

Parentalité – Conflit – Résolution : An intervention for high-conflict families

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Introduction

- Parental separation is a challenge for the whole family: establishing new boundaries, moving from a couple relationship to a coparental relationship
- Coparentality involve interaction between the parents regarding the needs of children, such as childrearing agreement, division of labor, joint family management and support/undermining (Feinberg, 2003).
- Usually, supportive coparenting occurs when there is low interparental conflict and high mutual support (Bonach & Sales, 2002).
- Parents who fail to establish a supportive coparenting relationship have some characteristics we find in individuals with a PD such as(Alary, Cyr & Mercier, 2015) :
 - Rigidity, self-centeredness, control
 - Cognitive distortions
 - Fragile identity
 - Lack of introspection or empathy
 - Emotional instability and impulsivity
 - Primitive object relations
 - Primitive defense mechanisms
 - Punitive and rigid morality

A high-conflict family is generally considered when the parents have been separated for at least two years but there is ongoing anger, hostility, or mistrust, recurrent verbal and/or physical abuse, recurrent litigations to settle custody disputes, or continuous dysfunctional co-parenting (Johnston, Roseby, & Kuehnle, 2009; Levite & Cohen, 2012).

High-conflict families: 6 to 10% of cases take up 90% of the court's time

- Individuals with a personality disorder are among the most important users of emergency services (Institut national de santé publique, 2015), whereas high-conflict families seriously challenge the justice system.
- These two groups are challenging for the legal and psychosocial professionals by over-demanding them and undermining the efficacy of the services offered.

The PCR protocol :

1. An adapted legal intervention
 - a) One judge per family (better control of the judicial process for judges)
 - b) An adapted, rapid, and easily accessible legal process for families
 - c) The parties and their lawyers commit to work collaboratively (a change in mindsets and codes of conduct)
2. Two psychosocial tools
 - a) A co-parenting workshop: Faire équipe pour les enfants (FÉE) (9 hours)
 - b) A family intervention program adapted to the family's specific needs (45 hours)
3. Fluid and transparent communication between professionals

Method

Participants

- 8 families (16 parents), recruited by the Coordinator of the Family Chamber of the judicial district of Quebec City, aged 26 to 50 years
- Most live as a common-law couple (n=6); married (n=2)
- Duration of union for participants: most between 3 to 10 years
- Time elapsed since separation: 3 to 7.5 years (X=5.47 years, SD=1.55).
- Broken parent-child relationships : 7 families
- One family excluded for serious mental health issues (data for T1 only); two others excluded for abandoning the program partway through (data at T1; partial data at T2)

Measures

- Coparental functioning :
 - Parental Alliance Measure (Abidin & Konold, 1999)
 - Confidence Scale (Stanley, Hoyer & Trathen, 1994)
 - Coparenting Relationship Scale (Feinberg, Brown & Kan, 2012)
 - Margolin's Coparenting Questionnaire (Margolin, Gordis & John, 2001)
- Psychological adjustment :
 - Psychiatric Symptom Index (Ilfeld, 1976)
- Level of conflict :
 - Overt Hostility Scale (Porter & O'Leary, 1980)
 - Communication Danger Signs Scale (Stanley & Markman, 1997)

Procedures

Each family member received an average of 11 or 12 meetings with a family relationship counsellor throughout the protocol, up to 45 hours. Parents were asked to complete online questionnaires twice, before the project began and after the psychosocial interventions.

Results

Table 1

Participants' outcomes on parental functioning, psychological adjustment and level of conflict before the psychosocial interventions.

	Mothers (n = 8)		Fathers (n = 6)		Mann-Withney
	M	ET	M	ET	
PAM	44,13	8,36	41,14	10,78	26,50
OHS	22,75	5,12	24,33	3,44	23,00
CDSS	16,00	0,93	17,00	0,89	14,00
ISP	23,13	10,88	21,33	4,13	21,50
CS	31,13	8,17	25,67	10,03	22,50
CRS	67,88	9,28	80,17	10,40	6,00*
CQM	12,50	3,74	13,17	2,71	6,50*

* = $p < 0,05$

† = $p < 0,10$

PAM = Parental Alliance Measure, OHS = Overt Hostility Scale, CDSS = Communication Danger Signs Scale, ISP = Psychiatric Symptom Index, CS = Confidence Scale, CRS = Coparenting Relationship Scale, CQM = Coparenting Questionnaire de Margolin

- Fathers showed a more positive assessment of the co-parenting relationship and reported more alienating behaviors in the other parent.
- When compared to participants in similar studies using the same measures, **participants are more disturbed** about their parental functioning and level of conflict :
 - Parents showed poorer parental alliance and higher level of conflict. They showed a tendency to fight frequently and to show hostility towards the other spouse in front of the children, a high level of negative communication, a distrust in relation to the other parent and their co-parenting relationship.
 - Parents showed symptoms of psychological distress but these do not reach the clinical threshold.

Table 2

Comparison of participants' outcomes on parental functioning, psychological adjustment and level of conflict before and after participation in the PCR pilot project

	Wilcoxon		
	Mothers	Fathers	Parents
PAM	-2,02*	-0,41	-1,58
OHS	-1,35	-2,03*	-1,54
CDSS	-0,45	-2,03*	-1,64†
ISP	-0,73	-0,14	-0,48
CS	-0,41	-0,14	-0,30
CRS	-0,41	-1,21	-0,56
CQM	-1,63†	-1,60	-2,25*

- Parents perceived fewer alienating behaviors in the other parent
- Mothers perceived a more positive alliance with the other parent
- Fathers perceived less parental conflict and fewer negative interactions

Discussion

- At a descriptive level, parents have a poorer coparental relationship than in others studies.
- The difficulties in the coparentality relationship are entrenched.
- Evidence of positive impact of the program on parent reports of conflict and coparenting
- The effect of the intervention is different for men and women. In the same way to what is suggested by the scientific literature (McCoy, 2013), to act appropriately :
 - The fathers need approval from the other parent. They seems more sensitive to conflict in the coparentality relationship.
 - The mothers need to trust the other parent.
- High conflict divorce cannot be addressed by the traditional litigation model. Parents in high-conflict families have several personality and interpersonal relationship problems, similar to those seen in individuals with personality disorder.
- As for individuals with a personality disorder, a structured and rigorous intervention seems to best meet the needs of these high-conflict families.
- The PCR protocol requires professionals to change their usual practices, so collaboration between the psychosocial and legal professionals requires a period of adaptation
- A longitudinal study would be needed to measure the sustainability of the benefits of this intervention model.
- Furthermore, it would be interesting to assess how personality disorders are associated with the success of the intervention