he could not remember much.

Josh also stated that he witnessed domestic violence a couple times in his home. He stated that he saw his stepfather abuse his mother. No additional information was provided.

Legal History:

Josh stated that he has been arrested five times. When asked about it, he stated that he was charged with possession and consumption of alcohol two times when he was 15. He stated that his third arrest also occurred when he was 15, as a result of not paying the fine for his first two arrests. He stated that his fourth arrest occurred in 2002, for "failure to remain at the scene of an accident with injury." He stated that his fifth arrest occurred in 2007, because he never paid a seatbelt ticket. When asked if he has ever been charged with anything else, he stated that he was charged with "[possession] of a controlled substance, marijuana," in 1999. "I was ticketed, but I wasn't arrested on that," he stated. He denied having any additional charges.

Academic/Work History:

Josh stated that he dropped out of school after 11th grade. When asked why, he stated, "Some of it was social. He stated that he was very nervous in crowds. He then stated that he still gets a little nervous in crowds, but "nothing like when I was younger." He stated that he has never obtained his GED. When asked how he did in school prior to dropping out, he stated, "fair when I did the work."

Josh also stated that he had some attendance problems at school. When asked about it, he stated that he "wouldn't go" at times. He stated that he went to an alternative high school for a while. He also stated that he had some "social" problems at school. "I always assumed others were talking or thinking negative about me," he stated. Overall, he stated that he disliked school.

Josh also stated that he was suspended in school. When asked about it, he stated, "maybe like middle school." He stated that he was in some "fights" in 6th grade, "and a little bit in 7th grade." He stated that he was "tall," so people wanted to fight him. He stated that other people "typically" started the fights. He stated that he does not ever remember starting a fight. When asked how many times he was suspended, he stated, "I honestly couldn't tell you; I want to say only a couple, but...it's been so long...I don't really remember."

Josh stated that he currently works full time as a "[concrete] worker." He stated that he has had that job since March of 2017. He stated that he has worked for the same construction company for nearly six years. He stated that he has worked in the construction industry since 2000, except for two years (between the ages of 23 and 25), during which time he reportedly worked for a neighbor tuning pianos. He stated that he does have the financial ability to provide for his children.

When asked if he has ever been fired, Josh states that he was fired from a construction job when he was 16. When asked about it, he stated that his boss told him that he was not physically capable of doing the required work, so they let him go (It reportedly required a lot of lifting.). He stated that that is the only time he has ever been fired.

Substance Use History:

Josh stated that he consumed alcohol for the first time when he was 13 or 14. He stated that he drank it a couple times a year until he was in high school. He stated that when he was in high school, he drank about once a month, getting drunk "pretty dang near every time." He stated that after he dropped out of high school, he started drinking about two to five times per week. He stated that that continued until about three or four years ago. He stated that for the past three to four years, he has consumed alcohol "usually four to five times a week." He stated that that continued until a "couple months ago." When asked how much he was drinking, he stated, "usually two to three" drinks at a time. He stated he did drink more at times, however. He stated that on some nights, he drank "probably seven to nine" drinks, which he described as beer and liquor. When asked how often he drank seven to nine drinks, he stated, "maybe once a week...a weekend thing...I'm really bad with football...I don't realize how much I'm drinking, just sitting...watching football." He stated that he has had one or two glasses of wine in the past two months (October through December). He stated that that is the only alcohol he has consumed in the past two months.

When asked about illicit substance use, Josh stated that he smoked marijuana for the first time when he was 14. He stated that he smoked it "every couple months; not very often" until he was 22. He stated that when he was 22, he started smoking it about twice a week. He stated that that continued for "probably about a year." He stated that since that time, he has smoked it about once every couple years, "if that." When asked when he last smoked marijuana, he stated, "a year ago maybe."

Josh stated that he used meth for the first time when he was 17. He stated that he used it one time that year. He stated that he did not use it again until "probably 23." He stated that when he was 23, he used it heavily for about a month. When asked for more information, he stated that he used it once a week, then twice a week, and then multiple times a week, but he stated that he only did that for "a month, give or take a couple weeks." He stated that he then quit and did not use it again until he was 26. He stated that he used it one time when he was 26. He denied any use since that time.

Josh stated that used cocaine for the first time when he was 22. He originally stated that he used it "every couple of months...maybe once a month-ish" until he was 24 (A couple minutes later, he stated that he used it about four to five times per year). He stated that he quit when he was 24,

but relapsed four or five months ago. He stated that he used it one time four or five months ago. He denied any use since that time. He denied any additional history of illicit substance use.

When asked about prescription drug abuse, Josh originally denied ever abusing medication, but he then told the examiner that he has used pain pills "once or twice" without a prescription. He stated that it has helped with his back pain. For example, he stated that he went to the dentist about six months ago and was prescribed 10 pain pills. He stated that he had some leftover pills after his tooth stopped hurting, so he took "one for my back." He denied any additional history of misuse of medication or prescription drug abuse.

When asked about smoking, Josh stated that he started smoking when "I was probably 10 or 11-years-old." He stated that he has smoked ever since that time. He stated that he currently smokes "[one] pack a day." He stated that he has "basically" smoked one pack per day "since I've been an adult."

Josh denied ever selling drugs and he stated that he has never acted as a middle man. When asked how he obtained drugs, he stated that he was "offered" them.

Suicide/Self-Harm History:

Josh denied any history of suicidal ideation and he stated that he has never attempted suicide. When asked about self-harming behaviors, he stated he cut "a little bit" when he was 13 or 14. He denied any additional history of self-harming behaviors.

Medical History:

Josh stated that he has back pain, which he described as "nothing major." He denied having any additional medical ailments. He also stated that he does not currently take any medication.

DCFS Involvement:

Josh stated that this is his second involvement with DCFS. He stated that his first case was open from about 2006 until 2007. When asked what happened, he stated that his wife at the time started using drugs again. "We had a couple arguments. The State got called" for "the arguments" and because of her drug use, he stated. When asked if there was any domestic violence or if they were merely arguing, he stated that his wife kicked out a window in a car one time, but he stated that he never became physical with her. He stated that he called the police a couple times on her. He stated that DCFS became involved and that he and his wife drug tested. "I never failed anything," he stated, but he stated that his wife had a dirty drug test at the beginning of the case. He stated that the children were never removed and that the case was closed.

Josh stated that after Joseph was born, his wife started using drugs again, and that there were more arguments, which led to the police being called. He stated that DCFS opened a case on his wife at the time, but that he and his wife had separated, so he did not have anything to do with that case. He stated that he had custody of Melanie at that time and that his wife had custody of Joseph. He stated that after about three months, he obtained custody of Joseph as well.

Josh stated that there were a couple other incidents involving DCFS after the original case, he stated that no cases were ever opened. He stated that Joseph hit his current wife one time, so she hit him back, resulting in Joseph getting a black eye. Josh stated that he was not home at the time, but that DCFS did ask him and his wife about it. He stated that on a second occasion, his wife put Joseph in his room and he started beating his head on the wall, which left a large goose egg on his head. He stated that Joseph went to school the next day and the school reported it. He stated that no case was ever opened that time either.

When asked about the current case, Josh stated that the case opened in November of 2017. He stated that DCFS came to their home and removed the children. When asked about it, he stated that his daughter, Melanie, was struggling and was "skipping school" and "sneaking out at night." He stated that she was quite defiant. He stated that she was meeting with a school counselor, and told the counselor that she had attempted suicide on four occasions. He stated that the school counselor then called DCFS to report the suicide attempts. Josh stated that he did not know anything about the suicide attempts. "I knew she had been doing cutting," but he stated that he had no knowledge that she had attempted suicide. When asked why the school counselor called DCFS, he stated that he did not know, other than assuming that it was required for her to do so. "She was concerned about Melanie," he then stated.

Josh stated that DCFS came to their home and spoke with him and his wife, but that his wife "stormed out of the room." He stated that DCFS asked him and his wife to take a drug test. "I kind of flipped out a little bit," he stated, because of his previous involvement with drug testing for DCFS. "There was the fact I had used" in October, he also stated. He stated that he was frustrated at DCFS' request. "My wife failed...cocaine and opioids and marijuana," he stated. He stated that he passed the UA, but failed the hair follicle test, "for cocaine." The examiner then asked him if he knew his wife was using drugs. "I wasn't sure," he stated. When asked if he was being honest, he stated, "It really is, yeah...I couldn't see how she was coming up with the means to pay for any drugs."

Josh told the examiner that the children were removed before he and his wife had dirty drug tests. When asked why, he stated that DCFS wanted him to drug test and to set up a team meeting. He stated that he was busy with work and was supervising three different jobs at the time. "I explained this to the caseworker," he stated (He implied that the children were removed due to non-compliance, but he never said that for certain.).

Josh stated that he sent a text message to his caseworker a few days before the removal, and asked where he could drug test. "The next day, they served us with papers...where they removed the kids...They said it was a month that I had been putting them off," he stated. When asked if that was true, he stated that he did put them off, but it was more like three weeks instead of a month. He then told the examiner that one of the reasons he delayed the drug test was because he was nervous about drug testing, because he did not know if he would pass the hair follicle test, "which makes me look like I'm a druggy, which I'm...not." He also stated, "I guess they were also having a hard time" getting drug tests from his wife.

The examiner asked Josh if he is completely committed to staying clean, no matter what happens to him. "Yeah, he stated." The examiner then asked him if he is willing to do whatever is necessary for his children, including perhaps leaving his wife or reporting her drug use, if she

continues to use. "I've done it before," he stated. The examiner then asked him for a more definitive answer. "Yeah," he stated.

In addition to interviewing Josh, the examiner interviewed his DCFS caseworker, Jane Beckster. She stated that DCFS "primarily" became involved because of Josh's wife. She stated that there were concerns about drug use. She also stated that Thomas has some fairly "extreme" behavioral difficulties and that the children have been deemed "unmanageable." She stated that Thomas's school reported that he only attended two weeks of school in 1st grade, and has missed 38 days so far in 2nd grade. She also stated that Timothy has missed school. In addition, she stated that there was a report of lice in the home. She also stated that Melanie had "a physical altercation" with Josh's wife. She stated that Melanie became physical with Josh's wife and that his wife reportedly hit Melanie.

Jane stated that Josh's wife tested positive for cocaine and THC during her initial test, and that her second test was positive for heroin and cocaine. She stated that when Child Protective Services (CPS) contacted Josh, he claimed to have "no idea" any of that stuff was occurring in the home (e.g., the drug use, Thomas's difficulties, the attendance problems at school, the head lice etc.). "And so we were concerned about that," Jane stated. She stated that Josh told her that he drives two hours "each way" for work, so he leaves early in the morning and arrives back home late at night. She stated that because of that, Josh does not appear to know much about what happened in the home. She also stated that there was "a domestic violence incident" in front of the children, where Josh was aggressive" with his wife and was throwing things at her. In addition, she stated that Josh's hair follicle test came back positive for cocaine. She stated that Josh adamantly denied using drugs at first, and initially claimed that the test was wrong, but Jane stated that he does have a history of substance use. She also stated that his ex-wife was "a heavy substance user" and lost custody of the children. She stated that this is the second time DCFS has been involved with Josh's family.

Jane stated that Josh has been completing his drug tests. She stated that he did test positive one time for alcohol, but that the rest of his tests have been clean. She stated they have concerns about alcohol use because alcohol was involved in the domestic violence incident. She stated that Josh has told her that he was drinking two to four drinks per night to "unwind" after work, and that that continued after the removal. She stated that she has concerns about his alcohol use, and has concerns that he is traveling four hours per day for work, and thus, has not been involved much with the children. She stated that Josh's wife has been doing a majority of the work in the home, which is concerning to DCFS because her substance abuse is reportedly more significant. She stated that Josh has acted somewhat "shocked" about all of the things DCFS has found out about his home.

Jane also told the examiner that there is an order to show cause on both Josh and his wife, because they have not followed through with what was requested. She stated that Josh has not followed through with "the DV, anger management, and codependence assessment" he was supposed to complete. She also stated that he was supposed to complete a mental health evaluation and a substance abuse assessment, but he has not completed those either. She stated that the only things he has completed are his psychological evaluation and his drug testing.

Jane told the examiner that Josh's wife "is not doing anything" for DCFS, and that DCFS will be requesting 30 days in jail or drug court for her. She stated that that is somewhat concerning

because Josh recently made the comment, "I don't want to get a divorce for the third time." Jane stated that DCFS has concerns about whether or not Josh will do what is necessary if he has to parent the children alone. She stated that prior to the removal, Josh talked about hiring a nanny, but never really put forth any sort of safety plan that assured the children would be safe. She stated that DCFS kept trying to reach him, but nothing was getting done. "His accountability needs to go up," she stated. She stated that he tends to blame DCFS, but he has not done his part to do what is necessary. She stated that he is doing more than his wife, however.

Jane also stated that Thomas and Timothy "have some very aggressive, violent behaviors," such as hitting, kicking, and biting etc. She stated that DCFS has concerns about how Josh will handle things on his own, if that becomes a necessity (i.e. if his wife ends up not doing what is necessary to regain custody of the children and, thus, has to leave the home.).

After talking with Jane, the examiner called Josh and had a follow-up conversation with him. The examiner asked him if he has a plan for providing for the children, if he has to do it alone. He stated that he is "on salary" now, and is no longer working for an hourly rate. As such, he stated that he does not have to work as many hours in the evening (The examiner is not exactly sure what the connection is between him being on salary and not having to work as much, but that is what he claimed.). He stated that he is getting home earlier in the evening than he was in the past. He also stated that he has been talking to his mother about possibly helping him. He stated that he and his mother have talked about having her come to his home every morning, so she can help get his children off to school. He stated that he and his mother are also trying to find someone who can come to his home every afternoon, to be in the home when his children arrive home from school. "The kids have to come first and I have to be thinking ahead, as far as that goes," he stated.

The examiner also asked Josh why he has not completed any of his assessments (the ones Jane stated that he has not completed.). "I need to get information as far as what providers I'm supposed to go [through]...I just need to find the next step as far as which doctors I need to go through...That is the next step...I need to get going on some of these," he stated. The examiner then asked him if he is committed to doing everything DCFS has asked him to do. "Well, it was court-ordered. I basically have to. I will be doing it," he stated.

In addition to being interviewed, Jane sent the examiner a copy of the court report, the "shelter/pretrial hearing order," and the "ex parte motion for expedited placement in temporary custody" report. The documents are too comprehensive to adequately summarize in this report; therefore, individuals needing more specific information should read those documents themselves.

According to the court report, the children were removed "due to drug use in the home and failure to protect from dad." The court report states that CPS received a referral in September "for allegations of child endangerment, failure to protect, and physical abuse against Lilly (Josh's wife) and Josh Kepka...The children were removed from [their] parents' custody" in November. The court report also provides some information regarding the children's difficulties.

According to the court report, Josh "failed to submit to a drug test" on November 15, 2017, "missed a calling-in" on November 16th, and then tested positive for cocaine on November 19th. It also indicates that he tested "positive for ETG" on December 11th. As part of the court report, Jane included the results of Josh's drug tests. As was stated previously, he tested positive for cocaine and alcohol on one occasion (each). The rest of his tests were negative.

According to the "shelter/pretrial hearing order," Josh "knowingly allowed the children to be in the physical care of a person, after he received actual notice that the person physically abused the children." The document also states that Josh "expressed his frustration because of his history with the Division, and continued to excuse his refusal to cooperate with the Division, stating he was just too busy to drug test one time over the past six weeks. He future complained of having panic attacks because the Division has been calling him" (He never mentioned anything to the examiner about having panic attacks.).

According to the "ex parte motion for expedited placement in temporary custody" document, Melanie disclosed in September of 2017 that Josh and his wife "got into a fight because the mother was going to Salt Lake to get drugs" (That contradicts what Josh reported during his interview. As was stated previously, he stated that he "wasn't sure" if his wife was using drugs.). Melanie also reported indicated in September "that there is a lot of fighting in the home." In addition, she reportedly indicated in September "that both the mother and father have physically abused her...She described the father taking her to the ground" and putting his knee on top of her." That document also states that Josh told DCFS "that he knows the mother smokes marijuana" (Which again, contradicts what he told the examiner during his interview, at which time he claimed that he "wasn't sure" if his wife was using.). In addition, the document notes that Josh initially refused to be drug-tested, refused to cooperate with DCFS, and referred to the DCFS case as "garbage."

The "ex parte motion for expedited placement in temporary custody" document also provides an account of Josh's involvement with DCFS in 2005, 2006, and 2007. According to the document, in 2005, Josh "hit Melanie and knocked her down." There were also reports of Josh and his wife locking the children "in the bedroom."

BEHAVIORAL OBSERVATIONS:

Josh was oriented to person, place, time, and situation, and he appeared to be his given age. There were no apparent physical disabilities and the rate and content of his speech were normal. His posture was appropriate, as were his gestures. His grooming and hygiene were also appropriate; however, he did smell like nicotine smoke. His eye contact was generally appropriate, being neither avoidant nor vigilant. He related well to the examiner and there were no indications of hostility or bizarre thought content. Overall, he was cooperative and friendly throughout the testing process. He did miss one appointment, but overall, he put forth good effort to complete the testing.

PSYCHOLOGICAL EVALUATION:

Wechsler Abbreviated Scale of Intelligence: Second Edition (WASI-II):

Verbal Subtest	T-Score	Perceptual Reasoning Subtest	T-Score
Vocabulary	50	Matrix Reasoning	56

The WASI-II is a screener that assesses an individual's estimated level of intelligence. The results of Josh's profile indicate that he received an estimated IQ score of 105, which represents the 63rd percentile and falls in the average range of intellectual classification. The examiner does not have any concerns about Josh's cognitive functioning. He has the cognitive ability to understand the consequences of his behaviors and the associated court proceedings related to this case. He also has the cognitive ability to understand everyday parenting dynamics. In addition, he has the cognitive ability to benefit from a wide variety of treatment modalities, given the appropriate motivation.

Minnesota Multiphasic Personality Inventory: Second Edition (MMPI-2):

Validity Scales:

Scale:	VRIN	TRIN	F	Fb	Fp	FBS	L	K	S
T-Score	46	50	51	46	41	51	43	39	45

Clinical Scales:

Scale:	1 Hs	2 D	3 Ну	4 Pd	5 Mf	6 Pa	7 Pt	8 Sc	9 Ma	0 Si
T-Score	51	64	57	67	46	57	57	44	45	66

The MMPI-2 is an empirically based measure of psychopathology and it helps identify personal, social, and behavioral problems in adults. The results of Josh's profile are valid and suggest that he describes his current family and/or his family of origin as lacking in love, understanding, and support. He believes that his family is or has been critical of him, and has not permitted him adequate freedom and independence. He also expresses resentment of societal and parental standards and customs. He has definite opinions about what is right and wrong, and he will stand up for his beliefs. Many individuals with his profile have been in trouble in school or with the law.

Josh feels shy around other people and he is easily embarrassed. He feels uncomfortable in social situations and new situations. He also expresses a great dislike and avoidance of group activities and being in crowds. In addition, he likely avoids contact with other people.

Josh is dissatisfied with his current life situation. His test results also suggest that he is introverted, withdrawn, and has a restricted range of interests. In addition, he tends to lack self-confidence. He also likely has some somatic complaints (i.e., He may develop physical symptoms in response to stress). In addition, his test results suggest that he may be in denial. He can also be immature, self-centered, demanding, suggestible, and affiliative.

Josh is overly-sensitive and he tends to be guarded and distrustful. He can also be angry and resentful. In addition, he is anxious and tense, and he feels uncomfortable. He is also likely insecure, and he can be meticulous and indecisive.

Josh's test results suggest that he can be aggressive, antagonistic, and argumentative. His test results also suggest that he tends to lie and cheat, and that he has a difficult time conforming to societal norms. Many individuals with his profile have a history of acting out, substance abuse, family conflicts, and poor achievement.

Josh's test results also suggest that he can be anxious, irritable, and unhappy. In addition, he tends to feel helpless at times, and he may ruminate and worry a lot. He can also be overly-sensitive and he likely feels some guilt. In addition, he tends to have some intrusive thoughts.

Josh may have a difficult time concentrating, and many individuals with his profile complain of sleep disturbance. He is uncomfortable making decisions and some people with his profile have some obsessive-compulsive tendencies. He tends to believe that life is a strain, and he is pessimistic about things getting better. He also tends to feel insecure, and he lacks self-confidence. In addition, he may feel overwhelmed by the responsibilities of daily life.

Josh dislikes being around other people, and he tends to keep other people at a distance. He also tends to feel uncomfortable in interpersonal situations, and he finds it difficult to interact with new people. Individuals with his profile often prefer to be alone, and they tend to have a difficult time initiating conversations. They also commonly have limited interests, and they tend to be somewhat socially awkward.

Millon Clinical Multiaxial Inventory: Fourth Edition (MCMI-IV):

Modifying Indices	<u>BR</u>	Severe Personality Pathology	BR
X-Disclosure	43	S Schizotypal	0
Y-Desirability	50	C Borderline	10
Z-Debasement	38	P Paranoid	60
Clinical Personality Patterns	BR	Clinical Syndromes	BR
1 Schizoid	43	A Generalized Anxiety	0
2A Avoidant	76	H Somatic Symptoms	0
2B Melancholic	53	N Bipolar Spectrum	36
3 Dependent	60	D Persistent Depression	14
4A Histrionic	54	B Alcohol Use	60
4B Turbulent	42	T Drug Use	67
5 Narcissistic	62	R Posttraumatic Stress	40
6A Antisocial	62	Severe Clinical Syndromes	BR
6B Sadistic	30	SS Schizophrenic Spectrum	17
7 Compulsive	62	CC Major Depression	24
8A Negativistic	60	PP Delusional	0
8B Masochistic	36		

The MCMI-IV was designed to help evaluate and diagnose individuals with emotional and interpersonal difficulties. The results of Josh's profile are valid and suggest that he is always on guard, ready to distance himself from life's painful and negatively reinforcing experiences. His adaptive strategy reflects fear and a general distrust of others. He maintains a constant vigil to prevent his longing for affection from resulting in a repetition of the pain and anguish he has experienced with others. Despite his desires to relate to other people, he has learned that it is best to deny those feelings and keep a good measure of interpersonal distance. All other scales were in the normal range.

Beck Depression Inventory: Second Edition (BDI-2):

The BDI-2 is an instrument designed to aid in the diagnosis of depression in adults. The results of Josh's profile are in the normal range, indicating that he is not reporting symptomatology consistent with a depressive disorder.

Child Abuse Potential Inventory: Form VI (CAPI):

The CAPI is a screening instrument designed to assess the potential for child physical abuse. It measures parents' self-perceptions of stress, rigidity, unhappiness, problems with their children and themselves, problems with their family, and problems with others. The results of Josh's profile are valid and suggest that he is not reporting symptomatology consistent with known physical child abusers. That being said, his test results suggest that he describes his children and himself in a negative manner. He has perceptions of having a problem child and perceptions of having a child of limited ability and competency. His test results also suggest that he may have some perceived limited physical ability himself. The perception of having a problem child, the belief that children have problems because of limited ability, and the belief his own limited physical ability contribute to the likelihood that he will maltreat children. His test results also suggest that his family has many problems, has difficulty getting along, and experiences fighting. A problem laden, disturbed, and possibly violent family increases the likelihood that his children will be maltreated.

Substance Abuse Subtle Screening Inventory: Fourth Edition (SASSI-4):

The SASSI-4 is a substance abuse screener designed to help identify individuals who have a high probability of having a substance use disorder. The results of Josh's profile are valid and suggest that there is a low probability that he has had a substance use disorder in the past six months.

Parenting Stress Index: Fourth Edition (PSI-4):

The PSI-4 is an instrument designed to evaluate the magnitude of stress in the parent-child system. It is comprised of two domains; one each for children and parents, which combine to help determine the total amount of stress in the parent-child system. Josh completed the PSI-4 three times; once each for Joseph, Thomas, and Timothy. The PSI-4 is designed for parents of children up to age 12; therefore, no profile is available for Melanie.

With respect to Joseph, Josh's profile is in the subclinical range overall, suggesting he does not perceive that parenting Joseph is a significant source of stress in his life. His test results do suggest, however, that he perceives Joseph to be unhappy and depressed, believes that Joseph frequently cries, and does not display signs of happiness. His test results also suggest that Joseph possesses physical, intellectual, and emotional characteristics that do not match Josh's parental expectations. He believes that Joseph is not as attractive, as intelligent, or as pleasant as he had expected or had hoped. Because of that, poor attachment, rejection, or both may consciously or unconsciously affect their relationship.

The results of Josh's profile for Thomas are valid and are also in the subclinical range, suggesting that Josh does not perceive that parenting Thomas is a significant source of stress in his life. That being said, his test results suggest that Thomas has characteristics that make the parenting task more difficult by virtue of his inability to adjust to changes in his physical or social environment. Parents in similar situations often report being extremely frustrated in their attempts to develop a relationship with their child. He also perceives that Thomas places many demands on him. These demands may appear in diverse forms, such as crying, physically hanging on him, frequently requesting help, or exhibiting a high frequency of minor problem behaviors. In some instances, this attitude reflects the possibility of conduct problems within the Parents who obtain similar scores often need guidance regarding discipline and compliance training. In addition, his test results suggest that he perceives that Thomas is unhappy and depressed, frequently cries, and does not display signs of happiness. His test results also suggest that Thomas possesses physical, intellectual, and emotional characteristics that do not match Josh's expectations. He tends to believe that Thomas is not as attractive, as intelligent, or as pleasant as he had expected or had hoped. Because of that, poor attachment, rejection, or both may consciously or unconsciously be affecting their relationship.

The results of Josh's profile for Timothy are valid and are in the subclinical range overall, suggesting that Josh does not perceive that parenting Timothy is a significant source of stress in his life. His test results do suggest, however, that Josh believes that Timothy possess many behaviors commonly associated with ADHD. The examiner has never met Timothy and therefore, has no idea whether or not he actually has ADHD. If Timothy does not have ADHD, the following hypotheses should be considered: (a) Josh lacks the energy necessary to keep up with Timothy; (b) Josh has unreasonable parental expectations for mature, adult-like behavior.

Although Josh does not perceive that parenting his children is a significant source of stress in his life, his test results do suggest that he has a significant amount of stress in his life (e.g., changes in income, going deeply into debt, changes at work, alcohol or drug problems, legal difficulties etc.). In other words, while he does not perceive that parenting his children is a significant source of stress, his test results suggest that he may have an unhealthy amount of stress in his life.

Parent-Child Relationship Inventory (PCRI):

Josh also completed the PCRI, which assesses parents' attitudes about parenting and about their children. He completed the PCRI four times; once each for Melanie, Joseph, Thomas, and Timothy. His profiles for Melanie and Joseph are not valid because he responded to the questions in somewhat of an inconsistent manner. As such, his profiles for those two children cannot be interpreted.

The results of Josh's profile for Thomas are valid and suggest that he has a difficult time talking to Thomas and getting through to him. His test results also suggest that he does not feel in control when he parents Thomas, and he senses that he has not established firm guidelines for Thomas. For example, some parents with his profile indicate that they sometimes give in to their children in order to avoid temper tantrums.

The results of Josh's profile for Timothy are valid and suggest that he has a less than average interest in Timothy's activities at school or elsewhere, and a less than average interest in spending time with Timothy. His test results also suggest that he does not feel in control as a parent, and that he senses he has not established firm guidelines for Timothy. As with Thomas, his test results suggest that he may give in to Timothy at times in order to avoid temper tantrums.

DIFFERENTIAL DIAGNOSIS:

As was stated previously, Josh stated that he does not like being in crowds. He never completely clarified why he does not like crowds. Some people do not like crowds because they become very anxious around a lot of people (e.g., social anxiety disorder.). Other people do not like crowds because they are impatient, but that generally only applies if they have to wait in lines etc., and Josh never mentioned that as the primary reason. Other people do not like crowds because they have sensory processing difficulties, so crowds are too noisy. Again, however, he did not mention that as the reason. He initially denied feeling anxious in crowds, but stated later that he does feel some anxiety in crowds; just not as much as when he was in school (As was stated previously, he mentioned dropping out of school, in part, due to the social aspect of it.). It could be that he is simply not recognizing that he is anxious. For example, he may view it as feeling uncomfortable etc. In order to qualify for a diagnosis of social anxiety disorder, an individual must have a marked fear or anxiety about social situations. Josh stated that that is not true. Based on what he reported, it appears that he used to have a lot of social anxiety, but no longer experiences as much of it. It is still an issue, however. As such, the examiner is diagnosing him with other specified anxiety disorder, noting his traits of social anxiety.

Even though the SASSI-4 suggests that there is a low probability that Josh has had a substance use disorder in the past six months, based on what he reported during his interview, he meets the criteria for an alcohol use disorder. Based on what he reported, his alcohol use disorder is being listed as mild in nature, but he is on the verge of having a moderate alcohol use disorder.

Josh has a history of cannabis use disorder, but it is not being listed below because it is not a current focus of treatment (He stated that he has only smoked it once every couple years since age 23.).

Josh's test results suggest that he could very well be more anxious than he realizes or wants to admit as being true. Because he denied having any additional symptoms of anxiety during his interview, however, no additional anxiety disorder is being given.

DIAGNOSIS:

F41.8 Other Specified Anxiety Disorder (traits of social anxiety disorder) F10.10 Alcohol Use Disorder, Mild

RECOMMENDATIONS:

- Josh does not need traditional individual therapy (at least based on what he reported). While he feels some discomfort in social situations, it is not anything that is interfering with his everyday life. As such, individual therapy for his social anxiety should not be mandated.
- The examiner supports the recommendations that were court-ordered for Josh (the assessments he has not yet completed, such as the domestic violence assessment, the anger management, the codependence assessment, and the substance use evaluation). He needs to do a much better job following up with what DCFS has asked him to do. He claims to be too busy. There is no doubt that he is busy, but if he is honest with himself, he has not put forth as much effort as he should have been putting forth. He was ordered to complete a mental health evaluation. There is no real need for that evaluation, since he completed his psychological evaluation. The other recommended evaluations and classes etc., however, need to be completed.
- If Josh cannot remain sober, alcohol-specific treatment will be needed (ranging from classes to more intense treatment, depending on the severity of his use.). He should follow the recommendations in his substance use evaluation.
- A parenting class is also recommended. Josh's test results suggest that he may struggle with knowing how to gain compliance from at least some of his children.
- Family therapy is also recommended, as needed. Based on what the examiner has been told (and read in the collateral records), Josh's children have some struggles that need to be addressed. The entire system needs to make some changes. That being said, the examiner does not know the children. Their therapists should determine what is best for them. Instead of family therapy, for example, perhaps having a behavioral specialist go into the home would be more appropriate (depending on the children's cognitive abilities and the extent of their behavioral difficulties). Since the examiner does not know the children, it is not appropriate for the examiner to determine what is best for them. DCFS should consult with their therapists to see what is best. Some form of intervention involving Josh and the children together is strongly recommended.
- Josh needs to stop fighting the system. His test results suggest that he can be quite rebellious at times, and he has demonstrated that with DCFS. He needs to do whatever is necessary to ensure that his children's needs are being met. He is quick to blame others, but he also had a role in his children's (and his) difficulties and circumstances.
- DCFS never mentioned anything about Josh being physically abusive, but, according to some collateral information that was sent to the examiner, Melanie reported some physical abuse in September. It goes without saying that Josh cannot abuse any of his children (or anyone else) in any manner.

- The examiner supports reunification as the goal. There is nothing in Josh's testing that suggests that he cannot provide an adequate environment for his children. His current prognosis is fair. As was stated previously, however, he needs to put forth more effort and complete what was recommended before he will be ready for his children to return home. Although he does not have avoidant personality disorder, his test results suggest that he tends to avoid things at times. That is affecting his ability to progress in this case. That needs to be confronted and challenged. His oppositional attitude, coupled with his tendency to avoid, are two variables that are hindering his (and his family's) progress.
- The examiner is concerned about Josh's repeated patterns (e.g., his drug use, being involved with people who use drugs, and then putting his children at risk). This must stop. While the examiner recommends reunification, Josh cannot put himself in any more situations that mimic his past relationships (e.g., drug use, arguing, domestic violence, maltreatment of children etc.).
- Josh needs to surround himself with individuals who will support his sobriety and be a positive influence for him and his children.
- The examiner has concerns about Joseph reportedly being sexually inappropriate with Thomas and Timothy in 2015. If that has not already been addressed, it needs to be discussed. Depending on what their therapists say, safety plans and boundaries need to be in place (and if it is still a concern, perhaps Joseph is not ready to return home.).
- Continued random UAs are recommended. Any missed or diluted UAs should be considered dirty.
- To the extent possible, Josh needs to develop the capacity to relate with others in a more connected manner. Those who work with him should focus on relationship development, and on using those relationships to help him in his interactions with others.
- Josh has some difficult decisions to make. The examiner is hopeful that he and his wife can both make sufficient progress, but based on what the examiner has been told, his wife is struggling. The reality is, Josh may have to choose between his wife and his children (at least temporarily). That is an extremely difficult decision for anyone to make, but if Josh wants to be the custodial parent, he needs to put his children's needs first. That may require some significant changes in his life (e.g., possibly separating from his wife, possibly moving etc.).
- If Josh does what is necessary, and reunification occurs, it is recommended that he works with a peer parent for an extended period of time (perhaps six months). The peer parent should determine the frequency of his or her involvement (depending on the needs at the time).

• If reunification occurs, DCFS should also continue to monitor the home, to make sure the children's physical, emotional, and social needs are being met.

***It is important to note that a psychological evaluation with a parenting component is not the same thing as a comprehensive custody evaluation, and as such, should not be the sole determinant of custody.

If you have questions regarding this report, feel free to contact me at 801-804-1028.

Rick Biesinger, Psy. D., NCC

Clinical Psychologist

Board Certified Counselor

Additional raw scores can be provided upon request.