
1 Year Findings.

Jennifer McIntosh PhD

The study

- Explores stage 1 and 2 progress made by families through two specialist forms of mediation: Child Focused Mediation and Child Inclusive Mediation.

Beyond Rhetoric....

- 1 in 12 children in Australia will develop mental health difficulties in childhood.
- For children of separated parents, that figure is 1 in 4.
- Divorce does not cause this. Ongoing parental conflict does.
- A significant public health issue.

Can/should mediation really impact on this?

- A constructive process at the right time is likely to have a cumulative positive impact.
- An adversarial adult focused approach at this critical time is likely to have a cumulative negative impact.

McIntosh, Long and Moloney (2004)
Journal of Family Studies Vol 10, No 1

McIntosh and Long (2005)
Journal of Family Studies Vol 11, No 1

Mcintosh, Long and Moloney. 2004
McIntosh and Long. 2005

Beyond Rhetoric....

- 1 in 12 children in Australia will develop mental health difficulties in childhood.
- For children of separated parents, that figure is 1 in 4.
- Divorce does not cause this. Ongoing parental conflict does.
- A significant public health issue.

Can/should mediation really impact on this?

- A constructive process at the right time is likely to have a cumulative positive impact.
- An adversarial adult focused approach at this critical time is likely to have a cumulative negative impact.

McIntosh, Long and Moloney. 2004
McIntosh and Long. 2005

Beyond Rhetoric....

- 1 in 12 children in Australia will develop mental health difficulties in childhood.
- For children of separated parents, that figure is 1 in 4.
- Divorce does not cause this. Ongoing parental conflict does.
- A significant public health issue.

Can/should mediation really impact on this?

- A constructive process at the right time is likely to have a cumulative positive impact.
- An adversarial adult focused approach at this critical time is likely to have a cumulative negative impact.

McIntosh, Long and Moloney. 2004
McIntosh and Long. 2005

Beyond Rhetoric....

- 1 in 12 children in Australia will develop mental health difficulties in childhood.
- For children of separated parents, that figure is 1 in 4.
- Divorce does not cause this. Ongoing parental conflict does.
- A significant public health issue.

Can/should mediation really impact on this?

- A constructive process at the right time is likely to have a cumulative positive impact.
- An adversarial adult focused approach at this critical time is likely to have a cumulative negative impact.

McIntosh, Long and Moloney. 2004
McIntosh and Long. 2005

Beyond Rhetoric....

- 1 in 12 children in Australia will develop mental health difficulties in childhood.
- For children of separated parents, that figure is 1 in 4.
- Divorce does not cause this. Ongoing parental conflict does.
- A significant public health issue.

Can/should mediation really impact on this?

- A constructive process at the right time is likely to have a cumulative positive impact.
- An adversarial adult focused approach at this critical time is likely to have a cumulative negative impact.
### Questions behind the current study:

1. What is the psychological functioning of parents and children at peak points in post separation conflict?

### Questions behind the study:

If we redefine what “divorce settlement” means, through the eyes of the child, what results do we achieve?

### Questions behind the study:

2. What outcomes can be achieved through therapeutic mediation processes that
   a) actively target the parental state of mind, and the parental alliance?

### What shaped the interventions studied here?

The evidence: For children to adjust well to parental separation, what matters, unequivocally, is that parents are supported to construct or restore a parental alliance secure enough to support the weight of their developing child.

The theory: Attachment theory informed the core interventions, targeting parental reflective function.

### Parental reflective function

- Attachment research of many decades shows that the cornerstone of a child’s security and mental health is the parent’s ongoing capacity to take the child’s perspective. The clarity of parent’s reflection on their own internal states and ability to differentiate the child’s experience from their own is what matters.

### Questions behind the study:

3. Are different outcomes achieved by a mediation process that also
   1) offers children a separate space to share their experience of the conflict?
   2) Offers parents objectively derived knowledge about the unique needs of each child?
Parental reflective function within mediation interventions

- Child focused mediation interventions target PRF *generically*, without access to children’s own material.
- Impacts of parents projections are likely less evident/workable.
- Child Inclusive interventions target PRF with “corrective” information from children’s assessments.
- Parents projections may become clearer.

The study

- Applies two different forms of Family Law Mediation, to two groups of families (n=75 each).
- Parents presenting with child related issues, and at least one child age 5+.
- Both treatments given by the same mediation teams.
- Families interviewed (quant/qual) pre-mediation, 3 months and 12 months post mediation.
- Comparative outcomes explored for parents and children.

The two treatment models

1. Child Focused Mediation:
   - individual intake sessions, 1-6 joint sessions on child related issues, 1 or 2 mediators, plus child consultant
   - tailored parent education tools
   - active targeting of conflict and parental alliance
   - generic consideration of each child’s needs and experience, as viewed by the parents.
   - educational resources used and therapeutic support as needed.

2. Child Inclusive Mediation:
   - individual intake sessions, 1-6 joint sessions on child related issues, 1 or 2 mediators, plus child consultant
   - tailored parent education tools
   - separate child session
   - active targeting of conflict and parental alliance.

The people behind the study

- Funding: Commonwealth Attorney General’s Department, Canberra.
- Collaboration of La Trobe University, Family Transitions, Relationships Australia.
- Principal Investigator: McIntosh
- Research Manager: Long
- RA teams: Canberra, Melbourne, Adelaide
- Design and Consultation: Smyth, AIFS
- Statistical consultation: Wells (MPC)
- Consultant: Moloney, Foreman
- Advisors to planning: Emery, Smart, Johnston

The treatment models

2. Child Inclusive Mediation:
   - tailored consideration of each child’s needs and experience, as viewed by the child, parents and as assessed by the Child Consultant
   - therapeutic feedback session/s to parents by Child Consultant and mediator.
Clinical Demonstrations

Treatment fidelity

<table>
<thead>
<tr>
<th>Independent blind rating</th>
<th>Child focused group:</th>
</tr>
</thead>
<tbody>
<tr>
<td>108 cases</td>
<td>13 cases excluded</td>
</tr>
</tbody>
</table>

- Mediation was completed
- Treatment framework was adhered to.
- Any aberrant factors in the treatment

<table>
<thead>
<tr>
<th>Child Inclusive group:</th>
</tr>
</thead>
<tbody>
<tr>
<td>70 cases</td>
</tr>
<tr>
<td>Mean fidelity – 2.85/3</td>
</tr>
<tr>
<td>1 case excluded</td>
</tr>
</tbody>
</table>

Changes studied

- post separation parental alliance
- conflict management
- parent-child relationships
- management of and satisfaction with contact/living arrangements
- child’s well-being and adjustment
- child’s self representation of conflict
- children’s perception of parental conflict and cooperation

Strengths of the study design

- Mediator effects constant: same mediation teams for both interventions.
- Same criteria for entry to each treatment.
- Parents in both groups gave mutual consent to study and intervention.
- Individual impact of the child interview same for both groups: all received the same interview three times over the year.
- Repeated measures.
- Strong quantitative and qualitative/projective interview design with parents and children.

Findings:

- The psychological shape of the separated family on entry into dispute resolution.
- The conflict climate.
- The shape of inner discord: children’s experience of post separation conflict.

Demographics of the two groups at intake

Income, Ethnicity, Education, Living arrangements: no significant differences.

- 75% Australian born, 45% second generation.
- Majority in low-medium income bracket
- 37% tertiary education, 30% trade.
- 65% of children living predominantly with mother.
- 40% parents very unsatisfied with parenting arrangements.
The Conflict Climate

- 50% mothers and 41% fathers reported high to extreme conflict post separation
- (13-17% IVOs)
- 2/3 mothers and 1/2 fathers reported high psychological acrimony with ex partner (Acrimony Scale, Emery)
- 95% of children reported moderate to high conflict between their parents at intake.

The Conflict Climate at Intake

Escalated conflict on entry to mediation: both.
- 92% mothers and 85% fathers report poor parental alliance.
- CIM group separated longer and more complex pathways.

Children’s well-being at intake: SDQ trends

Both parents ratings: children’s psychological functioning far poorer than norms*** (n=298 children).
- 33% in borderline-clinical range
  - (14% norm)

Through the children’s eyes

- 160 children, ages 5-18, personal interviews, play and drawings
- 50% : parents’ conflict is about me
- 91% sad in the face of their parents’ conflict, 68% scared, and 52% angry.
- The higher the conflict, the more likely the child was to feel caught in the middle of it and distressed(**).

How can I make sense of this conflict?

Pre-intervention, only 10% of children could find an effective resolution to the conflict in the stem.
- 40% of children (of all ages) relied on denial and magical thinking to resolve the conflict internally.
- 36% were un-integrated/traumatised in their ability to form a coherent narrative around parental conflict.
- Struggle across age groups.

Internal representations of parental conflict

- Children’s Separation Story Stems (McIntosh, 2004)
  Three projective stories: parental conflict, residence dispute, and contact dispute.
“My Dad, he doesn’t really know what it’s like to be me”

- On all projective and written measures, children reported a significantly less available relationship with their father, than with their mother.
- A known risk factor.

Findings: Level 1
Assessing progress 3 months post mediation. Repeated measures

- Repeated Measures, Mother, Father and Children.

Main effects at 3 months:
Both treatment groups associated with positive effects on:

- Acrimony, Dad **
- Conflict, Mum **
- Conflict Dad **
- Parent-child relationship *
- Child’s subjective response to conflict **
- Children’s perception of parents’ conflict**
- Children’s mental health *

Conflict: Treatment effect for fathers of both groups

Significant reduction of conflict over time in both treatment groups **
Similar pattern for mothers and fathers.

Parent Child Relationships:
mixed effects for mothers & fathers: both groups

Significant improvement over time for all fathers**
Stability or slight decline for mothers of both groups.

Children’s distress

Children’s distress decreased when:
1. Mother’s sense of acrimony and conflict decreased, and her parental alliance increased.
2. Child perceived available parental relationships with both.

Children’s distress continued when:
1. parental relationships with mum and dad remained distant.
What changed?
Child Focused Treatment

The child focused treatment did not produce any unique outcomes at 3 or 12 months post intervention.

What changed?
Child Inclusive Treatment

The CIM intervention produced several unique outcomes.

Main effects at 3 and 12 months:
Child Inclusive treatment groups:

<table>
<thead>
<tr>
<th></th>
<th>3 months post treatment</th>
<th>1 year post treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parental Alliance Mum</td>
<td>*</td>
<td>ns</td>
</tr>
<tr>
<td>Parental Alliance Dad</td>
<td>**</td>
<td>**</td>
</tr>
<tr>
<td>Acrimony Mum</td>
<td>*</td>
<td>ns</td>
</tr>
<tr>
<td>Acrimony Dad</td>
<td>**</td>
<td>**</td>
</tr>
<tr>
<td>Satisfaction with arr/nts</td>
<td>**</td>
<td>*</td>
</tr>
<tr>
<td>Court</td>
<td>*</td>
<td>**</td>
</tr>
<tr>
<td>Durability of agreements</td>
<td>**</td>
<td>**</td>
</tr>
<tr>
<td>Progress in resolving dispute</td>
<td>**</td>
<td>**</td>
</tr>
</tbody>
</table>

Parental alliance: Treatment effect for Child Inclusive Fathers

Fathers’ Alliance Means, 3 time points

What’s time got to do with it?

Time with fathers

I year after intervention:
28% CF shared care and 66% mother resident parent
22% CI shared care and 69% mother resident parent
Satisfaction with living arrangements

- Significant treatment effect of CIP for fathers **

Mothers' satisfaction living arrangements

- Significant treatment effect of CIP for mothers**

Does the child want the arrangements to be different?

** treatment effect for CIP children.

Main effects at 3 and 12 months: Child Inclusive treatment group

3 months 1 year
post post

- Parent child relationship Mum ns *
- Parent Child relationship Dad ns ns
- Child’s perception of conflict ns *
- Closeness to Dad ** **
- Contentment with living a/mnts * *
- SDQ Emotional symptoms subscale - *

Durability and Litigation?

Child Inclusive Treatment associated with:
- Lower litigation rates **
- More durable mediation outcomes
- More workable mediation outcomes

Findings:
Level three

Social validity and qualitative data:
- Mediators’ data
- Parents’ data
- Children’s views
Evaluation trends: Mediators’ ratings

Child Inclusive cases were significantly more complex*, but parents made greater progress through the course of mediation in
1. reduction of conflict **
2. overall resolution of dispute **

Mediators were more satisfied with the outcomes of the mediation**

Mediators felt that the intervention was appropriate in 73% of cases (not needed, court needed)

Mediator outcomes

• “It took us a good 6 months to find our stride with CIM. It is complex work. But so worth it. When I try to mediate parenting disputes without it now, it’s like having my hands tied behind my back”

Mums’ views

CIP mothers rated all evaluation items higher than CF mothers. Significantly:
– decisions reached are working (*)
– decisions are fair for my ex partner(•)
– felt supported as a parent (**) 
– decisions good for children (***)
– concern was shown for children (*)
– children benefited from mediation (***)
– Better overall progress (***)

<.05 **.01 ***<.001

Progress trends: A focus on fathers

Of all parents across groups, fathers in the CF mediation group reported that the decisions reached in mediation were least fair for them. ***

Fathers in CIP compared to fathers in CF, reported:
– better progress *
– fairer mediation outcomes for them *
– greater support through the process **
– more concern shown for their children **
– their children benefiting more from the mediation .

<.05 **.01 ***<.001

No significant differences between mothers and fathers in the CIP group on any evaluation variables.

However, strong differences between mothers and fathers in the CF group. CF Fathers felt
• less supported (***)
• less understood in the mediation (***)
• outcomes were less fair for them(***)

Findings level 4: Qualitative Analyses.

Parent and child interviews
Looking back, what helped?

<table>
<thead>
<tr>
<th>CF parents n=75</th>
<th>CIP n=101 parents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nothing</td>
<td>Hearing from my kids</td>
</tr>
<tr>
<td>28%</td>
<td>43%</td>
</tr>
<tr>
<td>Uncertain</td>
<td>Felt supported/heard</td>
</tr>
<tr>
<td>27%</td>
<td>23%</td>
</tr>
<tr>
<td>Felt supported</td>
<td>Nothing</td>
</tr>
<tr>
<td>13%</td>
<td>14%</td>
</tr>
<tr>
<td>Being able to talk</td>
<td>Uncertain</td>
</tr>
<tr>
<td>12%</td>
<td>14%</td>
</tr>
<tr>
<td>neutral 3rd party</td>
<td>Education</td>
</tr>
<tr>
<td>12%</td>
<td>6%</td>
</tr>
<tr>
<td>Focusing on kids</td>
<td></td>
</tr>
<tr>
<td>8%</td>
<td></td>
</tr>
</tbody>
</table>

CIP: n=101 parents

Hearing from my kids 43%
Felt supported/heard 23%
Nothing 14%
Uncertain 14%
Education 6%

Children’s perspectives

- 61% of CI children reported positive outcomes for the family since their parents’ mediation.
- 37% of CF children reported this.

Children’s reported outcomes

Dad knows how I feel. I could not speak to Dad and if I wrote letters he thought mum wrote them. After talking to the lady, he knows how I feel”. (11 years)

“We don’t see Mum and Dad arguing around us. They don’t speak to each other much. They see it more from our point of view”. (10 years)

“He helped a lot, it helped get the sadness away from me” (5 years)

What predicts progress?

For MUM:
1. CIM intervention **
2. Lower hostility at intake **
3. Progress around visiting **
4. Shift in her perspective of father’s parenting **
5. High parental alliance at 12 months **

Also strong trends for:
- Older mothers
- Higher income mothers

For DAD:
1. CIM intervention **
2. Reduced hostility over time **
3. Increased alliance *
4. Shared care *

Trend:
And their children’s well-being was seen to improve.
What predicts poor progress at 12 months?

- Younger mums
- Lower income mums
- A pattern of escalating conflict over the 12 months
- A pattern of declining alliance over the 12 months
- Dropped out of mediation early: fewer sessions

In these cases, the mediator rated parents progress in mediation as very low, and was dissatisfied with the Mediation.

Violence did NOT predict poor outcomes, nor did Court status.

Indicators for Child Inclusive practice

- Violence and high conflict not contra-indicated.
- Couples with poor alliance at intake benefit most.
- Couples with adequate alliance do just as well in both groups.

Clinical range of children’s mental health predicted by:

- Low education of father **
- Child’s perception of distant mother **
- High conflict*
- Shared care*
- Younger children*

Reflections

- At the point of presenting to Family Law Mediation, these children’s mental health was at significantly higher risk than the general population.
- These children experienced a poorly available relationship with their fathers.
- They tended to self-blame and to struggle to integrate the meanings of their parents’ conflict.

Treatment effects are evident in both CF and CIP interventions around reduction of parents’ conflict and children’s distress.

- Isolated effects evident in Child Inclusive Treatment, particularly around the recovery of the parental alliance, and the child’s sense of parental availability.
- There is significantly greater satisfaction of parents, and children with outcomes from Child Inclusive Mediation.
Findings suggest a level of relationship repair unique to this form of child inclusive dispute resolution, 3 and 12 months post intervention.

Study limitations

Weekly site communication and treatment fidelity checks for entire study, but less capacity to monitor clinical elements of child focused intervention than for child inclusive treatment (internal/external supervision).

1 site: research interviewer changed over the 12 month period (although this affected both data sets).

Practice Directions

• The analyses indicate different psychological mechanisms of change for mothers and fathers.

• The implications for CF and CIM practice are substantial, helping to target interventions earlier and more accurately for each parent.

Concluding thoughts

• Public health issues

• The future for child inclusive avenues through dispute resolution: refining specialist practice.

Family Transitions and
La Trobe University

Mcintosh@familytransitions.com.au