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Preliminary Psychological Report:

Name: Dobson, Charlene Marie
Age: 6 years, 11 months
DOB: January 25, 1993

In late September, 1999, Mrs. Arlene Lowery approached me to perform a psychological assessment on her grand-daughter, Charlene (the above named child) and in this regard, I have:

- reviewed the medical records of the child
- reviewed the affidavit of Charlene Thurbride (Social Worker at the Department of Social Services)
- viewed four or five video tapes of interviews conducted by the Regina City Police with Charlene and her mother, Melinda Dobson
- reviewed the preliminary report by Dr. Clay (University of Saskatchewan, Saskatoon, Saskatchewan)
- reviewed the affidavit by Mrs. Arlene Lowery and her husband, Charles Lowery
- travelled to Saskatoon with Mrs. Lowery and Charlene, and spent October 7 and 8 interviewing Charlene with Dr. Clay

In late March of 1997, Charlene and her young brother Johnathan, came to live with Mrs. Lowery and in May of that year, Mr. and Mrs. Lowery were given interim custody of these two children. Mrs. Lowery reports that Charlene was very upset when she came to live with them; she exhibited a good deal of regressive behavior (she wet her bed, her pants, she would sleep on the floor, walk around at night "sort of" sleep-walking, displayed various sexual behaviors with her brother, was at times quite withdrawn, frequently hide in various places around the house, had regular nightmares, spoke of sexual abuse and apparent occult happenings that took place at one of her mother's friends. At times she became very detached and withdrawn, rolling her head from side-to-side and sliding out of a sitting position in a chair onto the floor. Her eyes would be rolled-back at that time and she was quite uncommunicative. On numerous occasions, she would tie-up her dolls with string or laces, tie their legs together or their arms back and would say to the doll "There now you can't get away."

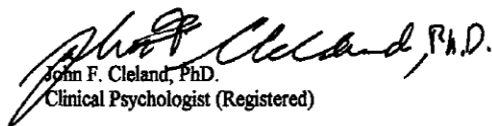
During the interview in Dr. Clay's office in Saskatoon, I observed a number of unusual behaviors. While initially Charlene responded to Dr. Clay's comments and drew several pictures and discussed them with him, when he tried to pursue some pictures she had drawn where it appeared that she was tied-up and Dr. Clay was asking her "what happened?". She eventually covered her head, said several times "I can't talk - I can't talk (about what happened)!" gradually covering up her head with her sweater and slid out of the chair and ended up on the floor, finally got behind the chair with both her jacket and her sweater covering herself almost completely but always her head. Prior to this, I also noted that when there was some noise outside of Dr. Clay's office, Charlene appeared startled on two occasions. I also noted that while he questioned her about the doll being tied-up, Charlene again said that she couldn't talk about it but at that time she was tying the retaining strings of the cushion she was sitting on around her ankles (which appeared to be a behavioral response to Dr. Clay's questioning).

Also while being questioned by Dr. Clay, Charlene began to roll her head from side-to-side, her eyes seemed to be turned back and this behavior continued for 5 - 10 minutes and she was uncommunicative and seemed totally withdrawn and unresponsive to anything said to her or even the urgings by her grandmother.

These various negative, dissociative, and/or periods of detachment occurred several times during the interviews with Dr. Clay and myself. Also, this occurred when we went out for supper that evening for about 10 or 15 minutes, Charlene was completely negative and detached. Mrs. Lowery tells me that this happened much more frequently when she first came to live with the Lowerys and is not nearly as extensive or severe at the present time. The residual behavior and the acting-out with the dolls is still in her present behavior. Mrs. Lowery reports that she has to lay down with Charlene every night until she falls asleep and if she leaves too early, Charlene wakes up and has great difficulty getting back to sleep.

The periods of disorganized or agitated behavior, the repetitive play with the dolls i.e. the tying them up, the nightmares, the having to have someone sleep with her and periods when she says she has a bad feeling which could well be some sort of dissociative flash-back and the general regressive behavior leave little doubt that Charlene has been exposed, perhaps repeatedly, to severe traumatic events.

She exhibits symptomatology of Acute Stress Disorder (308.3) and also symptoms of Post-Traumatic Stress Disorder (309.81). In as much as this has lasted over a more than a 2 year period, the Post-Traumatic Stress Disorder is the most probable diagnosis.


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Note:

It is my strong opinion that both Drs. Clay and Mathews who also examined Charlene should have access to the video material held by the police particularly the interview with her mother in 1997. It is quite evident to myself that no one with the severe problems with addiction (both alcohol and drugs) and a condition of multiple personalities can be in any way significantly improved in a two year period.

All of the major clinicians and experts on child development and rehabilitation from Anna Freud, Rene Spitz, John Bolby to those contemporary authorities such as Margaret Malher, Gertrude Blanck and Sydney Greenspan and others consistently emphasize that placement and access decisions should regard the child's need for 'continuity of relations' of primary importance. It is my considered opinion that any significant changes such as visitation might well seriously disturb the 'continuity of relations' and jeopardize the gradual recovery of this child, Charlene Dobson. The "best interest" of both the children (Charlene and Johnathan) would not be served by their mother being allowed access at the present time in the examiner's opinion.