IN THE CIRCUIT COURT OF THE SEVENTEENTH JUDICIAL CIRCUIT, IN AND FOR BROWARD COUNTY, FLORIDA

| IN RE: THE FORMER MARRIAGE OF | (| Case No.: 2006-04608 (35/90) Division: Family | | |
|---|----|--|--|--|
| [REDACTED], Petitioner/Former Husband, | | | | |
| and | | | | |
| [REDACTED], Respondent/Former Wife. | | | | |
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| AFFIDAVIT OF JEDOME H. DOLLACOFE DE D | | | | |

AFFIDAVIT OF JEROME H. POLIACOFF, Ph.D.

| COUNTY OF MIAMI DADE |) |
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| |) |
| STATE OF FLORIDA |) |

Jerome H. Poliacoff, Ph.D., being duly sworn, deposes and says:

- 1. I am a Florida licensed psychologist, and make this Affidavit upon personal knowledge as well as expertise in child custody forensic evaluations.
- 2. The purpose of this Affidavit is to address the performance in this case of Martha C. Jacobson, Ph.D. It is my conclusion, after thoroughly reviewing all pertinent documentation, that Dr. Jacobson did not act in *good faith* ^[1] as required by Fla. Stat. 61.122(1) in conducting her court-ordered evaluation, including, *inter alia*, in her written report, and in her sworn testimony. Moreover, her failure to adhere to statutory, regulatory, and aspirational requirements for the conduct of court-ordered evaluators in child custody matters has rendered her conclusions, opinions and recommendations inherently unreliable.
- 3. I have a doctoral degree, plus internship and post-doctoral training in child and family psychology, along with nearly 30 years' experience in this field. My curriculum vitae is attached. My practice includes psychotherapy and the forensic evaluation of children and adults. I have testified or consulted on more than 100 evaluations for state and federal courts, and more than 200 cases for other health professionals. I regularly am called upon by colleagues for supervision or consult regarding ethics and customary practices in the field of psychology.
- 4. Psychologists are licensed and regulated under Fla. Stat. Chapter 490. Fla. Stat. 490.004 creates the Board of Psychology which has adopted, in its administrative code (F.A.C.), rules regulating the professional actions of

psychologists to help assure competence in the profession and for the protection of the public. Dr. Jacobson failed to adhere to the following laws and regulations [see Exhibit X] governing the conduct of psychologists in performing evaluations for the family courts:

- -- 64B19-18.004 Use of Test Instruments;
- -- 64B19-19.005 Releasing Psychological Records;
- -- 64B19-18.007 Requirements for Forensic Psychological Evaluations of Minors for the Purpose of Addressing Custody, Residence or Visitation Disputes; and
- -- 64B19-18.007, which incorporates into law by reference the "APA Guidelines for Child Custody Evaluations in Divorce Proceedings" [2].
- 5. The "APA Guidelines for Child Custody Evaluations in Divorce Proceedings" are law in Florida, but from a professional standpoint it also is expected that when a psychologist asserts, as has Dr. Jacobson [3], that s/he is a member of an organization such as the APA or Association of Family and Conciliation Courts, that has promulgated guidelines for professional conduct, that the psychologist will adhere to those guidelines whether required by state law or not.
- 6. Fla. Stat. 61.122 encompasses the above-referenced administrative code regulations in its requirement that a psychologist who is acting on a court's order to perform an psychological evaluation in Chap. 61 proceedings
 - (1) act "in good faith", and
- (2) conduct the evaluation "...pursuant to standards that a reasonable psychologist would have used as recommended by the American Psychological Association's guidelines for child custody evaluation in divorce proceedings".
- 7. Dr. Jacobson did not conduct her evaluation consistent with the above-stated Florida administrative code rules, or in accordance with the *APA Guidelines*. She did not adhere to the administrative code rules and professional guidelines (in violation of Fla Stat. 61.22), and consequently, she did not act in good faith.
- 8. The failure by Dr. Jacobson to adhere to the administrative code rules and professional guidelines in violation of Fla Stat. 61.22, is more than the mere failure to act in "good faith", however. In this case, the foundations of her asserted conclusions are suspect, and her conclusions are unreliable. The domains in which Dr. Jacobson's evaluation procedures are suspect include her
 - (1) misuse of test instruments, and
- (2) <u>failure to cite to relevant research</u> in support of her interpretations and conclusions.

MISUSE OF TEST INSTRUMENTS

9. Dr. Jacobson's report lists these "test instruments" administered to each parent in furtherance of her "findings in response to my appointment to make parenting plan recommendations". The test results were used as a basis for Dr. Jacobson's opinions about the parenting capacity of each parent, and her recommendations were drawn from her diagnostic formulations from these tests:

Rorschach Psychodiagnostic Inkblot Method
Palhaus Deception Scale (PDS)
Minnesota Multiphasic Personality Inventory-2nd Edition (MMPI-2)
Millon Multiaxial Clinical inventory-Third Edition (MCMI-III)
State-Trait Anger Inventory-2nd Edition (STAXI-2)
Child Abuse Potential Inventory (CAP)
Parent Stress Inventory (PSI)
Parent-Child Relationship Inventory (PCRI)
Behavioral Assessment System for Children-2d Ed., Parent Rating Scales (BASC-PRS)

10. F.A.C. 64B19-18.004 Use of Test Instruments regulates the use of psychological test instruments; it incorporates by reference the standards of the *APA Guidelines*, and these in turn are encompassed in the professionalism guidelines of the AFCC. A psychologist performing evaluations for the family courts must be able to justify the use of a given test instrument ^[4], based on current knowledge of scientific developments consistent with accepted clinical and scientific standards ^[5], and use such instruments only where they are valid and reliable ^[6]. The psychologist must be able to articulate the criteria upon which the use of a particular test instrument is based ^[7], and should not use instruments for purposes for which they are not validated ^[8].

MISUSE OF TEST INSTRUMENTS: FAULTY JUSTIFICATION FOR USE OF PAULHAUS DECEPTION SCALE

11. Dr. Jacobson asserted a faulty basis for justification of the use of the tests, specifically, the Paulhaus Deception Scale (PDS):

Well, some tests -- The tests that I use are all tests that have been in my training, forensically, especially useful in forensic matters and have met the scientific requirements of reliability and validity. I do not use tests that have not met those criteri... all of the tests have met the criteria for use in the forensic arena or have been normally used by psychologists in (the) field in doing this work. [Deposition of Martha Jacobson, February 6, 2011, Page 102, Lines 4-9, 14-17]

- 12. In her deposition, Dr. Jacobson incorrectly claimed that the Paulhaus Deception Scale (PDS) was normed on a custody litigant population. [Deposition of Martha Jacobson, February 6, 2011, Page 108, Lines 4-25]
- 13. The PDS was not normed on a custody litigant population, but standardized on a sample from the general population, and samples from college student, military, and prison populations. ^[9] Information on the sample demographics and the sampling techniques used are not provided in the test manual, and issues of sex or age differences in socially desirable responding are not addressed.
- 14. In her deposition, Dr. Jacobson also claimed that her use of the Palhaus Deception Scale (PDS) was influenced by recommendations made at a workshop she attended, but when asked about that, she replied:

I don't have a specific recollection as to that. However, it was part of a -- It was suggested as an appropriate test, as part of the training I took on a scientific basis of child custody evaluations. It was suggested by both the workshop leader as well as in the literature. [Deposition of Martha Jacobson, February 6, 2011, Page 108, Lines 4-25]

15. When asked who was the workshop leader who recommended the PDS, Dr. Jacobson appeared to not recall, and replied that it was:

...Jonathan Gould and what is his name? Flens. Oh, his first name begins with a J... and Martindale, and these were workshops that I took at the AFCC conference, where they talk about -- And the other individual who recommended this test in a workshop is Randy Otto, who is out of Tampa. It's James Flens. [Id]

Upon information and belief, it is highly unlikely that David A. Martindale, the reporter for the AFCC custody evaluation guidelines (standards), recommended the use of a test with such limited application for use in a family court matter. This was not a test appropriate for use in this evaluation.

MISUSE OF TEST INSTRUMENTS: LACK OF DISCLOSURE OF RESEARCH: THE STAXI-2

16. The State-Trait Anger Expression Inventory (STAXI-2), another test used by Dr. Jacobson in her evaluation, is subject to simple impression management. This test is vulnerable to social desirability response bias in forensic clients [10] -- a limitation not noted or reported (or, apparently, considered) by Dr. Jacobson.

MISUSE OF TEST INSTRUMENTS: MISAPPLICATION OF NORM GROUP: THE CAP

17. The Child Abuse Potential Inventory (CAP) administered by Dr. Jacobson, was designed primarily as a screening tool for the detection of physical child abuse by child protective services workers in their investigations of reported child abuse cases. The CAP Inventory is appropriate for use as a preliminary screening tool when one is attempting to quickly screen a group of high-risk patients from a subgroup of individuals who are most likely to be at risk for physical child abuse. This is not an instrument appropriate for use in a family court ordered evaluation when there have been no allegations or history of physical child abuse.

MISUSE OF TEST INSTRUMENTS: FAILURE TO ACKNOWLEDGE RESEARCH BASED FINDINGS: MMPI-2 & MCMI-III

18. The MMPI-2 can be useful in describing a parent's capacity for attachment and bonding, potential for antisocial behavior, temper control, propensity for alienation of affection, and chemical abuse and dependence [11]. Various empirical studies report on the norms of custody litigants' MMPI-2 scores, based on archival data of numerous evaluators [12], norms regarding custody litigants' differences from other populations (i.e., the normative group, or personal injury litigants) [13], [14], custody litigants' defensiveness on the MMPI-2 [15], and the

statistical, but not clinical differences in custody litigants' validity profile scores ^[16]. Problematic, however, in the administration, scoring and interpretation of both the MMPI-2 and MCMI-III ^[17] -- both widely administered tests in family court ordered evaluations -- is that the following common mistakes may significantly impact the accuracy of scoring and/ or interpretation of these tests:

- (a) an over-reliance on computer-generated interpretive reports,
- (b) a lack of knowledge about the significance of base rate cut offs, and
- (c) errors in hand scoring
- 19. There is no way to assess, from Dr. Jacobson's report as written -- and she has resisted providing further information via discovery:
- (a) what scoring system was used (e.g., computer generated scoring? if so, which service? hand scoring? was there a check for errors?);
- (b) whether base rate cut offs (for the MCMI-III) derived from previous research were applied; or
- (c) whether there was any comparison of the MMPI-2 scores to research based norms.
- 20. In addition, little is known about the effects of the circumstances of litigation on score elevations (whether or not it can be determined from the MMPI-2 if a defensive approach overestimated mental health in a psychologically healthy population or concealed symptomatology in a psychologically disturbed person.) This limitation was not noted, or, apparently, considered by Dr. Jacobson.
- 21. For individuals administered the MCMI-III as part of a custody evaluation research has shown elevations on the Desirability, Histrionic, Narcissistic, and Compulsive scales and low scores on the Debasement scale [18] which raises the possibility that scale elevations on the latter three scales by custody litigants are artifacts of faking good rather than pathology. This limitation was not noted, or, apparently, considered by Dr. Jacobson in writing her report.
- 22. When asked in her deposition [February 6, 2011: Page 105 (17-25); Page 106 (1-5)] about possible bias in the scoring of the Millon (MCMI-III) test Dr. Jacobson answered in a global, arguably obfuscating, manner as follows:

Certainly. We know that there are three scales that tend to be higher for women than for men, and we make adjustments for those. In child/parental responsibility evaluations we also know that four scales are generally higher among child custody litigants to begin with, and that those scales reflect positive characteristics associated with parenting... so we would anticipate that those scales would be higher in general, and so you can't identify with normal clinical elevations whether the person's response reflects a personality style or it's reflecting good parenting characteristics. The only thing that we can tell you is whether or not the test is reliable and is answered in a socially desirable manner.

While the above vague statement alludes to differential responding (and therefore scoring) by custody litigants, there is no reference in Dr. Jacobson's

report to the research, or mention of whether or not either parents' scores were characteristic or not of custody litigants.

FAILURE TO CITE RELEVANT RESEARCH [19]

- 23. Assuming, arguendo, that Dr. Jacobson chose her tests carefully based on their applicability to issues before the Court, it remained incumbent upon her to consider whether research supported the underlying presumptions of the interpretative statements that she made, and to reference that research. [20] She did not do so.
- 24. In fact, research does not support many interpretative statements [21] Dr. Jacobson made in her report.
- 25. The significant areas of opinion that were presented, absent any reference to research, concerned (a) mother **[REDACTED]**'s having a personality disorder, (b) etiology and treatment of selective mutism, and (c) the presence of alienation.

FAILURE TO CITE RELEVANT RESEARCH MS. [REDACTED]'S "PERSONALITY DISORDER"

- 26. Dr. Jacobson informed the reader of her report about the need for the use of multiple measures and or observations in formulating an opinion as follows:
 - "...findings derived from the use of multiple measures and methods are more salient. Further, test findings that are consistent with other information, such as behavioral observations or collateral information, lead to more robust conclusions". [Page 14]
- 27. In describing [REDACTED]'s overall test findings, Dr. Jacobson reported:
 - "...no circumstances which would have invalidated the testing". [Page 14]
- 28. Dr. Jacobson further described Ms. [REDACTED], based on her presentation in the interview, as:
 - "...appears to be of above average intelligence. No overt signs of a major mental disorder were present".
- 29. Dr. Jacobson described both the MMPI-2 and the MCMI-III tests, and Ms. [REDACTED]'s results as follows:

"On a lengthy personality inventory, the MMPI-2, which is designed to identify both the presence of psychopathology, as well as personality traits, as noted above, Ms. [REDACTED] responded in an open and consistent manner. There was a slight tendency to put her best foot forward, but that is not unusual in parental responsibility evaluations.... There were no clinical elevations.....

"On the MCMI-III an inventory which identifies personality disorders, as well as major mental disorders, [REDACTED] responded in a socially desirable manner,

beyond what would be expected from individuals involved in family court litigation. As a result, no interpretation of the test is appropriate". [Pages 16-17]

30. Having thus declared Ms. [REDACTED] to be free of psychopathology, Dr. Jacobson then inconsistently summarized Ms. [REDACTED]'s test results (based primarily on Rorschach interpretations for which she has not identified a scoring system nor explained the meaning of differences between the various tests' interpretations) in the following terms:

"[Mrs. [REDACTED]'s] Psychological test results reveal a lack of insight into problems, psychological rigidity, shyness, worry, dependency, interpersonal sensitivity, and unpredictability. Her evaluation indicates that it is she who is likely to be overly emotional, have difficulty controlling her feelings, have limited ability to tolerate frustration, and to have poor impulse control". [Page 25]

31. Her unsupported conclusion was:

"I believe Ms. [REDACTED] to be personality disordered". [Page 25]

32. This conclusion, along with the use of a derogatory diagnostic label, diverts attention from the focus of the evaluation, which is the functional abilities of the parents [22]. But worse, the conclusion is not supported by Dr. Jacobson's own data [23], and is ultimately misleading (as well as arguably offensive). [24]

FAILURE TO CITE RELEVANT RESEARCH SELECTIVE MUTISM

33. Dr. Jacobson noted in her report that the child, [REDACTED], had been diagnosed with selective mutism by previous therapists, and that her symptoms met the diagnostic criteria as presented in the DSM-IV-TR. Nevertheless, in her report [Page 27] -- again, unsupported by research -- she offers the following explanation:

In my opinion, there is more here than a straight forward case of Selective Mutism. As noted below, there are significant psychological issues, as well as developmental issues, at play. It appears as though [REDACTED]'s unwillingness to talk may be related to both initial anxiety and developmental issues related to her parents' divorce/conflict, and beginning stages of estrangement towards Mr. [REDACTED] that is more related to an unhealthy alliance with Ms. [REDACTED] and/or beginning stages of alienating behaviors.

34. Dr. Jacobson concluded with a belief unsupported by any research [Page 34]:

"I believe the mutism is a symptom of the pressure she began to feel at an early age, and the loyalty bind she was placed in. She stopped talking beginning with those who were in Mr. [REDACTED]'s interpersonal world and then moved to him".

35. Subsequently questioned about her diagnostic acumen at a hearing Dr. Jacobson asserted [Jacobson Direct Testimony 2/8/2011 Page 87, Lines 17-21]:

"I am sufficiently trained in diagnosis of children's disorders to be able to identify the symptoms and understand the contributing factors and the genetic predisposition and things of that nature and I know what types of treatments are involved in it".

- 36. Research does not support Dr. Jacobson's stated beliefs about selective mutism. What research does tell us about the etiology of selective mutism is that it is a rare childhood disorder characterized by a lack of speech in one or more settings in which speaking is socially expected. A comprehensive and uniform theory about the etiology, assessment, and treatment of selective mutism does not exist. Historically, varying definitions and criteria have been applied to children with selective mutism, therefore making comparisons between research studies somewhat difficult [25]. Accumulating findings on the phenomenology of selective mutism point to a complex and multidetermined etiology.
- 37. What we also know from the research is that there does not appear to be a causal relationship between psychologically or physically traumatic experience and development of selective mutism. Children with selective mutism also display symptoms characteristic of either social phobia and or avoidant disorder of childhood [26], and selective mutism has also been associated with developmental disorder/delay nearly as frequently as with anxiety disorders [27]. However the setting (home, school, community) affects the rate of occurrence for mute and variant talking behaviors [28].

FAILURE TO CITE RELEVANT RESEARCH THE PRESENCE OF ALIENATION

38. Dr. Jacobson concluded in her report [Page 29] that [REDACTED]'s selective mutism is a function of "alienation":

"That [REDACTED] stopped talking is not in dispute. The question is whether or not it is the result of a true anxiety disorder, based on fears of a child who is enmeshed with a parent, and becomes overwhelmed when put in situations that require independent action, or it is a response to parental conflict/parental alienation".

39. When challenged at hearing [Jacobson Direct Testimony 2/8/2011 Page 87], Dr. Jacobson finally admitted, contrary to her report and her previous assertions, that no research supports the statements she had made about the child's problems:

"But there is no research I know of that indicates that kids with selective mutism then get alienated if their parents divorce. I don't know of any literature that connects selective mutism with alienation".

FOOTNOTES

[1] Fla. Stat. Section 61.122(1): Parenting plan recommendation; presumption of psychologist's good faith; prerequisite to parent's filing suit; award of fees, costs, reimbursement. ("A psychologist who has been appointed by the court to develop a parenting plan recommendation in a dissolution of marriage, a case of domestic violence, or a paternity matter involving the relationship of a child and a parent, including time-sharing of children, is presumed to be acting in good faith if the psychologist's recommendation has been reached under standards that a reasonable psychologist would use to develop a parenting plan recommendation.")

[2] F.A.C. Rule 64B19-18.007(2), Requirements for Forensic Psychological Evaluations of Minors for the Purpose of Addressing Custody, Residence or Visitation Disputes... (...(2) The minimum standard of performance in court-ordered child custody evaluation and family law proceedings includes, but is not limited to, the following: (a) The psychologist shall adhere to the "APA Guidelines for Child Custody Evaluations in Divorce Proceedings," effective July, 1994, and the "Specialty Guidelines for Forensic Psychologists," effective March 9, 1991. These guidelines are incorporated by reference...)

Guidelines for child custody evaluations in divorce proceedings. American Psychologist, Vol 49(7), Jul 1994, 677-680 (hereinafter cited as "APA")

[3] Dr. Jacobson stated: "Yes, I follow the APA guidelines for child custody evaluations. I also follow the model standards for child custody evaluations from the AFCC, the Association of Family And Conciliation Courts. [Deposition of Martha Jacobson, February 6, 2011, Page 32, Lines 13-16].

See Martindale, D. A., Martin, L., Austin, W. G., Gould-Saltman, D., Kuehnle, K., McColley, D., Siegel, J., Hunter, L., Stahl, P. M., Sheinvold, A., Kulak, D., Kirkpatrick, H. D., & Drozd, L. (2007). *Model Standards of Practice for Child Custody Evaluation. Family Court Review*, 45, 70-91. (hereinafter cited as "AFCC Guidelines")

- [4] F.A.C. 64B19-18.004 Use of Test Instruments. (...(2) A psychologist who uses test instruments in the psychologist's practice of psychology: (b) Must be able to justify the selection of any particular test instrument for the particular service user who takes the test at the instruction of the psychologist)
- [5] Practice Directorate, American Psychological Association Guidelines for Child Custody Evaluations in Divorce Proceedings , American Psychologist July 1994 Vol. 49, No. 7, 677-680
- "APA" (5. The psychologist gains specialized competence... B. The psychologist uses current knowledge of scientific and professional developments, consistent with accepted clinical and scientific standards, in selecting data collection methods and procedures. The Standards for Educational and Psychological Testing (APA, 1985) are adhered to in the use of psychological tests and other assessment tools.)
- [6] Martindale, D. A., Martin, L., Austin, W. G., Gould-Saltman, D., Kuehnle, K., McColley, D., Siegel, J., Hunter, L., Stahl, P. M., Sheinvold, A., Kulak, D., Kirkpatrick, H. D., & Drozd, L. (2007). *Model Standards of Practice for Child Custody Evaluation. Family Court Review*, 45, 70-91.
- "AFCC Guidelines" 5.6 USE OF RELIABLE AND VALID METHODS (Child custody evaluators shall use empirically-based methods and procedures of data collection. Because evaluators are expected to assist triers of fact, evaluators have a special responsibility to base their selection of assessment instruments and their choice of data gathering techniques on the reliability and validity of those instruments and techniques. Evaluators shall strive to use methods and procedures of data collection that are empirically-based.)
- [7] Id., AFCC Guidelines. 6.3 SELECTION OF ASSESSMENT INSTRUMENTS (When formal assessment instruments are employed, child custody evaluators shall be prepared to articulate the bases for selecting the specific instruments used. Evaluators shall be prepared to articulate the criteria utilized by them in selecting assessment instruments and shall be prepared to provide the bases for their selection of the instruments utilized in a particular case. Some assessment instruments, data-gathering techniques, and tests that are acceptable in health care settings may not meet the evidentiary demands associated with forensic work... Evaluators shall be mindful of issues pertaining to the applicability of psychometric test data to the matters before the court and shall be familiar with published normative data applicable to custody litigants. Evaluators shall

- carefully examine the available written documentation on the reliability and validity of assessment instruments, data gathering techniques, and tests under consideration for use in an evaluation.)
- [8] Id., AFCC Guidelines. 6.4 PROPER USE OF ASSESSMENT INSTRUMENTS (Formal assessment instruments shall be used for the purpose for which they have been validated and the testing shall be conducted according to the instructions. (b) Evaluators shall not use instruments for purposes other than those for which they have been previously validated.)
- [9] http://downloads.mhs.com/pds/pds-brochure.pdf
- [10] McEwan, T. E., Davis, M. R., MacKenzie, R., & Mullen, P. E. (2009). *The effects of social desirability response bias on STAXI-2 profiles in a clinical forensic sample*. British Journal of Clinical Psychology, 48(4), 431-436.
- [11] Caldwell, A. B., Jr. (2005). *How Can the MMPI-2 Help Child Custody Examiners?* Journal of Child Custody: Research, Issues, and Practices, 2(1-2), 83-117.
- [12] Bathurst, K., Gottfried, A. W., & Gottfried, A. E. (1997). *Normative data for the MMPI-2 in child custody litigation*. Psychological Assessment, 9(3), 205-211.
- [13] Siegel, J. C. (1996). *Traditional MMPI-2 validity indicators and initial presentation in custody evaluations*. American Journal of Forensic Psychology, 14(3), 55-63.
- [14] Posthuma, A. B., & Harper, J. F. (1998). *Comparison of MMPI—2 responses of child custody and personal injury litigants*. Professional Psychology: Research and Practice, 29(5), 437-443.
- [15] Bagby, R. M., Nicholson, R. A., Buis, T., Radovanovic, H., & Fidler, B. J. (1999). *Defensive responding on the MMPI-2 in family custody and access evaluations*. Psychological Assessment, 11(1), 24-28.
- [16] Medoff, D. (1999). MMPI-2 validity scales in child custody evaluations: Clinical versus statistical significance. Behavioral Sciences & the Law, 17(4), 409-411.
- [17] Bow, J. N., Flens, J. R., Gould, J. W., & Greenhut, D. (2006). *An analysis of administration, scoring, and interpretation of the MMPI-2 and MCMI-II/III in child custody evaluations*. Journal of Child Custody: Research, Issues, and Practices, 2(4), 1-22.
- Bow, J. N., Flens, J. R., & Gould, J. W. (2010). MMPI-2 and MCMI-III in forensic evaluations: A survey of psychologists. Journal of Forensic Psychology Practice, 10(1), 37-52.
- [18] Halon, R. L. (2001). *The Millon Clinical Multiaxal Inventory-III: The normal quartet in child custody cases.* American Journal of Forensic Psychology, 19(1), 57-75.
- Lenny, P., & Dear, G. E. (2009). Faking good on the MCMI-III: Implications for child custody evaluations. Journal of Personality Assessment, 91(6), 553-559.
- McCann, J. T., Flens, J. R., Campagna, V., Collman, P., Lazzaro, T., & Connor, E. (2001). *The MCMI-III in child custody evaluations: A normative study*. Journal of Forensic Psychology Practice, 1(2), 27-44.
- [19] Supra, AFCC Guidelines. 4.6 PRESENTATION OF FINDINGS AND OPINIONS (Child custody evaluators shall strive to be accurate, objective, fair and independent in their work and are strongly encouraged to utilize peer reviewed published research in their reports... (b) Evaluators are strongly encouraged to utilize and make reference to pertinent peer-reviewed published research in the preparation of their reports. Where peer-reviewed published research has been alluded to, evaluators shall provide full and accurate references to the cited research.)

- [20] F.A.C. 64B19-18.004(2) Use of Test Instruments. (A psychologist who uses test instruments in the psychologist's practice of psychology: (a) Must consider whether research supports the underlying presumptions which govern the interpretive statements which would be made by the test instrument as a result of its completion by any service user)
- [21] APA 12. The psychologist neither over interprets nor inappropriately interprets clinical or assessment data. The psychologist refrains from drawing conclusions not adequately supported by the data. The psychologist interprets any data from interviews or tests, as well as any questions of data reliability and validity, cautiously and conservatively, seeking convergent validity. The psychologist strives to acknowledge to the court any limitations in methods or data used.
- [22] Supra, AFCC Guidelines. 4.6 PRESENTATION OF FINDINGS AND OPINIONS (...(c) Evaluators recognize that the use of diagnostic labels can divert attention from the focus of the evaluation (namely, the functional abilities of the litigants whose disputes are before the court) and that such labels are often more prejudicial than probative. For these reasons, evaluators shall give careful consideration to the inclusion of diagnostic labels in their reports. In evaluating a litigant, where significant deficiencies are noted, evaluators shall specify the manner in which the noted deficiencies bear upon the issues before the court.)
- [23] APA 12, supra, note 21.
- [24] Supra, AFCC Guidelines. 4.6 PRESENTATION OF FINDINGS AND OPINIONS (...(a) Evaluators shall not present data in a manner that might mislead the triers of fact or others likely to rely upon the information and/or data reported. In their reports and when offering testimony, evaluators shall strive to be accurate, objective, fair, and independent.)
- [25] Viana, A. G., Beidel, D. C., & Rabian, B. (2009). Selective mutism: A review and integration of the last 15 years. Clinical Psychology Review, 29(1), 57-67.
- [26] Black, B., & Uhde, T. W. (1995). Psychiatric characteristics of children with selective mutism: A pilot study. Journal of the American Academy of Child & Adolescent Psychiatry, 34(7), 847-856.
- [27] Kristensen, Hanne (2000). Selective mutism and comorbidity with developmental disorder/delay, anxiety disorder, and elimination disorder. Journal of the American Academy of Child & Adolescent Psychiatry, Vol 39(2), Feb 2000, 249-256.
- [28] Ford, M. A., Sladeczek, I. E., Carlson, J., & Kratochwill, T. R. (1998). Selective mutism: Phenomenological characteristics. School Psychology Quarterly, 13(3), 192-227

I, Jerome H. Poliacoff, Ph.D., hereby certify that I personally conducted this evaluation review and prepared this report; all conclusions reflected are mine, and not those of any third party; and that the preparation of this evaluation review was performed consistent with Chapter 490, Florida Statutes as well as in compliance with the rules and regulations promulgated pursuant thereto. The endnotes are included in this Affidavit. FURTHER AFFIANT SAYETH NAUGHT.

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Sworn to and subscribed before me, this 6th day of September, 2011, by Jerome H. Poliacoff, Ph.D., who provided his Florida driver's license as identification, and who is personally known to me.

GARY J. FROHMAN

Comm# DD0752387 Expires 1/27/2012 Florida Notary Assn., Inc.

Notary Public, State of Florid My Commission Expires: