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November 3, 2012

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RE: BEHM, ANGELA V. BRETT

Case Number: 09-754966

Hon. Mary Ellen Brennan, Oakland County Circuit Court, Family Division

Dear Ms. Sirich and Mr. Hamlyn:

Per an Order signed by Judge Mary Ellen Brennan on August 1, 2012, I have performed a psychological evaluation of Mr. Brett Behm.

I have met with Mr. Behm, and I have performed an in-depth psychological evaluation of him, an evaluation which included interviews, psychological testing, and review of records. Psychological testing included the Minnesota Multiphasic Personality Inventory- Second Edition (MMPI-2), the Rorschach Performance Assessment System (R-PAS), and the Personality Assessment Inventory (PAI).

Prior to meeting with Mr. Behm, I have reviewed the court file (provided by the two attorneys) in order to familiarize myself with the issues in this case.

SOURCES OF INFORMATION

The sources of clinical and historical data for this evaluation were as follows:

1. Meetings with Brett Behm:

Interviews:	8/13/12, 8/20/12, 8/27/12	4.5 hours
Psychological Testing:	8/20/12, 8/27/12	3.25 hours

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Interviews with Mr. Behm included a mental status exam, a developmental and family history, an educational, health and relationship history.

Mr. Behm completed the following psychological tests:

Minnesota Multiphasic Personality Inventory- Second Edition: The MMPI-2 is the personality test most widely researched and used by psychologists, and also the most widely used test in the context of forensic psychological evaluations. The MMPI-2 is a self-report inventory consisting of 567 True-False items, and is an update to the original MMPI test. It includes validity scales, and clinical scales which assess dimensions of adult behavior, personality and symptomatic characteristics. MMPI-2 scales and profiles have widely researched correlates in people's symptoms and personality characteristics.

Personality Assessment Inventory: The PAI is a self-report inventory consisting of 344 statements, which are rated on a four point scale (from False to Very True) and which assesses a variety of clinical problems, syndromes, and personality characteristics. Like the MMPI-2, it consists of validity and clinical scales. The clinical scales of the PAI correspond more closely to the DSM-IV TR, the Diagnostic and Statistical Manual of Mental Disorders, the diagnostic system used by all U.S. mental health professionals. The PAI has been extensively validated and accepted by psychologists as a personality assessment procedure and a forensic psychological assessment instrument.

Rorschach Performance Assessment System: The Rorschach is also one of the most widely used and researched psychological tests. A revised Rorschach administration, scoring and interpretive system, the Rorschach Performance Assessment System (R-PAS) provides standardized administration, reliable scoring, a solid empirical foundation for interpreting scores in terms of normative samples, research-based clinical correlates, and clusters of scores associated with clinical criterion groups. The R-PAS has an advantage over the MMPI-2 of not being a self-report inventory, so that it is not nearly so vulnerable to defensive, "fake-good," or "fake-bad" tendencies which are understandably common in forensic evaluations.

2. History Questionnaire, completed by Brett Behm.

3. Records Review:

- **Medical Records:**

- The Bridge

- **Letters:**

- A.J. Kitchen, L.M.S.W. to Family Counselor Katherine Stahl, 8/21/10, 11/16/10.

- **Email Correspondence**

- Copies of emails to Brett Behm from Michael and Delores Forge
 - Copies of emails to Angela Forge from Brett Behm, with a few emails from Angela Forge to Brett Behm

- **Court Documents:**

- Consent Judgment of Divorce; signed 9/21/2009 by Hon. Mary Ellen Brennan.
 - Plaintiff's Motion to Change Parenting Time Order, 3/23/10
 - Order re: Plaintiff's Motion to Change Parenting Time Order; signed 5/13/10 by Hon. Mary Ellen Brennan.
 - Ex-Parte Order Suspending Parenting Time; signed 11/5/10 by Hon. Mary Ellen Brennan.

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- Opinion and Order, signed 11/9/10 by Hon. Mary Ellen Brennan
- Order Re Defendant's Motion For Parenting Time; signed 8/1/12 by Hon. Mary Ellen Brennan.
- Defendant's Motion to Reinstate Parenting Time and For Family Counseling; 7/11/12.
- Plaintiff's Answer to Defendant's Motion to Reinstate Parenting Time and for Family Counseling

- **Miscellaneous:**

- Personality Disordered Abusers in Family Law Courts (from a website, apparently Angellmedia.com, provided by Mr. Behm, with the note "Doesn't apply to me 100% but I agree with some of the points").

Informed Consent

At the first appointment Mr. Behm was informed that his communications with me were neither confidential nor privileged; we were meeting for a court-ordered evaluation and not for treatment, and as a result no doctor-patient relationship would be established. I also explained that my records could be reviewed by either attorney. With this knowledge, Mr. Behm agreed to cooperate with this evaluation.

PSYCHOLOGICAL ASSESSMENT OF BRETT BEHM**Mental Status**

Mr. Behm, a well-groomed Caucasian male dressed in casual clothing for our appointments, arrived on time for all meetings, was appropriately oriented, pleasant and cheerful. His appearance was consistent with his stated age of 52 years, and he appeared to be healthy and fit.

Mr. Behm was rather tense at first, displaying appropriate anxiety at being evaluated. Overall, his mood was pleasant and cheerful, and his mood did not vary from this state throughout our interactions. My sense is that he was anxious and wanted to make a good impression. He sat quite erectly. Eye contact was good. Rapport was easily achieved with him.

Mr. Behm was congenial and engaging, polite and socially assured. He showed a sense of irony and humor where appropriate. His speech was normal in volume, pace and tone, spontaneous, and suggesting higher than average intelligence and educational achievement. His verbalizations and thought processes were coherent, logical and goal directed, as well as relevant to the questions being asked of him. His expressive and receptive language appeared above-average. There were no indications of derailment or other manifestations of impaired reasoning. There were no admissions or other indications of hallucinations, delusions, suicidal or homicidal ideation. His ex-wife, he said, claimed that "everything out of my mouth is strange...;" he believes he is logical, but does not take offense if someone says differently.

During a formal mental status examination, Mr. Behm displayed normal cognitive functioning in the following domains: 1) Orientation; 2) Concentration (assessed by a serial sevens task); 3) Attention and Working Memory (assessed by digits forwards and backwards tasks); 4) Short and Long Term Memory; and 5) Abstract Verbal

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Reasoning (assessed by proverbs and similarities tasks). He appears to be limited in insight into his own contribution to his problems and into the impact of his behavior on others.

Mr. Behm was responsive to questions, never evasive. He non-defensively described past episodes of treatment (with Chris Howlett, MD, psychiatrist, and at The Bridge, a residential treatment center) and released these treaters to communicate with me. He told me that he saw Dr. Howlett during the divorce, finishing his treatment in September, 2009. He took Xanax for anxiety. He also tried antidepressants (Paxil and Wellbutrin), he said, but did not experience any positive effects. Also, he said, both he and Dr. Howlett felt that his depression and anxiety were situational, not reflecting any deep-seated problems. They terminated his treatment by mutual agreement.

Towards the end of this treatment Mr. Behm signed himself into The Bridge treatment center in Utah, where he stayed for approximately three weeks. It was a voluntary admission. He told them he felt depressed. People, he said, went there for a variety of reasons, and most were, in his opinion, relatively well-functioning. There were a lot of activities such as hiking, massage, personal training, and the diet was almost devoid of fat. There was a focus on healthy living. It was a good change of scenery from nine months of stressful living in Michigan.

He reported that his counselors felt that his condition was similar to PTSD: he was very anxious in response to the stress of his divorce. He had not been prepared for the divorce, the unwanted separation from his wife (whom he said cheated on him and threw this in his face), the loss of his home, the loss of mutual friends. Also, he reported, the children were withheld from him, he was treated as the enemy and attacked by his ex-wife, doors were slammed in his face and he was subjected, he said, to taunting and non-stop profanity and anger. This included, he said, rages with his wife beating on his chest, saying "I hate you. I despise you." All their wedding pictures were smashed. His wife would stay out all night and yet she seemed to blame him, accusing him of not loving her. Angela refused marital counseling, saying there was nothing wrong with her.

Mr. Behm reported significant problems with anxiety during the divorce. He had problems sleeping, was anxious a great deal, and his work was suffering. He reported his mind racing, thinking about being hated by his wife. No matter what he tried, he could not fix their problems. He was obsessing about the divorce. He felt depressed during this time period; never before, or since, but never felt suicidal nor made any threats or gestures. He was pushed really hard to get angry during the divorce, and engaged in mutual yelling arguments with his ex-wife, but he has never lost control. He has never hit anyone.

What really turned his life around after the divorce, Mr. Behm reported, was religion. He had fallen out of religious practice during his marriage, but a friend suggested he go to church. The message at church on Easter after his divorce seemed tailored to his situation, and he decided to give religion another try. He started going every other week with his children, and has since become even more

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involved, leading a group of 8th graders at Kensington Church and otherwise involved with this very welcoming worship organization.

Presenting Problem

Mr. Behm indicated that he had made some poor choices, most significantly, he said his "horrible" decision to stop seeing his children. He felt at the time that he was "walking on eggshells" with his ex-wife, her lawyer, and the Judge. Everyone identified him as the problem. His ex-wife had raged against him for months during the divorce, he stated. She had threatened suicide, then denied that this threat had occurred. His ex-wife's lawyer called him every name in the book. A.J. Kitchen, the family therapist, saw him as the root of the problems, and seemed, in his opinion, blind to his ex's mental health difficulties. He felt at the time that it was only a matter of time before his ex-wife accused him of sexually abusing their children. He felt overwhelmed (helpless and hopeless).

Mr. Behm retains a belief that his ex-wife suffers from a significant psychological disorder. He reports receiving an email from her brother, suggesting that he look up "borderline personality disorder." His online research into that diagnosis fit, he said, with Mrs. Behm's (alleged) unstable relationships and moods, two suicide threats, etc..

After his ex-wife attempted to cut his parenting time, Referee Blanchard sent the family to A.J. Kitchen at Impact Counseling.

In an August 2011 letter to the Friend of the Court Family Counselor, Ms. Kitchen noted that sessions with the two parents were extremely unproductive, due to demeaning and verbally offensive comments about his ex-wife made by Mr. Behm. In a session with his daughter, Riley, the child asked her father not to fight with mom and said that he made her feel bad if she spoke with mom while she was with him. Ms. Kitchen recommended a treatment program for high-conflict divorce couples, as well as treatment for Mr. Behm to deal with his feelings of "betrayal, hurt, grief and loss over the divorce."

Mr. Behm believes that his ex- did not want the counseling to improve their co-parenting, but simply wanted to accuse him of wrong-doing; some of her allegations were half-truths, some were fabrications. Ms. Kitchen noted that the children had been shielded from his disdain for his ex-, but felt that this shielding wouldn't last. He needed to constantly defend himself against Angela's allegations, which made him anxious, while Angela was cool and collected as she lied and distorted. He asked for one-on-one with A.J. Kitchen, which she refused.

He wrote a letter to Ms. Kitchen, which she refused to discuss with him. He provided me with a copy of this letter. In his letter, he reported, he said that the thought that family therapy wasn't working, and that there was no willingness to listen to his thoughts and feelings. He just wanted to pay the necessary child support and see his children; to be left alone and not repeatedly be hauled into court. He was going to communicate with the Friend of the Court and ask for Angela to be evaluated for

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Borderline Personality Disorder.

In his letter (a copy of which I reviewed) Mr. Behm noted that Ms. Kitchen insisted on counseling as a family, but he felt that this would not be useful. He told her that Angela's undiagnosed Borderline Personality Disorder was the reason why joint counseling could not work. Angela was "a total dirt bag...", a really nasty person. She had damaged their relationship to a point that he wanted to be totally separated from her. He wanted to limit their communication to email and texting. He detailed an alleged "95% correlation" between Angela's behavior and symptoms of BPD, things she had done to permanently damage their relationship, poor treatment of her mother and brother, and Brett's girlfriend. He noted that professionals and family members alike advised him to have no unnecessary contact with Angela, that his contact with her was causing him symptoms of Post-Traumatic Stress Disorder. He was fine with the kids continuing treatment, but he did not want to participate.

In his letter, he said, he asserted what he had found online, that Borderline Personality Disorder could be diagnosed through brain imaging. Excerpts from his letter became the source of a letter from Ms. Kitchen to the court.

Ms. Kitchen, he reported, did not even give Brett an opportunity to explain his feelings. When he asked for her response, she said "I think you know my answer... I wish you luck... Goodbye."

He presented a petition to the court for an evaluation of Angela. He was met with skepticism by Referee Blanchard and criticism by Judge Brennan ("I can see you are very controlling"). He was not represented by an attorney, and spoke out of turn when an untrue statement was made. He was found in contempt, refused to pay the fine, and spent two hours in jail before Lisa, the woman he was dating, bailed him out. The Judge said he was becoming violent, that she would have him cuffed and taken out. He denied that he was violent or even raised his voice.

That evening he told his children about having to go to jail. He also played the children a snippet of their mother, which he had recorded. It was a "rant" about Lisa. Asked why he had done this, he said that he was angry, and that he wanted the children to see a side of their mother that he had to deal with. His daughter asked him if this was something he thought they should be listening to. Both children said they didn't want to hear it. Contrary to A.J. Kitchen's letter, he said, the children did not cry and he did not say that their mother was evil. A day or two later his parenting time was suspended. A psychological evaluation was ordered, and his parenting time was to be supervised through Impact, with a parenting time coordinator.

He thought about this state of affairs. In one side of his life, people liked and respected him. On the other side, all he heard was how horrible he was. Did the kids really say false things about him? Did the therapist embellish what they said? Did his ex- somehow put the kids up to making false allegations about his behavior. If she was capable of this, he thought it was just a matter of time before it would be alleged that he was sexually molesting his daughter. He feels that there was no limit to Angela's ability to fabricate stories.

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He took a horrible choice to give up. He didn't want supervised visits. All he ever heard was that he was the problem. The Judge, his ex-wife, her lawyer seemed to hate him. His time with the children had been good. Usually he could hold back his feelings about Angela, although this time he did not. He was walking on eggshells. He missed the kids, but he didn't miss the fighting with Angela, being called violent and vile. He believed that eventually he would be reunited with his children; if Angela was as unstable as he thought, he would be reunited with them.

His ex-wife said that she made repeated attempts to contact him. This was not true. He ran into her and was flipped off. He did not believe that his cards ever reached his children.

Brett Behm stated that he wanted to reestablish visitation with his children. He had given up on any good relationship with them, given their mother's attitude and her ability, in his view, to manipulate everyone against him. Now he saw this as a horrible mistake.

Mr. Behm said he hoped that I would say that he had made some valid points, that he had been the victim of attacks, that both he and the children would benefit from being reunited, that maybe the allegations against him had been made up. He feels that the folks at court must think he is an angry and bitter man.

On the other hand, he said "I would never believe anyone who says that I did nothing, that it was just other people..." who caused these problems. "Maybe they were right about me..." He was in so much emotional pain at the time of the divorce and for a time afterward.

Personal History

Mr. Behm indicated that he is currently a Team Leader at Compuware, managing software developers. He has worked for this employer since 1995. He has worked in the software development field since 1986.

Mr. Behm has never been arrested (other than at the court). He has never had a DUI. He has no physical illnesses or conditions; although his cholesterol is high, he takes no medications.

He grew up in Birmingham. His parents, although they showed each other little affection, were loving and supportive of Brett. They were proud and encouraging of him. He was self-motivated, to get good grades in school and to compete in sports, and received praise from his parents. He was rarely reprimanded or yelled at.

His dad, he reports, was gentle and kind but reserved, probably a bit on the shy side. His mom was a lot more outgoing. She signed Brett up for football, baseball, judo, camps. She took him to parks and activities, organized his early life. His parents divorced when he was 29. There had been some verbal arguments and occasional shouting, but nothing abusive or otherwise extreme; most arguments stemmed from his dad feeling that his mom was over-spending.

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He reported a great relationship with his mom. She always smiled and tried to do the right thing. He never questioned her love "I know I am her favorite person on the planet, sometimes to an embarrassment." His mom was always proud of him. Their relationship remained good in adolescence. She worked at his high school, in career counseling. After the divorce, he became the man of the house, and had to help mom with her condo and such. In 2002 she was diagnosed with Alzheimer's disease, and he manages her affairs; she is now in hospice.

He was closer to his mom than to his dad when he was young, but his dad was involved, coming to all of his sporting events. Dad never really disciplined him; that was his mom's role. Dad was an office manager. He was a reserved, quiet man who became somewhat of a loner after the divorce.

Brett Behm reports that he was a good child who never got into trouble. He had an award for never missing a day of school from Kindergarten through high school. As an only child, he valued his friends a lot in junior high and high school. He worked as a teen, swam and played football. He was in the band at Seaholm High School.

Medical History

From January to November 2009, Brett Behm was treated by Chris Howlett, M.D. He was prescribed, he reports, Xanax, Paxil and Wellbutrin, but never took either Paxil or Wellbutrin long enough to derive any benefit. He entered treatment in response to the divorce. His primary complaint was anxiety, and situational stress. There was no previous history of being troubled emotionally. He and Dr. Howlett both felt that he had made progress and the situation was stabilized.

Mr. Behm noted that he was very anxious when he started treatment. He was not sleeping well, his work was suffering. As noted above, he reported that he was experiencing near constant provocation and angry behavior from his wife, who constantly told him that she hated him.

I spoke with Dr. Howlett, who reported that his patient had experienced difficulties coping with the divorce. Dr. Howlett diagnosed an Adjustment Disorder, which is defined (in DSM-IV TR) as the development of significant emotional or behavioral symptoms within three months of an identifiable stressor (in this case an anticipated divorce). Brett Behm displayed symptoms of anxiety and depression. His symptoms did not respond to psychotherapy or medication, but did respond to a brief residential treatment. When he last saw Mr. Behm, after his stay at The Bridge, Dr. Howlett assessed him as much improved.

Asked about Mr. Behm's anger, Dr. Howlett noted that there was some anger in response to the divorce, but that his patient was never "over the top." Brett felt that his wife created most of the conflict, and was frustrated, but there was no reason to believe that he would lose control of his anger or get into conflicts with authorities. Mr. Behm was an engineer, somewhat detached from his emotions. There were few childhood issues. His parents were affectionate to Brett, but not to each other. He had loved college, done well in his life. There was no evidence of any personality

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disorder, according to Dr. Howlett.

Records from The Bridge indicated that Mr. Behm was still dealing with the stress of an unwanted divorce. He had realized that he could continue to raise his children, be happy and productive. This divorce was almost as stressful as the death of his father in 2003, for which he was also unprepared. At the time of the divorce, his mother had also been diagnosed with Alzheimer's, and no longer recognized him, which had also been troublesome.

Psychological Testing

As mentioned above, Mr. Behm took three psychological tests: the Minnesota Multiphasic Personality Inventory- Second Edition (MMPI-2), the Personality Assessment Inventory (PAI), and the Rorschach Performance Assessment System (R-PAS).

His response to the MMPI-2 was consistent, but reflected both defensiveness and an effort to create a positive impression (scales L and K, T=70). This is a common pattern among persons undergoing forensic evaluation, but it suggests that Mr. Behm's MMPI-2 protocol is likely to underestimate any problems exhibited by this individual.

These scores may also suggest some personality features, including some naïveté or rigidity in moral outlook, lack of insight into one's personality or difficulties, or into how they are perceived by others. On the other hand, Mr. Behm appears to possess significant coping ability and his level of day-to-day adjustment is likely to be consistent with his favorable self-report on the MMPI-2.

None of the clinical, restructured, content, PSY-5 or supplementary scales of the MMPI-2 were significantly elevated.

Above average, but not elevated to a clinically significant degree was Scale 6 (T=61, 86th percentile). This degree of elevation suggests a sensitive, tense, emotional individual who is high strung and prone to worry. He is likely highly attuned to the perceptions of others. He is likely to deny any feelings of hostility or mistrust, even when these are present. Such persons want to trust people, but are hypersensitive to perceived hurts.

Mr. Behm is likely to be confident in social situations. He is likely to pride himself on forming his own opinions, claiming independence from the opinions of other people.

There are no indications of any thought disorder, depression, mania, substance abuse or proneness to substance abuse, aggressiveness, antisocial attitudes or practices. Mr. Behm identifies strongly with a traditional masculine role identity.

Validity scales from the PAI were less elevated than those for the MMPI-2, but were similarly indicative of positive impression management (Scale PIM, T=59). This is, in my opinion more likely to be unconscious self-deception rather than a conscious

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effort to deceive. Mr. Behm was consistent in his responses to the items of this assessment instrument, but his scores suggest that Mr. Behm views himself as relatively free of common shortcomings to which most individuals will admit. Interpretations from this test, like the MMPI-2, should be viewed with caution, as they are likely to underestimate difficulties.

This is a normal PAI profile. Mr. Behm does not report any symptoms of psychiatric disorder. Scores for symptoms of depression, anxiety (cognitive, affective, obsessional, phobic), mania (hyperactivity, grandiosity, irritability), paranoia (hyper-vigilance, ideas of persecution, resentment), schizophrenic symptoms, antisocial characteristics, aggression (verbal or physical), suicidality, alcohol or drug problems, and borderline personality characteristics were all in the average (i.e., the non-clinical) range or below average.

Mr. Behm is likely to be average in warmth and more on the dominant than the submissive side of relationships. He is likely to be self-assured, confident, and have a leader-like demeanor. His score on the Dominance scale of the PAI is not sufficiently elevated to suggest a domineering or over-controlling manner as opposed to a dominant, assertive personality style.

The Rorschach Test (R-PAS) is useful in establishing the following conclusions, which are not vulnerable to the impact (in the MMPI-2 or PAI) of defensiveness or impression management:

There is no indication of any thought disorder. Mr. Behm's reasoning is highly logical, likely to be comprehensible to others.

Mr. Behm is unlikely to seriously distort information which is presented to him, but is likely to be rather unconventional (individualistic) in his interpretations. That is, other people are likely to be able to understand how he interprets situations, but his interpretations are likely to be more personalized, reflecting a unique perspective, rather than conventional. He chooses to be independent in his thinking. He is less oriented to viewing things conventionally, seems to strongly need to be self-determined in his views.

Mr. Behm is highly motivated to be independent, creative, and self-assertive, to such an extent that under circumstances of perceived unreasonable control he can be oppositional, doing the exact opposite of what is expected of him. He is likely to be a person who is sensitive to the feeling that he is being coerced, controlled, or dominated. Such a feeling is likely to be highly offensive to him.

Mr. Behm is also not comfortable with feeling needy or dependent; in fact, he is unlikely to consciously experience such emotions. He also is unlikely to find aggressive or angry feelings acceptable. His oppositionality is likely to be experienced by him as rational rather than angry.

Mr. Behm often attempts to resolve emotional problems by avoiding thinking or feeling about them; he tries to keep his emotions at low intensity by not paying

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attention to them. This avoidance serves to insulate him from mild or moderate stress, but makes him vulnerable to feeling overwhelmed when strong feelings can not be avoided. He is likely to have under-developed skills for regulating strong emotions. Anxiety, disruptive thoughts, and negative thoughts are more likely when under stress, and he is likely to respond to stresses with disrupted concentration, states of emotional distress, or poor decision-making.

CASE FORMULATION

The most significant question for this psychological evaluation is whether Brett Behm suffers from any psychiatric condition or personality disorder which would place his children at risk from future contact with him. Corollaries to this question include: 1) whether Mr. Behm needs psychological treatment; 2) the likelihood that his anger at his ex-wife can be managed so as not to raise any further risk for his children; and 3) an explanation for his mistakes and errors in judgment in relation to his family and the court.

Mr. Behm appears to suffer from no psychiatric condition (DSM-IV symptom disorder) nor personality disorder which should have any significant negative impact on his interacting with his children. There is no indication of a condition for which individual psychotherapy is necessary or would be helpful. Symptoms of anxiety and depression which were stimulated by the divorce have resolved. There is lingering resentment, but I see no significant current risk of his losing control of his emotions except under extreme conditions.

His capacity for coping with everyday stresses is generally at least adequate, but Mr. Behm is a high-strung, sensitive individual, probably most vulnerable when his adequacy or value as a person is threatened. As noted above, he is (by history and personality) vulnerable to anxiety when under substantial stress. In the course of a reunion with his children, he will likely be stressed by their disappointment and anger with him, and by even indirect interactions with his ex-wife.

A therapeutic environment in which Mr. Behm first meets with his children under the supervision of a family therapist is advisable. Mr. Behm is going to need to explain his absence, and other behavior, to his children, and will need the support of a strong and experienced family therapist. This therapist should also help Mr. Behm to manage his anger at his ex-wife and with the indignity of being made to reassure the Court in order to see his children. Since I have not evaluated the children, I can not comment on the probable course of parenting time once the initial step of therapeutic supervision has been initiated. There are a number of obvious options: 1) use of a parenting coordinator or GAL to assess progress and make recommendations; 2) periodic check-ins with the Court to assess proposed expansions in parenting time; or 3) a trial of unsupervised parenting time (after a period of therapeutic visitation) with check-ins with the family therapist, who informs the court of progress.

As noted above, Mr. Behm lacks deep insight into his behavior. He knows that he

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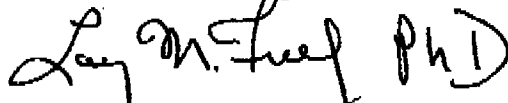
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has erred, especially in not taking action to see his children sooner. He is less clear about his poor judgment in playing the recording of their mother to his children, or with any other mistakes he made as a parent. Nor does he really understand his errors in judgment in dealing with court-appointed family therapist (Ms. Kitchen) and the Court. My sense is that he felt trapped and coerced in those contexts, and as I have said, he is very sensitive to those feelings.

I recommend very limited interaction between Mr. Behm and his ex-wife. She is likely to be perceived by him in a very negative fashion (as provocative, insulting, disturbed, etc.), whatever her behavior or intent. As I have never met Mrs. Behm, I can not comment on Mrs. Behm's behavior or personality, only on her ex-husband's very negative perceptions of her. The family therapist might try again to initiate co-parenting visits, if that seems advisable.

This report is respectfully submitted by,



Larry M. Friedberg Ph.D.