



LEGAL AID QUEENSLAND

Page 1 of 7 Mrs Catherine Watter, DOB: 03/10/1972

A/Prof Satish Karunakaran
M.B.,B.S., D.P.M., F.R.A.N.Z.C.P.

Provider No: 2143748Y
Satish Consulting PTY LTD
ACN: 141 505 535
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Consultant Neuropsychiatrist

27/10/2012

Ms Joanne Meade

Family Lawyer

Legal Aid Queensland

3rd Floor, Northtown

280 Flinders St Mall

Townsville QLD 4810

Dear Ms Meade,

PSYCHIATRIC REPORT*Re: Mrs Catherine Lee Watter, DOB: 03/10/1972***Report prepared by:** Associate Prof Satish Karunakaran MBBS, DPM, FRANZCP.

I confirm that I am a Consultant Psychiatrist, registered with the Medical Board of Australia. I work as a Senior Consultant at the Townsville Hospital, Townsville, and I'm an Associate Professor of Psychiatry at the James Cook University. In addition, I do practice privately.

Materials And Information Relled Upon For The Preparation Of This Report.

Ms Catherine Lee Watter ("Cassie", as she prefers to be called), was referred to me by Dr Barbara Dignam, from the Townsville and Suburban Medical Practice located at 130 Charles Street, Cranbrook, QLD 4814. Catherine informed me that she was advised by a Psychiatrist (Dr Barbara McGuire), whom she saw in June of 2012, to have a regular follow-up with a Psychiatrist. She also informed me that she was seen by Dr McGuire in relation to custody of her daughters following the separation from her husband. I saw Catherine on 6th September 2012, 28th of September 2012 and again on 27 October 2012. Catherine understood that I would be providing a report to you describing my findings about her mental health. She consented verbally to the assessment and was cooperative throughout. This report is based on the assessments I carried out during her visits mentioned above.

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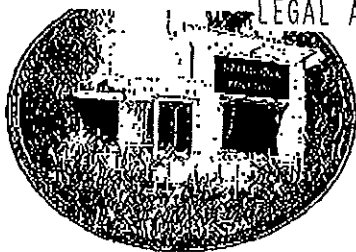
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In addition, I perused the following documents:

1. Referral letter dated 12th of July 2012, by Dr Barbara Dignam.
2. The Psychiatric report made to the Independent Children's Lawyer, dated 29th of June 2012, by Dr Barbara McGuire.
3. Report from Dr Wayne Scott, Psychologist, on the assessment of Ms Catherine Lee Watter's personality (attached).

It is my understanding that my report shall discuss Catherine's mental state and her personality variables, including the possibility of any mental disorders.

History

Catherine presented with a history of depressive symptoms including low moods, teary spells, and poor self-confidence. She also described nonvegetative symptoms including poor sleep, poor appetite and loss of weight. Catherine stated that she has lost about 25 kg over the past 12 months. Assessment also revealed significant anhedonia. Sleep was a major concern and Catherine stated that she gets only 3 to 4 hours of sleep every day, with significant initial insomnia. Catherine also described symptoms of chronic anxiety, both subjective and objective.

Catherine's symptoms arose on the background of significant stressors. Catherine's marriage ended in August of 2011. She met Michael in 1996 and started living together in 1998. The couple married on 22nd of March 2000 and lived together until final separation on the 14th of August 2011. The couple have two children, five-year-old twin girls named Isabella and Bronte. They were born through IVF and delivered after 32 weeks of gestation. The children had low birth weight and some difficulties in thriving earlier on. However, they have been in reasonably good physical health since then.

Catherine's history suggests that her relationship Michael was abusive and traumatic. Exploration of her history indicated that Michael may have significant obsessive compulsive personality traits. Such individuals can be highly controlling and extremely intolerant of imperfections in their environment. This resulted in numerous conflicts between the couple and what appeared to be prolonged emotional abuse of Catherine. According to Catherine, the relationship began to deteriorate over the last 4 or 5 years. She speculated that she had been the main breadwinner for the family for several years, and this may have contributed to his resentment and his behaviour. Catherine stated that there was no physical violence or aggression towards her. However, curiously, she stated that Michael can be obsessed with sex and can be sexually aggressive. When asked to explain, she admitted that Michael has raped her in the past. Eventually, Catherine walked out of her marriage on 14th August 2011.

Unfortunately, the separation was acrimonious. Initially, the couple had an informal agreement for shared custody. According to Catherine, within a few weeks one of her children started making statements and displaying behaviours suggestive of childhood sexual abuse. Eventually, the other child also made remarks in that direction. This alarmed Catherine who took her children to a General Practitioner and the Department of Child Safety was alerted. There is a long saga of accusations and counter accusations between Catherine and Michael, about allegations of sexual abuse of their

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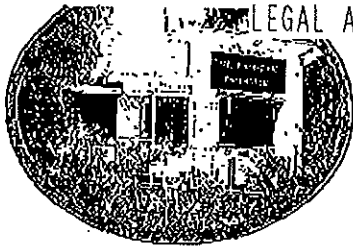
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Alcohol And Drug History

Catherine described herself as an occasional drinker. She drinks "a glass or two of wine, now and then". She denied any other significant substance abuse history.

Medical History

Catherine was diagnosed with Systemic Lupus Erythematosus in 2006 and has taken non-steroidal anti-inflammatory drugs for the same. She was also diagnosed with Polycystic Ovary in the past and had difficulties with conception referred to earlier.

Forensic History

Catherine denied any history of charges or convictions.

Personal History

Catherine was born in Townsville and is the third of four siblings born to a middle-class family from regional North Queensland. Her father used to manage motels and caravan parks while her mother generally attended to home duties. For a period of time the family lived on a farm near Winton.

Catherine described both her parents as quite religious (Baptists) who gave the children a fairly strict upbringing. Catherine's elder brother Stephen works for a mining company while her elder sister Linda works in the retail business. Catherine's younger brother works for a construction company, designing patios. He apparently has dyslexia.

Catherine's initial education was in Townsville but the family relocated to a farming property near Winton when she was 6 years old. For a period of time, she continued her education through correspondence. The family eventually moved back to Townsville and Catherine was able to continue her senior schooling at the Cathedral School in Townsville.

Catherine denied any history of abuse or exposure to trauma during childhood. She was fearful when recalling allegations made by Michael and his friends that she was abused by her elder brother Stephen. Catherine strongly denied this.

Catherine finished school with good academic credentials. She enrolled for a degree in physics at the James Cook University, but dropped out after 6 months, and entered the workforce. She worked for her father's travel agency for a period of time before travelling to UK and Europe for a year. She then returned to Australia and re-entered the workforce. She managed the Hogs Breath Café for some years and then moved to Brisbane, and worked at SunCorp. She then moved to Canberra and worked at a call centre for Telstra for a few years. She was married by then and the couple moved to Brisbane where they spend some time renovating houses and selling them. Catherine and her husband eventually moved back to Townsville around 2005/6. As mentioned, she currently runs a Paediatric Allied Health Service.

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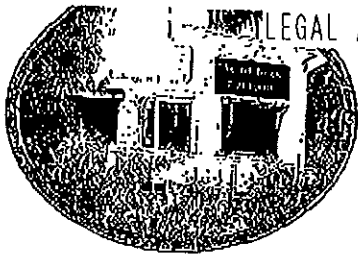
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Catherine described three significant relationships in her life. Her first relationship was in her early 20s and lasted only 2 years. She became pregnant and had a termination of pregnancy before the relationship ended. Her second relationship was in her mid-20s and it lasted for 2 years. Again, the relationship ended due to incompatibilities. Her third relationship was with Michael whom she met in 1996 and married in 2000. Michael is an exercise physiologist. Catherine supported him during the years of his study and was the major breadwinner throughout her marriage. As mentioned earlier, the relationship was an abusive one from Catherine's point of view and she ended it on 14th August 2011.

Catherine stated that she is currently single. She appears to have the support of her parents and she is also a member of the local Rotary Association.

Premorbid Personality

Assessment did not reveal any significant maladaptive personality traits. As her history clearly shows she has functioned well for most of her life.

I referred her to Dr Wayne Scott for administration of Personality Assessment Inventory (PAI). PAI is a self-report measure and is helpful in determining significant maladaptive domains of the subject's personality. The instrument has "check" measures (sometimes called 'lie scores') that can pick up inconsistencies and attempts to manipulate the test. The test has reasonable validity. The PAI test did not reveal any significant personality disturbances. It revealed elements of depression and stress as would be expected. Dr Scott's letter is attached to this report.

Mental State Examination

Catherine appeared neatly attired and well kempt during her interviews. She was pleasant and easy to engage. She was cooperative and good rapport could be established. Her psychomotor activity was normal. Her speech was normal in volume and delivery. There was no pressure of speech or flight of ideas. There was no evidence of delusions or thought disorder. Thought content revealed some preoccupation with her predicament and her anxieties about the safety of her children. She denied any thoughts of self-harm or aggression. She described her mood as "up and down". Observed affect was dysthymic, anxious and tearful at times. However, her affect was congruent and reactive. She denied any perceptible abnormalities. Her social judgement appeared unimpaired and she had insight into her condition.

She was oriented to time and place and appeared to be of normal intellect.

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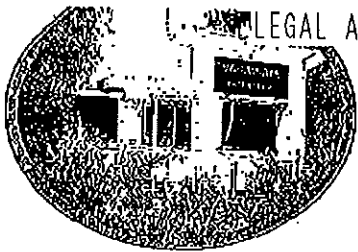
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Diagnosis

- Axis I: Adjustment disorder with depression and anxiety.
- Axis II: None identified.
- Axis III: Systemic Lupus Erythematosus, Polycystic Ovary.
- Axis IV: Significant stressors related to the custody issues surrounding her children and possible sexual abuse.
- Axis V: GAF approximately 50-60

Management

I have advised Catherine to continue Zoloft at the present dose of 100 mgs mane. I have advised her to come for a review in four weeks' time. I shall monitor her mental state through this difficult period.

Summary And Opinion

Catherine is a 39-year-old woman who separated from her husband, Michael, in August of 2011. She has two children, twin girls, aged 5 years. Initially the couple had informal shared custody arrangements. Within a few weeks of separation the children started articulating sexual themes and exhibiting sexualized behaviours. Matter was notified to child safety authorities. Catherine feared sexual abuse by the children's father. He accused Catherine of "coaching" the children. Catherine now has only very limited access to her children (1.45 hours per week starting Monday, the 30th October 2012) while her husband retains full custody. It appears that the child safety authorities could not confirm any sexual abuse and have accepted Michael's explanations. From the history obtained from Catherine it appears that this is mainly due to the children's inconsistent statements. Catherine has sought legal recourse and the final court hearing is in December of 2012.

My thoughts on the matter are:

1. Catherine has a diagnosis of "adjustment disorder with depression and anxiety". This term is used to describe someone who is experiencing anxiety and depression due to major stressful events in their life. It is not an illness that significantly alters the patient's behaviour or their capacity to think and reason.
2. Careful assessment did not reveal any significant personality pathology. I have no evidence to suggest that Catherine is a devious personality who is carefully manipulating various services to attain her goals.
3. As I had mentioned earlier in this report, both parties seem to agree that the children have shown sexualized behaviours and utterances.

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Psychologist's Summary

Re: **Catherine Lee Watter**
DOB: **03/10/1973**
Referred by: **Dr Satish Karunakaran (Con. Psychiatrist)**

Catherine attended two sessions and she completed the Personality Assessment Inventory (PAI). It was made known to Catherine that the PAI was a self-report measure and that the results assist clinicians in ascertaining areas of difficulty or mental illness.

Her self-reported results suggest that:

- She is not experiencing any personality issues or major psychiatric disorders
- Main presentation is *Depression* and associated *High Stress* which would be expected when viewed in terms of the stressors she has had to contend with over the past few years (failed relationship, allegations of mental instability, children being placed in the care of her ex-partner, establishing a business, ongoing Family Court Case, etc).
- The PAI has had incorporated into its design 'check' scales for *Infrequency* (Inconsistent self-reporting), *Negative* and *Positive Impressions* (either under reporting or overstating the level of the psychological condition). Her responses were in the normal range indicating that her responses were reliable.
- Overall, it is suggested that she is *experiencing considerable emotional adjustment* at this stage in her life.

Further, she stated that she has recently experienced a panic attack regarding the handover of the children and this is becoming more frequent. This presentation will be addressed in future sessions.

For your consideration,

A handwritten signature in cursive script, appearing to read 'Wayne Scott'.

Dr Wayne Scott (Psychologist)
PhD, M.Sc. BLaws.
28th