



# In the Name of the CHILD

A DEVELOPMENTAL APPROACH TO  
UNDERSTANDING AND HELPING CHILDREN  
OF CONFLICTED AND VIOLENT DIVORCE

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## Chapter 1

# The Family Crucible of High-Conflict Divorce and Entrenched Custody Disputes

Just as a marriage can be deemed as more or less successful or as having failed, so can a divorce be seen as being more or less successful or as having failed to accomplish its purpose. In a successful divorce, the adults are able to work through their anger, disappointment, and loss in a timely manner and terminate their spousal relationship with each other (legally and emotionally), while at the same time retaining or rebuilding their parental alliance with and commitment to their children. A successful divorce can relieve children of the daily stress of overt parental conflict and associated anger and depression. Fortunately, the majority of couples appear to achieve this kind of transition relatively successfully. Charts and markers for their voyage have been well described elsewhere (Ahrons, 1994; Hodges, 1991; Kalter, 1990; Ricci, 1997). This transition is not easy; there is extensive evidence that it constitutes one of the most difficult challenges and painful experiences that can confront children and adults throughout their lives (Wallerstein & Blakeslee, 1989; Wallerstein & Kelly, 1980). Moreover, this task takes time. On average, conflict and turmoil continue for two to three years following separation, although there can be great variation: some relationships take many years to terminate, and some may never be resolved (Hetherington et al., 1982; Wallerstein & Kelly, 1980).



## THE FAILED DIVORCE

About one fourth to one third of divorcing couples report high degrees of hostility and discord over the daily care of their children many years after separation and well beyond the expectable time for them to settle their differences (Ahrons, 1981; Maccoby & Mnookin, 1992; Wallerstein & Kelly, 1980). For about one tenth of all divorcing couples, the unremitting animosity will shadow the entire growing-up years of the children. This means that an accumulating subgroup of children are caught in these family situations. Since approximately one million children each year experience their parents' divorce in the United States, over a span of two decades more than five million children will be affected by ongoing parental conflict; for two million children, this condition may well be permanent (Glick, 1988; Maccoby & Mnookin, 1992).

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Frequently, although not always, these parents take their disputes with each other to family court. Current estimates are that about one fourth of all divorcing couples with children have considerable difficulty completing the legal divorce without extensive litigation (Maccoby & Mnookin, 1992). Re-litigation about custody matters following the final divorce decree occurs with a smaller proportion of families (less than one fifth), but these legal disputes are often perceived to be the more intractable ones (Ash & Guyer, 1986b; Depner et al. 1994; Duryee, 1992; Hauser & Straus, 1991). Interestingly, ex-spouses who are highly litigious tend to be, but are not necessarily, the same group who are very hostile and highly discordant in coparenting their children (Maccoby & Mnookin, 1992).

Outside the court, highly conflictual divorced parents engage in frequent arguments, and undermine and sabotage each other's role as parents. This can involve talking negatively about the other parent in front of the child or having the child pass messages including insults and threats to the other parent. Some studies have shown that the children of these parents are witness to considerable verbal abuse (on the average about once weekly) and physical aggression between their parents (on the average once monthly), usually at the time of transfer from one home to the other (Johnston, 1992a; Johnston & Campbell, 1988). Parents can refuse to communicate and assiduously avoid each other; they can take unilateral actions with respect to their children, refusing to coordinate child care arrangements, transferring the child to another school or doctor without notice, refusing visitation, and even snatching and hiding their children from the other parent (Greif & Hegar, 1993; Johnston & Campbell, 1988).



In sum, high-conflict parents are identified by multiple, overlapping criteria: high rates of litigation and relitigation, high degrees of anger and distrust, incidents of verbal abuse, intermittent physical aggression, and ongoing difficulty in communicating about and cooperating over the care of their children at least two to three years following their separation. Probably most characteristic of this population of "failed divorces" is that these parents have difficulty focusing on their children's needs as separate from their own and cannot protect their children from their own emotional distress and anger, or from their ongoing disputes with each other.

Children who are the subject of chronic postseparation disputes between their parents have now been identified as one of the most "at-risk" groups among the divorcing population. For this group, the major benefit of the divorce—the cessation of parental hostilities—does not accrue. Many of these children have been embroiled for years in parental conflicts that predate the separation and continue afterwards (Emery, 1988; Kline et al., 1991; Tschann et al., 1989). For others, the separation itself focused the disputes on them (Hetherington et al., 1982; Johnston, 1993b). The most serious threat, however, is one we will argue within this book—that these children bear an acutely heightened risk of repeating the cycle of conflicted and abusive relationships as they grow up and try to form families of their own.

#### DIVORCE IMPASSE

Our thesis is that the outcome of a marital separation has much to do with the manner in which it is undertaken. A successful divorce largely depends on how well the stormy waters of the divorce transition have been navigated by the entire family and what help or hindrance the family got during their perilous crossing. In the remainder of this chapter we briefly review the anatomy of high-conflict divorces and entrenched postdivorce disputes over children to show how family members, friends, mental health and legal professionals, and family courts may inadvertently contribute to the creation of pitfalls that trap family members in a divorce impasse, where they can neither remain married nor psychologically disengage from each other.

This chapter is a brief overview of the previous book about the dynamics of high-conflict families that is the foundation for the present work: *Impasses of Divorce*, by J. R. Johnston and L. E. G. Campbell (New York, Free Press, 1988). At the same time, this review sets the stage for suggestions as to how



our communities and courts can provide better support, more humane institutions, more responsive legal procedures, and better skilled mental health and legal professionals for the children and families of divorce.

Divorce impasse refers to whatever factors are blocking the divorcing family from resolving expectable separation conflicts and making the transition from an intact to a postdivorce family structure. Typically a divorce-transition impasse is a complex phenomenon, with elements that hold the dispute in place occurring at three levels: the *internal* level of individual psychological dynamics, the *interactional* level of couple and family dynamics, and the *external* level of the dynamics of the wider social system. The important point is that family members can become stuck at any or all three levels simultaneously, and the elements of each level can coalesce, locking the dispute into a mutually reinforcing pattern of entanglement.

### *The External Components of the Impasse*

TRIBAL WARFARE. The external level of the divorce impasse is often not recognized by the disputing parties and their helpers, but it is not difficult to understand, once recognized. The main point is that divorce disputes can quickly spread and encompass the social networks of the couple, resulting in a modern form of "tribal warfare" where significant others, including extended kin, new partners, mental health professionals, attorneys, and even judges, become a part of the tangle of disputing relations and serve to entrench the fight.

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Mrs. J left her husband after a secret affair with another man, when her children were 3 and 4 years old, respectively. By mutual agreement she kept custody. For the next seven years, the children enjoyed summer vacations and brief visits with their father, who flew in from another state on a wave of gifts and excitement. When the mother and her new husband fell on hard times financially, they began a series of lawsuits demanding increased child support from the wealthy father. Now Mr. J. had been greatly humiliated by the separation, but the new financial demands on him were the last straw. He hired what he considered the best attorney (i.e., the most aggressive one) and filed for custody of the children, now ages 10 and 11 years. In a bitter, escalating court trial, the mother wrote, and encouraged the children to write, angry letters about the father to the judge. The judge, who



had recently experienced his own divorce, became incensed and, buttressed by a psychologist's evaluation that the children were being alienated from their father, he ordered a precipitous change in custody. The mother's close-knit extended family, local community, church, and the children's school became enraged. Fund-raising efforts and letters to newspapers and local politicians all resulted in the formation of an unholy alliance: the community against the outsiders (that is, the father, judge, attorney, and psychologist). The children became local celebrities. Despite the father's efforts to woo them, they spent a miserable two years as martyrs, living with their father, who found himself doing battle both with the children and with the medley of voices raised in support of them. The mother felt saddened and guilty about what had happened. With great bitterness, the father was forced to relinquish custody and withdraw (Johnston & Campbell, 1988).

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As illustrated in this unhappy situation, with the deterioration of the marriage, the norm of privacy that governs the sanctity of the family breaks down. Separating spouses then may turn to others in their extended family and community for practical advice and emotional support and encouragement. Hearing only the one negatively biased version of the divorce situation, these significant others become outraged and seek to right the wrong and help the "victim." They can form alliances with and fight on behalf of the aggrieved party and in so doing unwittingly confirm negative, polarized, and often distorted views of the other spouse. Members of these alliances tend to claim the moral high ground by attempting to protect the children from the now demonized ex-spouse. This sets the stage for long-term disputes over the children.

It is perhaps expectable that extended families will stand behind and support their own family members during a divorce. However, this support often comes with a price: obligations, interference, and counterdemands that provoke stress and fuel disputes. For example, when a young divorced mother becomes financially dependent upon her own parents, she may be unable to resist when they agitate for her return to court to demand a decrease in the father's visits. In those more unusual cases where grandparents turn against their own offspring in favor of a daughter- or son-in-law during the divorce dispute, the conflict is compounded by a painful sense of betrayal on one side and obligation on the other. In these situations, unresolved



conflicts and latent resentments within the larger kinship network can be easily displaced onto or incorporated into the custody dispute. Likewise new partners can activate custody disputes. For example, shortly after a man's remarriage, the new stepmother may agitate to "save" the children from their "neglectful" mother. On closer scrutiny, however, the real problem may be the new wife's anxiety about securing her role in a marriage that she fears is being threatened by the man's ties to his first family; hence the first wife is scapegoated.

A particular subgroup of external-level disputes are those conducted in the name of cultural and religious differences between parents as to how their children should be raised. Although these value differences may be hotly disputed and appear unresolvable, rarely are they the basic issues driving the conflict. Most couples of mixed racial-ethnic background who have given birth to children have already come to some kind of resolution or acceptance of their differences and need to be reminded of that understanding. The problem is that this acceptance of each other's differences is often recanted upon separation and divorce because of other factors that drive the conflict. For example, a divorcing man or woman may have an internal need, or experience pressure from extended kin, to return to his or her racial-ethnic or religious origins. In other cases, a parent may react to the pain of feeling discarded as a spouse by insisting on his or her religious values or cultural identity being given preeminent status in the child's upbringing. Alternatively, having lost a sense of their identity in being cast adrift from the marriage, parents may embrace a new faith or lifestyle for the first time, become an evangelist for the cause, and insist that their child become part of it.

In identifying external elements of the impasse, it is important to discover who appears to have instigated the custody dispute, what triggered its onset, and which coalitions are in support of each opposing party. In particular, it is important to distinguish potentially bogus custody disputes (those driven by external forces) from bonafide ones (those having to do with genuine concerns about the child). Furthermore, legal and mental health counselors need to focus their clients' concerns and energies on the crux of the problem; otherwise, an initially bogus custody dispute may evolve into a bonafide one. In the above examples, this may involve talking to the young mother about her feelings of obligation to her own parents or to the man about his new wife's anxiety over securing her role. Where religious and cultural differences are a cloak for other conflicts, these under-



lying dynamics need to be dealt with in counseling for parents to value their child's opportunity to experience multiple perspectives and to help their child become proud of his or her mixed racial identity.

**THE ROLE OF ATTORNEYS.** The traditional adversarial court system has long been criticized for the polarization of the parties' positions and the escalation of family conflict. The institutionalized polemics between attorneys, the established procedures for fact finding and assembling of evidence, and the costly, cumbersome, and often lengthy procedures involved in custody litigation appear to fashion the ideal social environment for escalating divisiveness and blaming between parents. Attorneys in particular have long been implicated for contributing to rather than resolving disputes, because of their advocacy role within an adversarial judicial system. Advising their clients not to talk to the other spouse, making extreme demands to increase the bargaining advantage, and filing motions that characterize the other parent in a negative light are all typical examples. Needing to show evidence of neglect, abuse, physical violence, or emotional or mental incompetence to win their client's case, attorneys compose documents that are a public record of charges and countercharges, citing the unhappy incidents and separation-engendered desperate behaviors of the emotionally vulnerable parties, often out of context. The consequent public shame, guilt, and fury at being so misrepresented motivates the other party's compelling need to set the record straight in costly litigation.

The zeal with which some lawyers pursue a case at times has little to do with the client's needs or even the merits of the case. Ambitious attorneys, wishing to make a name for themselves in the legal community, may take advantage of an angry client's wish to punish and seize on a case because it provides a means to challenge the constitutionality of a new law or the legality of a procedure. Others may pursue litigation because of long-standing rivalries with the opposing counsel, or because they are misdirecting personal anger associated with their own divorce. In fact, attorneys are traditionally defined as both *counselors* and *advocates*, although the former function is often neglected in favor of the latter. When the required counseling goes beyond legal expertise, a referral to mental health professionals can protect both the clients and the attorneys from becoming entrenched in debilitating conflict and litigation.

**THE ROLE OF MENTAL HEALTH PROFESSIONALS.** The role of mental health professionals in fueling conflict has been less clearly acknowledged. Some



therapists, who see only one of the parties to the divorce conflict, encourage uncompromising stands, reify distorted views of the other parent, write recommendations, and even testify on behalf of their adult client with little or no understanding of the child's needs, the other parent's position, or the couple and family dynamics. Unfortunately, some courts are willing to give credence to this kind of "expert testimony." In some high-profile cases, the parents' mental health therapists squabble among themselves, playing out the parental dispute in a community or court arena.

Among the most negative influences of mental health professionals are their written evaluations of the parents during the upheaval of the separation, which explain the situation solely in terms of the individual psychopathology of the separating spouses. Psychodiagnostic terms, such as *paranoid, alcoholic, narcissistic, sociopathic, violent, or battered woman's syndrome*, reduce the explanation of complex marital dynamics to the emotional (or so-called moral) capacities of the individual parents, clearly placing all blame and responsibility on one or the other. These psychodiagnostic terms have special technical meaning within the mental health professions. When used in public or in court, they can become pejorative labels strategically employed to degrade or destroy the reputation of one parent and to "win" custody for the other. If shared with the divorcing parties or their legal counsel, these authoritative declarations as to the character of the divorcing spouses solidify negative, polarized views, which then become as though "written in stone," ensuring that the dispute will continue. An alternative, conflict-reducing approach would be for mental health professionals' testimonies and custody evaluations to pay more attention to prescribing how the family can resolve their impasse and how the children's development can be protected, rather than assessing who is and who is not emotionally disturbed, and who is and who is not the better parent (Roseby, 1995).

In perhaps no other area of practice are legal and mental health professionals so much at risk for losing their professional objectivity, and becoming entangled with their clients, as in these high-conflict family situations. Some try to rescue the client in ways that are not possible or take on the fight as their own personal crusade. It is common for counselors and advocates to become ambivalent, covertly hostile, and personally involved in dealing with and representing their clients. These powerful and compelling responses to the pain and suffering of divorcing individuals (called counter-transference reactions) are important signals to the professional involved to regain his or her balance and perspective in the case. This might involve



taking a step back to review the basis for these reactions or seeking out another professional for consultation.

When the parental conflict has expanded and incorporated outside parties, especially other professionals, the intervention of choice is to call a strategy conference with all players of the disputing network, preferably before their respective positions have hardened. Sometimes the court is the only agent with the authority to bring the parties to the negotiating table via a status conference. This meeting can be used to design a strategy for case management or resolution and is often the first order of business in a custody dispute that appears out of control.

**THE ROLE OF THE COURT.** The court itself can trap a family in a divorce time warp, not so much because of unwise decisions but rather because of the manner in which it renders its decisions. In practice, the modern day family court views itself more simply as a forum for dispute resolution with a paucity of laws to guide it (Mnookin, 1985; Mnookin & Kornhauser, 1979). Its authority and judgment, however, can have powerful symbolic meaning for clients who are emotionally distressed and dependent on others for their self-esteem. Not only is the court considered by many as a forum where the private marital fight is exposed to humiliating public scrutiny, but it is potentially invested by its clients with a quasi-divine moral authority.

From the client's perspective, the judge's decrees become dramatizations of who is right and who is wrong. For example, the court may intervene to stabilize a child's living situation immediately after the separation, granting temporary custody to the father until the mother is better able to handle her own affairs. This is interpreted by the parents as a ruling that the mother is "unfit." Or a substantial financial settlement awarded to a wife may be seen by her as retribution for the wrongs perpetrated by her "unfaithful husband." It is especially important, if legal counsel or the judge suspects the parents are in court with a psychological agenda of obtaining a moral judgment, that court orders be clear and precise as to the basis for the decision. If they are unclear, they may constitute a permanent public record of inordinate shame and condemnation for some people. For example, the tragic suicide of a father in one of our studies could have been prevented if the court had taken the trouble to tell him that its decision to give him once-a-month visitation with his daughter, when he was asking for joint custody, was not based on his capacity to be a loving father to his little girl but on the



needs of a very vulnerable toddler to have protection from horrendous ongoing disputes that neither he nor his wife could control. This socially isolated, emotionally troubled man, whose entire identity hinged upon his fatherhood, clearly interpreted the court's judgment as a devastating indictment of his worth as a parent and a human being. Courts need to exercise special care when issuing dwelling exclusion orders or emergency ex parte orders of any kind, for these have the potential to elicit inordinate shame, helplessness, and a sense of injustice, which can result in child abductions or even homicidal revenge in vulnerable people (Greif & Hegar, 1993; Johnston, 1994b; Sagatun & Barrett, 1990).

### *Interactional Components of the Impasse*

**IDEALIZED IMAGES AND SHATTERED DREAMS.** At the interactional level of the impasse, disputes are broadly of two kinds: the legacy of a destructive marital relationship and the product of traumatic or ambivalent separations. In the first kind, which is well documented in the marital therapy literature, the divorce quarrels are a continuation of the marital feud, in which the spouses have deftly learned to provoke each other in a series of stereotypical, mutually destructive transactions over their years together. Perhaps the second kind is more important; it relates to the manner in which the couple came together (the courtship) and the manner in which they parted (the separation). Both these transitions, often dramatic occasions, have import for how the couple negotiate the divorce transition.

Couples who are extremely ambivalent about separation have long been recognized as among those who fail to settle their divorce. This subgroup of divorcing spouses basically hold onto idealized views of one another—romantic illusions—and are engaged in a never-ending search for ways of holding together their shattered dreams. It is hypothesized that their idealization of each other is connected to their courtship. Many first met at a highly significant time in their lives—for example, as teenagers escaping from unhappy, inattentive families; when critically ill or greatly in need of help; or when in places of danger, such as war zones. For others, this first relationship was experienced as an “earth-shattering,” highly erotic love experience. Individuals or couples with these kinds of courtship histories tend to feel they have a special mission to accomplish with each other, and that a part of their very identity has been discovered and nurtured in collaboration with each other. In leaving the marriage, they are leaving



behind significant parts of themselves, forsaking images and dreams for which they continually yearn. These couples can live neither together nor apart, so their relationship is contorted by repeated separations and unfulfilling reunions, by alternating periods of intimacy and outrage.

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Ms. S was driving a car with a boyfriend of whom she wished to rid herself, when she had a terrible accident. They were both critically injured and she felt guilty and responsible. During the weeks when she was semi-conscious and he hung between life and death, in her guilt she promised herself and God that if they survived, she would devote her life to this man. They married, and eight years later, though he had periodically abandoned her and had transmitted a venereal disease to her, she continued to cling to the marriage.

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There are special therapeutic strategies for working with couples in this kind of divorce impasse, which involve giving them insight into the meaning of their courtship, confronting them gently with the realities of their present situation, and helping them mourn the loss of their illusions. It is especially important for them to identify within themselves qualities that they thought were in the relationship or within the other, so they feel they can leave as a "whole person." Couples who have ambivalent separations can have long-standing problems with shared parenting after divorce because their need to work together on behalf of their children often triggers their smoldering passions and their reengagement. These parents need special help to establish a businesslike, rule-governed coparenting relationship in which they take care not to seduce each other; for example, they are encouraged to meet and discuss their children in a neutral public place—not over a candlelit dinner! Custody and visitation arrangements that bring the parents into frequent, intimate contact should be avoided.

TRAUMATIC SEPARATIONS AND NEGATIVE IMAGES. There are kind and humane ways to end a relationship. There are also particularly brutal and traumatic ways to part. In our society a not unusual way of leaving gently is to enter into marriage therapy with one's partner, with the ostensible purpose of trying to fix the marriage but with the unconscious knowledge that one has reached the point of no return and only wants out. After several interviews



with the family therapist, the partner who wants out declares that there is no hope for the marriage and then quietly withdraws, leaving the spouse in the care of a supportive therapist.

Contrast this to other ways of separating that are particularly unexpected and traumatic: a sudden desertion, the humiliating discovery of a lover, uncharacteristic violence, secret plotting and planning. One man took his wife to dinner for their twentieth wedding anniversary and gave her his gift: a petition for a divorce. A man returning from overseas military service at Christmas was greeted by a tape recorded message from his wife saying she'd fallen in love with another man. A grieving woman returned from her father's funeral to find that her husband had stripped the house of all their possessions and left with the children. An older man walked out for a pack of cigarettes and never came back. A young woman missed the last bus home from work and decided then and there she could never return. While recovering from emergency surgery for breast cancer, a woman was informed by her husband that he wanted a divorce.

Those who flee the marriage with no discussion or explanation often provoke desperate reactions in their mates (hysterical outbursts, physical struggles, child and possession snatching, suicidal or homicidal threats), which in turn may provoke outrageous counterreactions by the partner left behind.

In the ordinary course of events among divorces of all kinds, couples, at the time of separation, begin to do a great deal of soul searching and redefinition of themselves and their hopes and goals. They also make fairly fundamental redefinitions of their spouses. In cases of traumatic separation, there is an enormous betrayal of trust. This violation of the very cornerstone of the marriage, together with the desperate reactions and counterreactions, forms the basis for the redefinitions the spouses make of each other. The history of the marriage and the identity of the ex-spouse are negatively revised, often with the help of loyal family and friends. There is a sense of discovery as to who the ex-spouse *really* is and has been all along—that she or he is in fact “dangerous, crazy, bad, fundamentally untrustworthy.” Without corrective feedback, these new “understandings” set in motion long-term disputes over the children, as each parent now feels compelled to fight consciously and self-righteously to protect the children from the “bad, immoral, or neglectful influence” of the other. Months or years later, each ex-spouse may well have regained individual psychological



closely over time to gradually reestablish trust and a working coparental relationship—a process that typically takes from one to two years of engineering.

### *Internal Components of the Impasse*

Although the psychological state of the divorcing individuals is acknowledged as important, it is often the least-well-understood element of the divorce impasse. Consequently, it is often mismanaged by helping professionals. At first glance, the behavior of most distraught divorcing couples evokes the diagnosis of personality disorders. Indeed, psychological assessments of those who are the most entrenched in custody disputes confirm characterological difficulties: compared with the norm, these individuals lack a firm approach to problem solving, are more likely to perceive inaccurately, reason idiosyncratically, and cognitively simplify their world. Moreover, they are hypersensitive to criticism and inordinately concerned about their own needs and perspectives (Ehrenberg et al., 1996; Hoppe & Kenney, 1994; Walters et al., 1995). Further observation, however, usually identifies a high degree of external stress that is associated with the divorce and the custody dispute. Moreover, the individual's compromised functioning is often limited to difficulties in specific intimate relationships and does not necessarily disrupt other aspects of work and social life. There is some emerging evidence that those with histories of early loss and trauma, in combination with unhappy marriages and stressful separations, are more likely to have difficulty with divorce- and custody-related matters (Johnston, 1994b; McClenney et al., 1994). Accordingly, a more adequate and useful orientation begins with the premise that high-conflict divorcing parents are, to varying degrees and in special ways, psychologically vulnerable, and that a particular kind of stress or divorce crisis interacts with these vulnerabilities to provoke regression and to produce more rigid defensive styles that look like or exacerbate personality disorders.

**DIVORCE AS LOSS.** Divorce is a voluntary leave-taking and as such is usually experienced as both loss and rejection. One of the parties (rarely both at the same time) wants out of the marriage. Loss—whether of a loved one, the marriage, the intact family, cherished hopes and dreams, or the threatened loss of one's children—evokes powerful feelings of anxiety, sadness, and fear of being abandoned and alone. Rejection, on the other hand, evokes feelings of inadequacy, failure, shame, and humiliation. While these



responses are expectable, divorcing individuals differ in their capacity to manage and integrate these separation-engendered feelings.

With respect to loss, some people have difficulty acknowledging their feelings of sadness and mourning the end of the marriage. Instead, they seal over their grief with anger and try to prevent the inevitable separation by embroiling their spouse in unending disputes. Fighting and arguing are ways of maintaining contact (albeit of a negative kind), and even throughout all the fighting, these same individuals harbor reconciliation fantasies. For example, one woman disclosed that she had really wanted her husband to take her in his arms when she smashed dinnerware in the restaurant where they met to discuss their divorce settlement. Another man broke into his wife's home, violating a restraining order so he could leave her flowers.

In general, there are two main reasons for attempting to ward off loss by holding on to anger. First, many divorcing individuals have suffered a specific traumatic loss in their past (the death of a parent or sibling; the previous loss of a child by adoption, abortion, or death; the loss of the extended family through migration or political asylum). The divorce is likely to reactivate these earlier unresolved traumas, making the person fearful of letting go, in special ways.

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Mrs. S lost her first baby through a sudden, inexplicable crib death. She now wanted to be in total control of her new child's physical environment. Any slight fever or illness in the child activated overwhelming concern for the child's survival, and she would cancel the father's visits, leaving him furious. To resolve this impasse, during counseling it was important to show Mrs. S that she was trying to "prevent the unpreventable," the potential loss of this child, because she was still trying to undo the unbearable loss of her previous daughter.

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Second, other individuals may have had early childhoods that were ungratifying, unsupported, or neglectful (such as being children of alcoholic or mentally ill parents). Their trauma was so early, so pervasive, and so lacking in basic emotional resources that they failed to build any stable or autonomous sense of self. In marriage, they merged with their partners. With the divorce, these people do not experience sadness over the loss of a distinct other, as do



those with a reactivated trauma; rather, they experience panic or intense feelings of being abandoned, cut off without hope of ever being reconnected to another. They may feel insignificant, overwhelmingly helpless, and unable to survive on their own. Here is a case in point.

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"My husband left and Peter is all I have left, and now he's trying to take him too!" Mrs. R. cried. Claiming that she was "slowly dying inside, a plant without roots and water," Mrs. R. depended on 8-year-old Peter for survival. She became depressed and extremely panicky when he was not in the house and often asked him to sleep with her, much to his embarrassment. She could not permit him to spend more than one night away from her, so that visits to his father were constrained by her neediness.

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In general, such persons respond to their anxiety about separation and their terror of abandonment in three ways. First, some remain diffusely dependent and actively cling to the spouse or their child as a substitute for the spouse. To feel less helpless and more independent, these men and women are likely to need a great deal of support from friends, family, and counselors, including encouragement to reach out to others at work and at church, and perhaps to begin dating again. Second, others defend against the threat of abandonment by adopting a pseudoautonomous stance, aggressively protecting themselves and their children, refusing to capitulate to anything lest they lose part of themselves. These individuals can become negativistic and oppositional, and insist on making unilateral decisions. Basically, friends and professionals need to applaud their efforts to be independent and stand on their own, while showing them that real power and control come from knowing when and how to say "yes" as well as "no." Third, perhaps the most confusing and difficult of all, are those who alternately cling and distance themselves in abrupt contradictory shifts:

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Mrs. O demanded that her ex-spouse pick up their child from school. The following week, when he complied, she alleged that he had kidnapped the child from school. Mr. P, in turn, demanded visitation with his child in court but then failed to comply with the court order that allowed visits.

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These people appear to use the interparental struggle over their children in part to create an existential sense of purpose and meaning out of the void that threatens to engulf them when separated from their family. In other words, they seem to be attempting to stave off psychological fragmentation with the maxim "I fight, therefore I am." This third subgroup usually need therapeutic management and the stabilizing influence of an extended family or social network to protect the child from the chaos that is generated.

**DIVORCE AS HUMILIATION.** The central internal struggle inherent in high-conflict divorces and entrenched custody disputes involves a high degree of humiliation and shame engendered by the divorce and the capacity of the individual to manage those feelings without losing face or an integrated, viable sense of self. This is referred to as *narcissistic vulnerability*. Vulnerability to shame can range from mild to moderate to severe, with corresponding distinctive clinical profiles. When there is a mild degree of shame, people often seek the support of friends, family, and professionals to assuage the feelings of inadequacy and rejection inherent in a marital separation. Often they seek to have acknowledged a specific, vulnerable aspect of themselves. For example, after a miserable, lonely marriage with a poor sexual relationship, a man may seek to have his physical attractiveness and sexual prowess acknowledged through a series of brief affairs. In the same way, a woman who has felt particularly criticized about her mothering capacity may wage a custody dispute and seek the support of the judge to have herself acknowledged as the "good" or "better" parent, who does not deserve her spouse's criticism.

Other people, with more wounded self-esteem, seek to rid themselves of any vestige of blame by actively proving that the other spouse is totally "inadequate," "irresponsible," or "bad for the child." This kind of vulnerability to shame is evident when people who divorce make exaggerated claims about their own capabilities and thoroughly denigrate the ex-spouse. These more vulnerable individuals have difficulty maintaining a positive, cohesive, and realistic self-identity. It is not simply an aspect of themselves they need to have acknowledged; rather, they seek total validation. In such cases, the divorce triggers an exaggerated sense of failure, which in turn provokes intolerable feelings of great anxiety and confusion. Their fragile sense of self-esteem depends on keeping all sense of failure outside the self, in the other or in the situation. So in an effort to defend themselves and protect against intense shame, they present themselves with a self-righteous air of angry superiority and entitlement (Lewis, 1992).



They view themselves as the “good, morally superior one,” “the responsible and nurturant parent,” in stark contrast to the ex-spouse, who is viewed as “irresponsible, unavailable, and psychologically and morally inferior.”

Unfortunately, these individuals enter into mediation or the court with such an attitude of entitlement, such a refusal to own any responsibility for the problem, and with the apparent single-minded purpose of demeaning the other spouse that they tend to make quite unreasonable demands on their attorneys. They also annoy or anger the mediator or judge, who in turn may dismiss their claims or confront them in a way that furthers their humiliation and their need to project blame defensively.

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Mr. A's wife quit their marriage (and returned to live with her own family) while he was recuperating from a back injury that left him unemployed, on disability, and unsure of his future. With great bravado, Mr. A took a very condescending, critical attitude toward his wife. He went to court repeatedly to prove that she was “incompetent, unable to care for the child or to live independently.” Hence he projected his own sense of weakness onto his wife. He was further humiliated, however, when the judge publicly drew attention to his own inadequacy and called him a “vexatious litigant.” Years later, this man is still obsessed with anger and bitterness at his ex-wife and at the legal system for his public shaming.

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In cases of more extreme vulnerability, a divorcing man or woman may experience the spouse's desertion as a total, devastating attack. In defense, the abandoned partner may develop paranoid ideas of betrayal, exploitation, and conspiracy. As these spouses survey the rubble of their marriage, they begin to rewrite history and perceive their partner as having intentionally plotted and planned, from the outset, to exploit and cast them off:

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Mr. J explained, when his wife left him for another man, “I was once naive and trusting but now my eyes are opened. Her loving femininity was all a sham. She's absolutely evil and untrustworthy. When I first met her, she played a sweet, innocent, feminine, dependent child, but when no one was looking she turned diabolical. It was all an act. She had this planned all along. She took my money, my house, my son, and left me nothing! She



has everyone fooled, even the judge.” Mr. J was currently accusing his wife of child abuse.

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Feeling betrayed and weakened by the perceived assault, paranoid spouses respond aggressively with a counterattack that often becomes the central obsession in their lives. The other spouse, along with any allies, is viewed as dangerous, aggressive, and persecutory. Having been wronged, these people feel justified in seeking retaliation, or, more urgently, they believe in launching a preemptive strike—“attack before being attacked.”

If humiliation is the predominant motivation for the custody dispute, tremendous care needs to be taken by friends, family, and all professionals involved with the case to assuage the deep feeling of shame and to help the person save face and regain a viable sense of self. It is also essential not to challenge or wound that vulnerable person any further, especially in such a public arena as the court. In cases of mild vulnerability to humiliation, one can clarify and offer insight to the client (“You were angry when you were made to feel like a fool!”), whereas in more severe cases of vulnerability, this same statement will be perceived as another intolerable attack. The client’s degree of vulnerability also determines when and how to support his or her perceptions. In instances of mild vulnerability to shame, one needs to acknowledge and support the client’s strengths (“You are a good father”). In cases of greater vulnerability to humiliation, one runs the risk that support will be construed as total validation of the client’s distorted views (“You agree that I am a good father and my wife is a bad mother”). In extreme cases of vulnerability, support, to a man or woman with paranoid preoccupations, may be viewed suspiciously as a seductive trap (“You’re saying that I am a good father just to get me to agree to X”). Careful assessment of the vulnerability to shame and the extent of narcissistic injury also indicates when one needs to restrain spouses (through legal orders and police action) to protect the targets of their paranoid ideas against potentially dangerous consequences.

It is often puzzling that many people going through divorce function relatively free from serious psychological disturbance in other areas of their life. In their jobs or with friends and associates, they appear to cope adequately, think rationally, and behave in a civil manner. In the realm of their relationship with their ex-spouse, however, and especially during significant events (court dates, anniversaries, holidays), these same people can



look, think, and act in a manner that is quite emotionally and behaviorally disturbed, even psychotic. To this extent, the psychological disturbance is not clearly indicative of ongoing pathology; rather, it is situational and relational. Under such conditions, it is probable that the elements of these intrapsychic conflicts surface to varying degrees and need to be recognized and managed.

#### *Impasse Dynamics and Intervention Strategy*

The utility of an in-depth understanding of the multilevels and interlocking elements of the divorce-transition impasse is that it not only shows how to avoid compounding the problem but it also guides a strategic, focused, and minimally intrusive intervention into the family. Most difficult divorces have multiple elements of impasse that interlock, as illustrated by the following example.

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As is typical for violence-prone men, Mr. R. had serious self-esteem problems, so that he felt the rejection inherent in his marital separation as deeply humiliating. When his wife secretly planned her escape and abandoned the marriage without warning, this vulnerable man was acutely traumatized, mentally "rewrote" their marital history to reflect his sense of betrayal, and became paranoid. Meanwhile, with the support of family and attorney, his wife took action against him in court, where he was further humiliated by accusations of battering, and a court order that evicted him from his home and severely limited his contact with his children. Then he became acutely dangerous. The 4-year-old daughter became anxious about separating from her mother, was phobic about her father, and refused to visit at all. The distressed 12-year-old son fought with his mother and made an alliance with his "unjustly treated" father.

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It is apparent in a case like this that the dysfunctional family relationships that are a product of these interlocking elements of the impasse can result in parent alienation as well as emotional and behavioral symptomatology in children. Identifying the multiple levels and multiple elements of the impasse in a case such as this allows one to assess which interventions are likely to be feasible and strategic ones. For example, the psychological vulnera-



bility of the man is often the least amenable element to change. But given the systemic nature of the divorce impasse, well-focused interventions at one level can have ramifying effects elsewhere.

Protection of the wife and children in this case was, of course, the first priority. This involved providing her with emergency shelter and legal help (i.e., restraining orders and financial relief). Furthermore, in intervening, the court did not minimize, deny, or excuse the man's behavior; rather, it emphasized that domestic violence is a criminal act. However, it was also important to provide the man with a humane forum for dealing with his pain and to frame the court's intervention as a compassionate as well as a just one. This was demonstrated by the judge in his declaration from the bench:

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"Mr. R, what you have done to your wife is a criminal act under the laws of this state, regardless of what you say she did or said to provoke you, and there are consequences that the Court is bound to impose. What you did to your wife is also psychologically very harmful to your children, whether they actually witnessed the event or not. Living in a violent home is bad for children. Mr. R, I hear you when you say you love your wife and children, that you are sorry for what you did, and that you have promised not to do that again. The Court is going to help you keep that promise to yourself and your family by doing three things: first, by providing your family with protection until it can be sure that you are no longer a danger, and you can show that you are no longer a danger; second, by providing you an opportunity to manage your anger better and to solve conflict in a nonviolent way; and third, by providing you and your children a safe place to visit together, where they will not be afraid, and you will be given an opportunity to show that you have a loving relationship with your son and daughter."

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This way of framing the court intervention set the stage for the long-term intervention this man and his family desperately needed.

In sum, when the community is less confrontational and more supportive, and takes care not to un hinge a parent's vulnerable defenses, that parent will feel less humiliated, less afraid of loss, and more able to let go of the fight and the marriage. With careful intervention, a badly injured parent then has less need to seek revenge or to cling to the child or children for protection and refuge.



Underneath all the anger and bitterness of high-conflict divorce lie disillusionment and shame; deeper still lie sadness and loss. What are needed are more compassionate understanding, better therapeutic skills, and more humane institutional policies and legal procedures to provide divorcing couples and their children with access to their deeply buried feelings or, at the very least, prevent further infliction of emotional wounds that will not heal. The divorcing process within an adversarial legal system too often becomes a ceremony of degradation and shame. The challenge is to provide alternative forums—responsive to the diversity of families in our communities—that can promote mutual respect and help parents make a solemn redefinition of their rights and a serious commitment to their responsibilities within the postdivorce family. Within these forums, it then becomes possible to go beyond the legal rights of the adults involved to give a voice to the needs of those who have none—the children.



## Chapter 2

### Domestic Violence and Parent-Child Relationships in Families Disputing Custody

The purpose of this chapter is to help parents and mental health and legal professionals understand that domestic violence includes a range of patterns. Within each type, the balance of power between the spouses, the sources of the violence, the frequency and extent of abuse, and the parent-child relationships that result are different. This understanding can lead to more informed decision making about the care and custody of children who live in families where domestic violence has occurred. Domestic violence is defined here as the use of physical restraint, force, or threats of force by one parent to compel the other parent to do something against his or her will. It includes assault (pushing, slapping, choking, hitting, biting, etc.), use of or threat to use a weapon, sexual assault, unlawful entry, destruction of property, infliction of physical injury, suicide, and murder. It also includes psychological intimidation and control, which may be maintained through such means as stalking, threats to hurt children or others, violence against pets, or destruction of property. Although emotional abuse (the range of psychologically damaging acts inflicted within relationships) is often more pervasive and possibly more psychologically damaging than physical abuse, it is not included in this definition. This analysis is limited to situations of physical violence, as defined, with the



awareness that emotional abuse usually precedes, accompanies, and follows the cessation of physically violent incidents.

During the past several decades, an ongoing debate about which conditions precipitate or compound domestic violence has raged alongside the increasing social awareness of the magnitude of the problem. Psychodynamic theorists have speculated about psychological motivations within the abuser to act violently and have noted pathological needs within the victim to accept the abuse. Early theorists, for instance, argued about whether women are "normally" masochistic and therefore inclined to remain in abusive relationships (Deutsch, 1945; Horney, 1967). More recent psychodynamic and object-relations theories tend to interpret violence and victimization as evidence of personality disorders, especially borderline and sociopathic conditions, which have largely developed as a consequence of abusive childhood experiences (Gilman, 1980; McCord, 1988).

Social cognitive researchers attribute aggressive behavior to perceptual distortions and attributional biases (Dodge et al., 1990). Biological studies identify brain dysfunctions, hormonal irregularities or excesses, and the chemical effects of drugs and alcohol to explain violence (Bushman & Cooper, 1990; Lewis et al., 1989; Silver & Yudofsky, 1987). Family theorists view the problem from a systemic perspective and see violence as the product of the interaction between the spouses and children—in essence, a family affair (Dell, 1989; Giles-Sims, 1983). They suggest that there is a kind of circular causality in which violence can be provoked by the victim, and that mutual abuse occurs.

Most feminists advocates view domestic violence, and the failure of social institutions to respond to it, as an extension of the economic and political power disparity between men and women in the larger society. They advance socioeconomic explanations that stress the manner in which men are socialized to wield power and women to submit (Dobash & Dobash, 1979; Grillo, 1991; Lerman, 1984; Martin, 1987). Women's advocates object to explanations that interpret the victim's behavior as evidence of prior pathology rather than as the result of being abused (Walker, 1984). They also argue that focusing on the psychological motivations of the perpetrator allows men to rationalize and excuse their violence. Furthermore, feminists state that the idea of "mutual battering" implied by family therapists amounts to "blaming the victim," or at least creates prejudice against her because of her attempts to defend herself or to control an abusive situation (Berk et al., 1983).



certain separation and divorce experiences, can precipitate aggression in both men and women who would not otherwise be violent.

Five basic types of interparental violence among divorcing families disputing custody can be identified according to the source of the violence, using this three-factor schema. (See Johnston and Campbell, 1993a and 1993b, for further details about theoretical possibilities and empirical findings.) The five types are (1) *ongoing/episodic male battering*, (2) *female-initiated violence*, (3) *male-controlling interactive violence*, (4) *separation-engendered or post-divorce trauma*, and (5) *psychotic and paranoid reactions*.

These five types of violence were identified in two qualitative studies of a total of 140 custody-disputing couples with 175 children, referred to different agencies from the San Francisco Bay Area Family Courts, who were diverse in socioeconomic and ethnic status (Johnston & Campbell, 1993a, b). In all cases, both disputing parents were interviewed separately to obtain details of violent incidents between them in the context of the history of their relationship and the custody dispute. Generally they described the first, worst, and last incident. They also completed the Conflict Tactics Scale (CTS) (Straus, 1979), which measures the frequency with which each spouse perpetrated specific acts of physical aggression. Reports on these measures indicated that three fourths of these separating/divorced couples had a history of physical aggression. On average, 26% had never been violent; 10% reported *low violence* (threw or smashed objects, and pushed, grabbed, or shoved the other spouse); 23% reported *moderate violence* (slapped, kicked, bit, or hit the other); and 41% admitted to *high violence* (beating up the other and threats of or actual use of a weapon).

The qualitative data describing the violent incidents within each couple's relationship were used to classify the primary instigator of physical aggression according to one of the major profiles in the typology described above. At least two clinicians made consensual judgments about the assignment of each family to a category. Each profile of violence was then completed by describing the typical precursor or buildup to the violent episode, the spouse who initiated the physical attack, the reaction of the victim(s), the severity and frequency of abuse, the amount of restraint exercised by the parties, and the extent to which the perpetrator accepted responsibility for his or her behavior. In addition, the balance of power between males and females was assessed, and the interactional styles of the spouses that either precipitated or resulted from the violence were described.

Before describing the different profiles of violence and parent-child rela-



tionships within each type, a caution: These studies were preliminary and exploratory; the results reported below are largely based on clinical inference, not on tests of statistical significance (Johnston & Campbell, 1993a, b). On the other hand, another researcher (Hanks, 1992), working with maritally violent couples, derived a very similar typology quite independently of the one we have developed, hence contributing to its validity.

#### PROFILE 1: ONGOING/EPISODIC MALE BATTERING

This category most closely resembles the battering spouse/battered wife syndrome, which has been well described in the literature (e.g., Walker, 1984). In these cases violence seems to originate from two sources—intolerable tension states within the man and his chauvinistic attitudes. These men are almost always the initiators of the attack, which had everything to do with their low tolerance for frustration, their problems with impulse control, and their angry, possessive, or jealous reactions to any perceived threat to their potency, masculinity, and “proprietary male rights.” In our studies, drug and alcohol abuse by these men was a major precipitant and compounded the violence in about half the cases. The women who are victims of this type of chronic battering do not generally provoke, initiate, or escalate the physical abuse, at least not intentionally, and indeed they often do not know when the next attack might occur. Some women, however, are at times caught up in the fight and try to defend themselves.

The attacks in this category are the most frightening and severe, rising to dangerous, life-threatening levels. The batterer shows little or no restraint: he can beat or pummel the woman with a closed fist, throw her about, threaten with or use a weapon, while at the same time verbally demeaning and abusing her. His aim seems to be to inflict hurt and relieve tension as much as it is to control. These men are prone to blatantly deny or minimize violent incidents or project the blame onto the victim woman. For many, abuse begins in the courtship or during the wife’s pregnancy and continues to be episodic or ongoing throughout the couple’s marriage. Alternatively, the abusive man can so terrorize a woman with one acute incident early in the relationship that he maintains ongoing control of her through threat of its recurrence.

Being highly vulnerable to humiliation and often very dependent upon the women they abuse, these men generally increase the intensity of the violence at the threat of separation. If the separation is sudden or traumatic,



it is not uncommon for the man to stalk the woman, to alternately terrorize her with ominous threats and plead with her to return. In extreme cases, there are threats or attempts at murder or suicide. While most of these men, over time, are able to emotionally disengage, some remain obsessed with the woman who left them. In general, the potential for violence remains high long after the actual separation.

The psychological profiles of batterers indicate that these men tend to be insecure, hypersensitive to others' opinions, and vulnerable to poor self-esteem. Their bullying and aggressive posturings are attempts to compensate for feelings of emotional dependency and inadequacy. They have low thresholds of stress tolerance and respond to everyday hassles with eruptions of anger and blame toward their wives and children, which quickly turn into physical abuse. In addition, they tend to have traditional male chauvinistic attitudes and an exaggerated concept of their own masculinity, for which they need and demand acknowledgment and reassurance. Their neediness quickly turns into uncontrollable jealousy and demands that can result in marital rape.

In terms of the power dynamics in the couple, the women are intimidated and cowed both physically and psychologically by the men, who use the threat of violence to control and dominate them. If the women have remained in the abusive relationship for many years, they usually present as fearful and chronically depressed, with low self-esteem. Uncertain about themselves, they often seem hypersuggestible, submissive, and overly dependent upon their husbands and others, and tend to construe the situation so as to blame themselves for their abuse. These women often deny or diminish the extent to which they are in mortal danger from their former spouses and will not take measures to protect themselves, or their children, without a great deal of support and help from others.

However, in our studies, not all the women from episodic or ongoing battering relationships suffered from the "battered wife syndrome." A subgroup of women in this category of violence did not tolerate the abuse. Instead, they left the marital relationship early, soon after the abuse was first manifest. These were assertive women with high self-esteem and good reality testing.

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Mrs. A left the marital home precipitously after a friend gave her the encouragement to rouse herself from her depression and end her marriage to



a violent, jealous, controlling, and dependent husband. Pregnancy had precipitated this marriage between teenagers; afterward, the young woman worked as the principal financial provider for the family. Her husband contributed to their support by occasional drug dealing. Although Mr. A had liaisons with other women, he jealously guarded his wife's fidelity, even following her when she shopped or went to work. During counseling, Mrs. A recounted numerous instances when, after drinking, he bullied or beat her, destroyed furniture, and trashed the home, ostensibly because of her "failures" as a wife or mother. The police were called several times to disarm him and quell his violence. Mr. A vaguely dismissed the idea that he was abusive. In response to his wife's desertion, this man was distraught and alternated childlike pleas for her to return with bribes of expensive presents, promises that he would change, and ominous threats of murder and suicide if she did not comply with his wishes. His plan to take his wife hostage at her workplace was intercepted when he was arrested for carrying a gun.

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### *Parent-Child Relationships*

In families classified in the episodic or ongoing male battering category, younger daughters (under 7 or 8 years) are typically very passive and constricted children, with a high degree of underlying fearfulness and insecurity in relation to both parents. Younger girls especially feel unprotected by the mother; some have difficulty separating from the mother and react to separations with whiny, regressed behavior. They can have repressed or intrusive memories of violent incidents, which are the basis for their realistic fears and phobic avoidance of the father. At the same time, many of these fathers intermittently lavish attention on their daughters. At other times they remain preoccupied with their own needs. These unpredictable shifts in mood and availability can result in a great deal of confusion for the child. Many of these girls seem to have a double image of the father, viewing him both as a loving suitor and as a scary, dangerous man. In general, these men, especially substance abusers, have poor boundaries with their daughters, which involve reciprocal seductiveness and provocation of the father's aggression. These fathers need validation of their masculinity and attractiveness; they pull for this affirmation from their little daughters, who become watchful and oriented toward attempting to manage the father's equilibrium and anger.



Older girls (8 to 14 years) are more prone to angrily reject, avoid, or take a stand against the violent father and align with the mother. Some of them feel it is their job to take care of the mother by directly or indirectly managing the father. At the same time, older girls may become upset with the mother for tolerating the victim role and sometimes focus their irritation and anger upon her. Many of these mothers are too oppressed and depressed to be sufficiently emotionally available and supportive of their daughters.

Younger boys are typically difficult, oppositional, and aggressive; they are sometimes manipulative and controlling, especially with the mother. At the same time, they can become confused and anxious when fragmented memories of abusive incidents surface, and they worry about the mother's safety. Older, early-adolescent boys in this category typically explode in rageful attacks on the mother (reminiscent of those they witnessed in the father). The mothers, in response, are often passive and ineffectual, unable to control these growing boys. These women almost invariably end up becoming submissive to their aggressive sons, as they have been to their abusive husbands. The less conscious wish of these boys is for a close relationship with the mother, but they fear becoming like the mother—passive, weak, and victimized, all of which they equate with being feminine.

Both the younger and older boys are typically afraid of the father and constricted and obedient in his presence; at the same time, they are attracted to him because of his power. The violent father is often preoccupied with his own needs and inconsistently available to his son. These fathers tend to give contradictory messages about aggression to their sons. They may, for example, punish the boy's aggressiveness in an abusive manner, so that the father's verbal expectations belie the behavior he models. Boys who experience this treatment can long for the father's approval; they are fearful of being shamed by him and are covertly angry with him.

Children, both boys and girls, who have little or no contact with the violent father tend to repress their memories of violent incidents and to idealize him. They long for contact with him and blame themselves or the mother for his absence. Their behavior is often difficult and aggressive, which suggests a strong identification with the father, who, in these cases, is both the aggressor and the lost love object. In our studies, where a few violent fathers had major child care responsibilities, the father's low tolerance for stress, his need to assert power and control, and his hypersensitiv-



ity to slights resulted in episodic deterioration of the father-child relationship and the possibility of child abuse.

## PROFILE 2: FEMALE-INITIATED VIOLENCE

In this category, the women *always* initiate the physical attack. This seems to result from their own intolerable internal states of tension and stress. Typically, these women become furiously angry, even hysterical, in response to the spouse's passivity or failure to provide for them in some way. They will nag, badger, and eventually throw objects at or pummel the husband in the hope of provoking some action that will result in having their expectations met and gratifying their needs. In the early stages of their relationship, the husband often tries to prevent or contain the fight, passively fending off the wife or holding her in check. These explosive temper outbursts by the woman are repetitive during the marriage and often become more intense at the time of separation and afterward. This is especially so if the woman feels she is not getting what is rightfully hers (with respect to a financial settlement, custody of the children, etc.). In some cases, the man loses control at some point and no longer seeks to placate or prevent the outbursts, especially during the separation period, and eventually responds in kind to the woman's attacks. The fallout from these physical exchanges is not minor; the majority escalate to high levels of severe violence.

In these types of relationships, however, the power dynamics remain more balanced. On the one hand, the women are active, demanding, and emotionally intimidating to their husbands; on the other hand, when really provoked, the men can exert greater physical control. The wives in these cases are assertive, willful women who neither look nor describe themselves as fearful. We found that substance abuse by the women compounded the problem in a significant minority of cases. Few of these women do much physical damage with their violence: broken cups, torn clothing, scratched faces are common. However, in some cases the woman can use a weapon such as ramming her car into her spouse's car or threatening him with a knife or a gun. Interestingly, these women generally admit their violent acts but blame the frustrating behavior of their partners.

The men are characteristically passive-aggressive, sometimes depressed, often obsessive and intellectualizing. They are sometimes too inhibited to act or communicate clearly with their wives. Indeed, many of these men



are frightened of their wife's violence and extremely distressed and ashamed about being pulled into the fight and provoked into aggression. Some men who find it difficult to be directly angry themselves seem to gain considerable vicarious gratification from the partner's anger.

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Mrs. B was an emotionally volatile, dependent woman married to a staid, intellectualizing professor. Initially, Dr. B adored her and left a previous wife and children to live with her. Mrs. B's dramatic emotional outbursts somehow gratified him and complemented his rational, obsessive style. However, when he became absorbed in his work or spent time with his children, she would become resentful and demanding. Dr. B would passively avoid her demands, and her rages would escalate to the point where she would throw objects, destroy his possessions, or lunge at him, scratching his face or breaking his eyeglasses. He would fend her off in self-protection or restrain her until she calmed. Mrs. B had a blatant affair, which finally ruptured the marriage. After the separation, this man's passive aggressiveness was expressed through custody litigation and financial withholding. In a fury one night, she sideswiped his car.

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#### *Parent-Child Relationships*

These women's relationships with their children are erratic and unpredictable: alternately very loving and nurturing, and then explosive, angry, and rejecting, especially with their sons. Both boys and girls can be emotionally paralyzed by the mother's angry attacks. Typically, the young girls become timid and cringing, and withdraw in order not to be the object of the mother's wrath. Alternately, some girls assume a role reversal in the face of the mother's emotional tirades, taking care of her or temporarily assuming parenting and household tasks. This strategy often works more effectively to protect the girls from the mother's rages than the boys. The girls also tend to be supported by a warmer, more protective relationship with the father, who covertly indulges and idealizes them as the "good girl," in contrast to his view of his wife. As these girls grow older, they are likely to become more demanding, have temper outbursts, and get into power struggles with both parents, suggesting an identification with the aggressive female adult.

By contrast, boys in these families evidence a more passive-aggressive



stance; a layer of sadness, inhibition, and depression suppresses their rage at the mother. In general, the boys engage in overt power struggles with the mother and are more openly abusive of her only to the extent that the father models this kind of counterreaction. The younger, preschool boys have more ambivalent relationships with their capricious mothers and seem unable to separate emotionally. They are simultaneously needy of her intermittent nurturance, covertly angry in response to her punitiveness and unavailability, and fearful of her anger and rejection if they act independently of her wishes. To the extent that fathers are passive and themselves intimidated by their ex-wives, they can neither easily protect nor rescue their sons, especially the younger ones, from the ambivalent mother-son bond; nor are they able to provide an effective model for dealing with the mother.

### PROFILE 3: MALE-CONTROLLING INTERACTIVE VIOLENCE

In this category, the domestic violence is seen as arising primarily out of a conflict of interest or disagreement between the spouses, which escalates from mutual verbal provocation and insults into physical struggles. Although the man or the woman might initiate the physical aggression, the overriding response by the man is to assert control and prevail by physically dominating and overpowering the woman. The exercise of physical control is seen as legitimate by the male: he feels he had the right, if not the duty, to put the woman in her place and to manage the situation in this way. Physical aggression is an accepted way of resolving interpersonal conflict and of doing everyday business, and in this sense it is often rule-governed (i.e., the perpetrators are explicit about what are, to them, acceptable and unacceptable ways of hitting; for example, one should not attack from behind; one should look where one hits; hitting is OK in response to certain kinds of verbal abuse).

These men do not beat up their spouse and in general do not use more force than needed to gain her compliance. In this respect, the man exercises varying amounts of restraint in his violence, depending upon how much she resists his efforts to control. In our studies, alcohol use, but not necessarily its abuse, by either or both partners was a feature in slightly less than half of these cases. When alcohol was involved, the violence tended to be more severe and the memory of the incident clouded.



ingly angry, and the physical abuse would escalate to acutely dangerous levels, where she was at great risk.

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### *Parent-Child Relationships*

Because male-controlling abuse often coexists with female violence, the children in this category show mixed reactions, with predominant responses being aggressiveness and passive-aggressiveness in both boys and girls. Because violence is seen as acceptable in these families, both parents are poor models of ego control and anger management. Parents model fighting and arguing, rather than reasoning, as a means of settling disputes. Hence the children are caught between two warring figures, neither of whom can consistently control his or her own temper, set and enforce reasonable limits, provide clear direction, or take responsibility with the other or with the children. Nor are parents able to support each other's position with the children; rather, they tend to openly sabotage each other's authority. Inconsistent family rules, contradictory messages, unreliable discipline, and tension characterize these families. It is therefore not surprising that there is a great deal of factioning among the family members, and that the children's alliances keep shifting from one parent to the other. Power struggles and mutual coercion between parents and children are common. Physically punitive child rearing practices and physical fights between siblings are common.

These children develop an array of relationships with their parents. Some of the girls are assertive, strong-willed, and demanding, ready to jump into the vacuum left by the shifting power structure; other girls can passively retreat or become covertly defiant. Over time, they may switch back and forth from a passive to an aggressive stance. The younger boys are difficult to discipline and control—there is an element of excitement about their minor delinquencies that has a counterphobic flavor. Older boys tend to show little respect for authority. Some become belligerent and disobedient, refusing to listen to either parent, particularly the mother. Fathers often have peerlike relationships with their sons, especially as they grow older. These boys enjoy a kind of “we’re men together” camaraderie that increases their self-esteem but also gives them permission to use aggression and coercion to get what they want, especially from their mothers and sisters. Fathers are inclined to admire their son's toughness and acting-out. Some of the mothers also foster the son's acting-out, as the son replaces the



father around the house. The men tend to be more controlling and punitive with their daughters, as compared with their sons, and mothers have problems managing both their boys and their girls.

#### PROFILE 4: SEPARATION-ENGENDERED AND POSTDIVORCE TRAUMA

In general, this group is marked by uncharacteristic acts of violence, which are precipitated by the separation or are reactions to stressful postdivorce events (e.g., custody litigation and disputes over money and access to children that occur in the aftermath of the final decree). In these cases, violence and the exercise of control occur only during or after the separation period but are not present within the marriage itself.

For some spouses, separation is particularly traumatic, a complete assault on their universe (e.g., the discovery of a new lover in bed with one's spouse or a sudden desertion). In response, they feel desperate, helpless, abandoned, and outraged. Threatened by intolerable loss, they try to hold on to and physically prevent the other from leaving, or scare the other into staying. These incidents usually involve a sudden lashing out (slapping the other across the face), throwing something, or destroying property (a cherished keepsake or heirloom). Some women take desperate steps such as ramming the spouse's car, cutting up his clothes, and throwing his furniture into the street. Some men physically restrain their wives from leaving. Times at which either spouse might be particularly vulnerable are events having symbolic meaning (the final settlement, the loss of the house, changes in custody, seeing the ex-spouse with a new partner) or special times of the year (anniversaries and holidays).

Usually, the partner who feels abandoned is the one who becomes violent; this can be either the man or the woman. When this happens, the victim partner is shocked and frightened by the uncharacteristic violent behavior of the mate, feeling that the other has "gone crazy." This unexpected violence and the counterreactions form the basis for the spouses to negatively reconstruct their earlier perceptions of each other, casting a long shadow over the postdivorce relationship of these couples; that is, a new negative image of each spouse is crystallized out of these desperate behaviors and has enormous significance in limiting the partners' trust and willingness to cooperate in the future with respect to their children.

In this category, the violence is not ongoing or repetitive. In fact, it is



clinging, and somatic symptoms (such as headaches or stomachaches). Occasionally a child may show a temporary phobic avoidance of the parent who is perceived to be violent.

In our studies we noted that mothers were likely to be more warmly supportive of their daughters and fathers of their sons in these cases of traumatic separation. In most respects, however, the diminished parenting is likely to be limited to the time of separation or postdivorce trauma, when parents are more vulnerable and violence is most likely to occur. In general, these parents expect and model good ego control and anger management. There is a good prognosis for reconstituting positive parent-child relationships in these cases, often with the help of therapy to resolve the anxieties and fears created by the traumatic events.

#### PROFILE 5: PSYCHOTIC AND PARANOID REACTIONS

For a very small proportion of custody-disputing families, violence is generated by disordered thinking and serious distortions of reality that involve paranoid conspiracy theories. For some, this is part of a psychosis; for others, it is a drug-induced dementia. In all such cases, the separation itself triggers an acute phase of danger.

The men and women in this category believe that the former spouse intends to and can harm or exploit them. Disturbed spouses perceive the ex-spouse as an aggressive, persecutory figure and see the ex-spouse's actions in the separation and the request for custody as deeply humiliating attacks. Hence they have an urgent need to counter the perceived hostility, danger, and victimization they anticipate from the ex-mate. Expecting trickery and deceit, they have a policy of attacking before being attacked. Feeling wronged, they feel justified in seeking revenge. There is little conscious shame in their assaultive behavior, and they can violate the ex-spouse while simultaneously maintaining a sense of righteousness. In their own view, they are forced to protect themselves from the other's malevolence.

In these cases, as with ongoing battering, there is little buildup to an attack within the relationship, nor does the victim (consciously) provoke it. The level of violence during these episodes ranges from moderate to severe. However, these persons are most frightening because they are so unpredictable. Paranoids who have organized, logical, and coherent delusional systems tend to hide their conspiracy theories, so that no one knows what they are thinking. Others, who are rambling, incoherent, and more



are caught up in the parent's psychotic delusions (i.e., in a folie à deux with the parent), in contrast to being psychologically separated from the disturbed parent. If enmeshed with the parent, youngsters are likely to present as psychotic-like children who are strongly identified with the disturbed parent's distorted thinking and emotional state. If psychologically more separated, they appear like children who have been acutely or chronically traumatized (as with the separation trauma or battering categories).

#### IMPLICATIONS FOR INTERVENTION AND CUSTODY DECISION MAKING

The patterns described above suggest that the propensity for domestic violence derives from multiple sources and follows different patterns in different families, rather than being a syndrome with a single underlying cause. This being the case, there is a need for differential clinical diagnosis of the violent incidents *within the context* of the marital relationship and the divorce process. In counseling settings, the history of actual incidents needs to be elicited separately from each party. Such a history should include the precipitating factors, who initiates violence and who responds with violence, the frequency and severity of abuse and its patterns over time, and the emotional and physical sequelae for both victim and perpetrator.

The use of mediation with domestic violence cases has been a hotly debated topic (Germane et al., 1985; Girdner, 1990; Grillo, 1991; Lerman, 1984; Newman et al., 1995). Initial screening measures could help discriminate among various types of violence and suggest for whom and what kind of mediation may be appropriate. First and foremost, battering men and psychotic-paranoid persons are primarily unsuited for confidential mediation. Mediation can be dangerous because these clients can hide behind the confidentiality of the process and manipulate, control, and even terrorize the other parties, including the mediator, to achieve their own ends. Moreover, unless it suits the batterer's own purposes, agreements made in such a forum are unlikely to be accorded any respect. Instead, the victims need the authority and protection of the court.

With the other profiles of violence, mediation and family counseling methods need to be adapted to ensure physical safety, rebuild trust, and seek a balance of power between the divorcing parties (Duryee, 1995; Magana & Taylor, 1993). First, there needs to be a clear understanding that the clients' rights to confidentiality in mediation/counseling will be waived



without consent of the parties if there are further threats or violent incidents (i.e., the court will be informed). In addition, enforceable stay-away or restraining orders need to be in place. The victim may need a support person to guide her through the process. Separate mediation and counseling sessions can be used to develop custody and access plans. Courthouse security and escort services to ensure safety on the premises should be provided. Referrals to community services for ongoing help and support of the family members can be made available.

Other factors being equal, sole or joint residential arrangements for children are contraindicated with a father who has engaged in ongoing or episodic battering, as they are with any parent who is psychotic or has paranoid delusions. In fact, in these cases visitation with the violent parent may need to be supervised or even suspended, especially if the threat of violence is current or ongoing. Children of these violent parents can be re-traumatized if compelled to visit against their wishes. They often need treatment for posttraumatic symptoms of stress that are a consequence of their exposure as witness to chronic abuse, before they can reengage (Pynoos & Eth, 1986).

Resumption of unsupervised visits should be contingent upon the abusive parent's complete cessation of violence and threats of abuse, as well as his or her successful completion of a program designed for batterers and/or appropriate psychiatric or substance abuse treatment. Unsupervised visits should be structured according to what makes the child feel safe, and they should be governed by extremely explicit court orders with respect to dates, times, and places of transfer that can be easily interpreted by police officers and the court. The exchange of the child may need to be supervised by a neutral third party. Restraining orders need to be in place that will make the victim parent feel safer, even long after the cessation of abuse. The court needs to act swiftly and forcefully in response to any contempt of these orders.

Furthermore, tremendous care needs to be taken so as not to jeopardize the victim parent's safety as a consequence of the children's access plan. It is important to note, however, that spouses who have left a battering relationship or a psychotically disturbed mate are likely to have diminished capacity to parent as a function of their victimization, and they may need considerable help and support in reestablishing their competence with their children. This may include professional counseling or peer group support for their parenting (Walker & Edwall, 1987).



When a violent parent is believed to be psychotically disturbed, a psychiatric evaluation is needed and should include a risk assessment for homicide and suicide. This evaluation may need to include both parents and children so as not to exacerbate the disturbed parent's paranoid concerns. When a child shares the paranoid delusions of the psychotic custodial parent, custody may need to be removed from that parent within the protective confines of a psychiatric treatment facility to prevent dangerous acting-out.

A careful assessment of the parenting capacity of a woman who typically initiates violence is needed before placing children primarily in her care. It may be that her mate is a more appropriate residential parent. Unfortunately, many of these fathers are too passive and unavailable; they need much encouragement if they are to take primary responsibility and protect their children from the mother's volatile behavior. A psychological evaluation of these women may be needed with a special focus on their parenting practices. Custodial mothers in this category may need to be cautioned that their volatile behavior, which results in abusing, neglecting, or frightening their children, might also result in a change of custody to the father. Women can be offered counseling; unfortunately, as of this date, few group programs are designed specifically for abusive women.

A variety of time-sharing arrangements can be appropriate in the remainder of categories. However, in cases of male-controlling interactive abuse, fathers especially, and sometimes both parents, need education in parenting skills to manage their children assertively and flexibly, without resorting to coercion and physical altercations. If there is no current threat of violence, unsupervised visits may be appropriate, provided that their terms are explicitly stated in court orders with respect to dates, times, and places of exchange. It is important that clear, structured arrangements for transferring children from one home to the other be provided to preempt power struggles between these parents that might erupt into physical fights. A neutral exchange venue that is comfortable for the child, or supervision of the transfer, may be best.

The best prognosis for a shared parenting arrangement, in general, lies with those family situations where there has been no history of physical abuse within the marriage. Parents who have experienced acute incidents of violence only around the time of their separation or during the divorce process are the most likely to be able to reconstitute their coparenting capacities, provided they are given time and, often, therapeutic help to resolve the anxieties and fears created by the traumatic events. Brief,



### Chapter 3

## The Prism and the Prison of the Child

### How Children Defend and Cope

The family environment of highly conflicted, separated spouses or partners is typified by their mutual distrust, fear, anger, bitterness, and projection of blame onto the other, the ex-partner. The shadow of past domestic violence and the threat of its recurrence are common. As shown in chapters 1 and 2, there are internal psychological and interactional family dynamics as well as external-social explanations for how and why former lovers reconstrue each other's identity in this polarized, negative light. Of course, in some cases these negative views will have a basis in the facts of a spouse's violent, neglectful, substance abusing, or criminal behavior. Moreover, these may have been dysfunctional families long before the couples separated, in which the children were subjected to ongoing marital conflict and erratic or emotionally abusive care by their personality-disordered parents.

More commonly, however, these extremely negative views are an exaggerated response to the humiliation of rejection inherent in the divorce and the individual's defensive need to project all sense of failure and badness onto the ex-spouse. Alternatively, such negative views may derive from a traumatic separation experience that has shattered the couple's previous sense of mutual trust and shared reality. Or they may have been wittingly or unwittingly constructed and confirmed by others in a social world now



split by new partners, kin, and professionals, whose colliding agendas escalate and entrench the polarized positions. The adversarial legal system provides a particularly fertile environment for these unrealistic perceptions, fostering the projection of blame and entrenching the disputes by reframing facts and sharply focusing on who is right, competent, and good, and who is wrong, incompetent, and bad.

Whatever the origin of their highly negative views, the consequence is that these parents provide a frightening, fragmented, contradictory, and profoundly confusing family experience for their children. In this chapter, we consider this experience from the perspective of the children, describing their typical concerns and attempts to manage.

#### PARENT-CHILD RELATIONSHIPS WITHIN A RANGE OF VULNERABILITY

Unfortunately, ongoing postdivorce conflict and litigation erode whatever potential these divorcing spouses do have for effective parenting. Parents who are moderately humiliated (narcissistically wounded) by the divorce, and those who have experienced traumatic separations, tend to develop more or less fixed beliefs (confirmed by their social world) that the other parent is "bad, dangerous, and irresponsible," and that they, by contrast, are the "good, safe, and responsible" caretaker. It is not surprising, then, that both parents are likely to selectively perceive and distort the child's concerns regarding the other parent. Indeed, it is common for the couple's expressed disappointments with each other to be mirrored in their concerns for how the other parent will treat the child. For example, if a woman has experienced her ex-spouse as emotionally neglectful, she expects him to be neglectful of her child. If the child then comes back upset or depressed after spending time with his dad, the mother attributes the difficulty solely to the father's lack of care. At the same time, other, more positive aspects of the father-child relationship are ignored or denied (i.e., the fact that this father and child have a lot of fun together and that the child feels a painful loss each time they part). In responding sympathetically to her child on his return home, the mother incorrectly interprets and then amplifies the child's sadness and anxiety. As a result, the child's emerging reality testing about his own feelings and ideas are ever so slightly and insidiously distorted. Furthermore, the mother's own anxiety and distress about her child's sadness are intensified because she is not able to communicate and



clarify with her ex-husband about why the child might be upset. She is left feeling helpless about protecting her child.

In other words, vulnerable parents can overidentify with elements of the child's own emotional response, when it reminds them of their own experience with the ex-spouse, and ignore or deny other aspects of the child's experience that are contrary to their own. Anxiety between the distressed parent and child over certain issues is shared and amplified and is usually triggered by symbolic actions of the ex-spouse or symptomatic behavior in the child. An illustration:

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In the G family, the parents endured years of bitter, silent anger before the separation. As the father had increasingly failed in his professional life, the mother unwillingly assumed the role of provider. This dynamic was a formula for the man's shame and the woman's resentment. When the mother took their children, a boy and a girl, to another state to find work closer to her family of origin, the father experienced the loss of his children as another insult. The following year, the children returned to spend the summer with their father. When it was time for them to go back to their mother, the father refused to release his son. He explained his refusal to us in the following way: "I was standing in the backyard with Carl [the son] when we heard his mother's footsteps coming up the path, and I saw a look in my son's eyes that I knew so well. I guess, looking back, I always knew it was there. . . . He looked terrified! . . . like she would flatten him . . . castrate him . . . run over him like a steamroller, because she's always hated men. He could never feel safe being a boy, growing up around her. I ask him . . . not directly, of course, but just, you know, 'Is Mom yelling a lot? Is she picking on you more than your sister?' At first he used to just shrug, but he's starting to tell me more and more!"

The insidious consequence of this projection is that Carl experiences his father's empathic attunement most fully when he shares in this distorted perception of his mother. Integrity, reality testing, and even the child's emerging sense of morality are sacrificed, in these accumulating moments, to the child's hunger for the parent's empathy.

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Eight-year-old Becky was delivered home late by her noncustodial mother after a most exciting visit, during which she didn't want to stop to eat. She



felt apprehensive about coming home late and guilty for having enjoyed herself hugely. As she entered the door of her father's home, the stepmother's fuming turned to fury when she found out the child had not been fed her dinner. Anxious to placate her stepmother and redirect the mounting fear of her anger, Becky cried that she had "begged" her mother to feed her but her mother "couldn't be bothered." What is more, she complained that she had spent a "horrible" day with her mother. Immediately, her stepmother quieted down; she soothed and fed the fretting child, agreeing that the mother had been "outrageously neglectful!"

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When parents feel severely humiliated by the divorce (have greater narcissistic vulnerability), one spouse may experience the other's rejection, custody demands, or accusations as a total, devastating attack, and, in defense, may develop paranoid ideas of betrayal, conspiracy, and exploitation. In these more extreme cases, the ex-spouse and his or her allies are perceived as dangerous, aggressive, and persecutory figures.

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As Mr. J began to piece together the rubble from his marriage, he began to rewrite history and to perceive his partner as having intentionally plotted and planned to exploit and cast him off: "I gave her everything . . . backed her up with every penny, and she took it all until there was nothing left and then spit me out like a piece of deadweight. She and her boyfriend set me up. Now, he's living in my house and abusing my child!"

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In cases such as these, where the divorce represents a severe injury to self-esteem, parents have a more generalized inability to appreciate (or mirror) the child's experience of the other parent. They are intermittently depriving or punishing the child, if he or she is perceived to have defected to the other parent. Severely narcissistically injured parents cannot accurately enter into or reflect the child's unique experience of the other parent because of their own intense pain and the defensive need to view themselves as "all good" and the ex-spouse as "all bad" or even persecutory. These parents expect and need the child to reflect their own polarized negative views. Indeed, it is not uncommon for them to harbor distorted or exaggerated convictions





that their child is being emotionally or physically abused by the other parent or his associates.

These parents are likely to place the child intermittently in an untenable double bind, such that to please or gratify one parent will displease and hurt the other. Any spontaneous, autonomous expressions of the child's feelings or needs tend to be ignored, denied, or experienced as a burdensome demand, or as a pernicious attack upon the parent, especially if these feelings and needs seem to be related to the phobic object, the other parent.

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When 5-year-old Sally expressed a wish to call her father on the phone and tell him how she learned to jump rope that day, her mother withdrew into sullen anger. Inexplicably, to Sally, her mother was "too tired" to read her usual bedtime story that evening.

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As shown here, these parents can become emotionally abandoning, rejecting, or even vengeful toward the child who expresses his or her own individual needs (individuates), especially the need to move toward the other parent. As in Sally's case, the punishing message is typically unspoken and is therefore impossible to be spoken about, which makes it even more pernicious. In some cases, however, the rejection is not at all subtle.

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Mrs. P was enraged when her 9-year-old son posed for a photograph with his father and new stepmother at his school's awards ceremony. Peter had protested to his father at the time, because he knew full well what might happen. Sure enough, when they went home afterward, his mother threw Peter's belongings out onto the street and screamed at him to "Get out! Go live with that jerk and his whore!"

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Sometimes the mere presence of the child, or the child's physical resemblance to the ex-spouse, produces a toxic, phobic reaction in the parent. The mannerisms or typical expressions of the other parent, when seen in the child, can activate resentment, even rage, toward the child, who at that moment is undifferentiated from the hated or feared ex-partner.



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Mr. S described his daughter as follows: "She's kinda got a bad attitude, she's uppity like her mother. When she comes to my house she's surly and rude . . . they have brainwashed her. She's like a little mimic of her mother. . . . I have spanked her for it . . . I have to make her shape up. Finally, by the end of the weekend, she's like my little girl again!"

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It is not surprising that children subjected to this kind of perverse conditioning can have serious difficulties discriminating their own feelings from those of their parents. They can also remain profoundly confused because, in most cases, the parents are verbally denying what their body language and actions are clearly expressing: "Of course I want her to see her mother and have a good relationship with her mother!" Mr. S declared.

Many parents in high-conflict divorces are especially vulnerable to separation and loss. One or both spouses may experience severe separation or abandonment anxiety as a consequence of the divorce. In some cases (as explained in chapter 1), their vulnerability is the result of previous traumatic losses. Others have experienced emotionally deprived childhoods and have failed to achieve complete separation from their early caregivers. Hence, for such persons, the marital separation triggers panic, intense fears of being abandoned, and the inability to survive on their own. Parent-child relationships in these cases are usually characterized by the parent's clinging dependency, as the parent attempts to undo the loss of the marriage by holding on to the child.

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When her husband left, Mrs. L felt extreme panic. "It is like someone took a shotgun and blasted a hole right through me, and the wind is whistling right through!" she said with a shiver. For months, this pervasive sense of damage and hollowness caused her to wake fitfully from her sleep with anxiety attacks. The comfort of her small daughter's body snuggling next to her was the only thing that seemed to calm her. During the day, she found reasons to keep Laura home from nursery school because she couldn't bear to be alone in the house. Laura, who felt upset, did not understand the panic but clung to her mother and resisted visiting her father.

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The parent is likely to experience a renewed threat of abandonment by the child, whenever he or she leaves for visitation. This provokes both intense anxiety and covert hostility toward the child, who is not, then, available to take care of the parent's needs. Not surprisingly, these children themselves then become ambivalent about separating. Alternatively, some children, sensing their apparent omnipotence in caring for a distressed parent, react as if the parent's very survival depends on their constant vigilance and caretaking.

Some parents defend against their fears of abandonment by taking a pseudo-autonomous stance and rigidly insist on making unilateral decisions on behalf of their children and refusing to cooperate with the other parent. This can result in inflexible, authoritarian parenting that is governed by one parent's need to be in control, rather than being firm, empathic, and independent in his or her judgment. Eventually, such rigidity can evolve into power struggles with the child, especially during adolescence, which in turn can precipitate the child's sudden defection to the other parent.

Parents with severe borderline, sociopathic, and narcissistic personality disorders are particularly vulnerable to both loss and shame, and are likely to view the child as a material possession that they can use as a weapon, vehicle, or conduit to the ex-spouse. In such situations, the child is little more than a means of punishment, a trophy, or a bargaining chip. Children consistently treated as an inanimate object, with only a kind of functional or symbolic value (vis-à-vis the dispute with the other parent), are at risk of developing a surreal sense of not existing—feeling and acting as though they are nonpersons.

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For weeks after his wife left the marriage, Mr. L kept Lisa home from school to keep him company, to comfort him. Later, when the mother recovered custody of the child, this man lavished bribes and promises of exciting outings on the little girl, but then failed to turn up for the scheduled visits. When his wife refused to talk with him, he would tearfully tell the distraught child good-bye, that he would never see her again—and then he would return the next day to renew his pleadings. Whenever his wife left the child in the care of the grandmother, he would take the little girl away with him, claiming she had been deserted; then he would drop her off with sundry acquaintances for her care. The child was constantly asked to plead the father's case with the mother: "Ask her, 'Where do you belong?' Tell her I love her and want her back!" When first seen in counseling, Lisa was a dazed, flaccid child. She



lacked spontaneity and seemed vacant, joyless, and withdrawn. She made no demands and waited uncomplainingly for someone to attend to her needs, as if she had entirely given up any sense of herself as a viable person.

#### WHY SOME CHILDREN COPE BETTER THAN OTHERS

The kinds of disturbed family dynamics described above may have been operative throughout this marriage, or they may have been set in motion only at the time of the parents' separation, or after the divorce. When working with these families, it is important to obtain a detailed marital history, which will suggest how early and how pervasive the psychic damage is likely to have been to the child, who may have been exposed to varying degrees of disturbance in the parent-child relationship over time. In some cases, one or both parents may be characterologically disturbed in a more generalized way. The children may have been further stressed by abusive, neglectful, and impoverished environments—both before and after the divorce—derivatives of domestic violence, substance abuse by parents, poverty, and dislocation from school and community.

Before concluding on a definitive gloomy prognosis for all these children, a cautionary note: Researchers are still in the midst of the complex task of trying to understand how children of different developmental stages, both boys and girls, are affected by protracted and severe parental conflict. Systematic studies over these children's growing-up years are sorely needed. Overall, we are impressed by the range of outcomes in our clinical observations of these children over more than a decade. In general, the more severe, more protracted, and earlier the onset of the parental conflict in the child's life, the more disturbed the child becomes; but this is not always so. Some children, despite extreme family conflict and disturbed parenting, appear to be relatively well adjusted, while others with less family stress appear to become enmeshed and emotionally and behaviorally disturbed.

There are many possible reasons for these different outcomes (Anthony & Cohler, 1987; Rutter, 1987). Some children have access to other people who can support them (grandparents, a special teacher, a nanny). The presence of siblings, especially older ones, can act as a buffer. A few have benefited from effective psychotherapy. Children also differ in their personal coping resources: those with more adaptable temperaments, those who are more attractive, more intellectually gifted, more athletically or artistically skilled—all have alternative domains within which to achieve a viable sense of themselves and their place in the world. All these factors can vary the



prognosis and outcome for any individual child. This great variability should be kept in mind as we consider next some of the common core concerns of these children, how they typically try to cope, and the possible threats to the development of a positive sense of themselves and their capacity for healthy relationships.

### THE CHILDREN'S CORE CONCERNS

We have identified four central concerns of children when they live with divorced and disputing parents: What is true and what is false? How can I keep myself and my parents safe? Who is responsible for the conflict? Am I like the good parent or the bad parent? For these children, the answers to these dilemmas have to do with their profound fears about their ability to survive, both psychologically and physically.

We assert that the various ways by which children attempt to cope with these core concerns, and defend against their fears, are likely to result in entrenched patterns of feeling, perceiving reality, solving problems, relating to other people, and dealing with emotions. Each of these central concerns will be examined together with preliminary evidence from psychological testing that suggests how personality disorders may be shaping up in these children. (The psychological tests briefly referred to here are primarily Rorschach protocols [Exner & Weiner, 1982], data that will be discussed more fully in chapter 6 [Roseby et al., 1995]).

First, depending on their age or cognitive stage of development, children struggle with the puzzle of their parents' conflicting claims (What is true and what is not?). Some of the possibilities from the child's viewpoint are truly frightening. For example, children have brought the following questions to us: "Did Daddy throw Mommy out of the house, or did another man steal Mommy from Daddy?" "Is Daddy's new girlfriend really a witch?" "Dad made Mom have an abortion—does that mean he made her kill my little brother?" "My dad told me that when my mom was pregnant with me, she was also sleeping with a dirty crack cocaine dealer—so is he, or my dad, my father?" Hence, the child's ability to perceive and evaluate real-life events is distorted.

Ordinarily, children use their parents as a social reference for what is safe and trustworthy. These children, however, have the profound dilemma of making sense out of vastly contradictory views communicated through the hostility, fear, and distrust of their opposing parents (Who is safe? Who is



dangerous? Whom can you trust?). At times, children's own fantasies are projected into the situation, increasing their fright.

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Tears rolled down the face of 5-year-old Tony, as he told his counselor how scared he always was when the door of his father's car slammed shut behind him, out on the street, and he made the long trek up the walkway to his mother's front door, which would crack open barely wide enough to admit him. Tony was too young to talk about his role as psychological double agent in this cold war between his parents. He could tell us, however, how afraid he was—afraid that a large black bird would swoop down and attack him during his perilous transition, and that neither parent would rescue him.

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All things considered, it is not surprising that psychological testing indicates the following about these youngsters as a group: they are likely to be hypervigilant and distrusting of others, and they do not expect the world to be a cooperative or protective place. Unlike typically developing children, who tend to turn to others, especially adults, for their needs, these children turn inward, unto themselves, to figure out how to solve problems and interpret social reality. Unfortunately their inner resources are likely to be meager, because these children defend against the double-binding inconsistency of their most significant relationships by avoiding complexity, ambiguity, and spontaneity. In the service of this essential need for predictability and control, their perceptions, feelings, and ideas remain simple, concrete, and utilitarian. The bind is that, as children turn inward, they must rely on an increasingly impoverished and distorted understanding of the nature of reality. Paradoxically, their path to safety leads them further and further away from new self-realizing possibilities.

Second, because of the profound neediness of their distressed parents, these children can become urgently concerned about the emotional and physical well-being of a parent (Will my mother be sad and cry if she is left on her own while I visit my father?). Convinced that somehow their own emotional survival depends upon keeping their parents safe, these worries about the well-being of a parent are often fused with nagging fears about their own vulnerability to being abandoned, lost, ignored, or even destroyed in the parental fight. (If I visit my father, will my mother be there when I get back; will her fury be aimed at me?) Consequently, these children are often highly



attuned to managing their own as well as their parents' emotional states. Psychological testing confirms the pervasive emotional constriction that results when children inhibit and monitor the natural exuberance of childhood in this way. Their significantly low egocentricity scores (i.e., their meager sense of importance in relation to others) also point up how atypically "other-focused" these children need to be to maintain their parents' equilibrium.

Third, since they are often the centerpiece of the parents' fight, these children typically feel responsible for the outcome of the disputes. Yet most feel helpless to control or stop the conflict. While the younger ones believe they cause the fighting, the older ones feel the fights occur simply because they exist: "If I were dead, they wouldn't need to fight anymore" is a tragically self-blaming, depressive fantasy that is not uncommon. Feelings of great power and importance are juxtaposed, therefore, with paradoxical feelings of being overwhelmingly inadequate in the face of the parents' intractable anger. Hence the child's sense of agency, competence, or power is undermined. It follows that these children often have trouble directly asserting their own needs and wishes. Instead, they are likely to maintain an underlying oppositional and alienated stance masked by a compliant eagerness to please others. This facade can be maintained only until the children become overwhelmed by their own neediness, at which time they regress or explode into irritable-distressed or demanding-aggressive behavior.

These findings fit with the somewhat paradoxical results of the psychological testing, which suggest that, as a group, these youngsters tend to score unusually high on levels of self-esteem, using self-report measures, but reveal their preoccupation with being bad, damaged, nonviable, and inadequate on projective measures that bypass the child's observing ego (Johnston et al., 1987; Roseby et al., 1995). The tests capture both the confusing sense of importance and the underlying sense of insignificance and helplessness.

Finally, given their parents' continual denigration of each other, these children are clearly concerned with the problem of who is good and who is bad and with whom to identify.

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Four-year-old Andy's sandtray play captured the predicament of a small child (himself) who was in the center of a battlefield. He commented, "But the good people wore bad masks and the bad people wore good masks. I wasn't sure which to follow!"

Like Andy, many children become confused, feel shame, or denigrate



themselves if they feel they have become like the “bad parent.” Hence the child’s developmental task of acknowledging, tolerating, and integrating the “bad” with the “good” into a more realistic view of each parent (whole object representation) and, at the same time, forming a cohesive, integrated sense of the “good” and the “bad” in him- or herself (self-constancy) is made extremely difficult:

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Eight-year-old Allan could be alternately boastful and grandiose, until he was disciplined, and then he was totally deflated—he became self-flagellating and defeated. Fourteen-year-old Ian was perfectionistic with his school-work; if he didn’t get it one hundred percent correct, he felt horribly dumb, like his “stupid father.”

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When children maintain this kind of rigid separation between good and bad, they are bound to strive for an impossible perfection in themselves and other people. Each failure represents an intolerable fall from grace. This most fundamental failure (i.e., to achieve self- and object constancy) is reflected in the pervasive absence of basic trust that testing reveals in these children. It is not difficult to imagine that these polarized shifts from perfectly good to perfectly bad make trusting oneself or others, from moment to moment, a virtually impossible task.

#### TRAUMATIC SCENES OF VIOLENCE AND THE FORMATION OF SCRIPTS

As shown in previous chapters, a large proportion of children of entrenched custody disputes will have experienced their parents’ violence in the past. Moreover, many will continue to witness ongoing verbal abuse (spiteful comments, put-downs, threats, name-calling) and intermittent physical violence (pushing, shoving, hitting, even battering). Studies have shown that children do not need to be directly abused to be hurt by this manifest conflict and violence between their parents (Jaffe et al., 1990). Our clinical observations lead us to propose that such traumatic scenes can form indelible sensory metaphors in children’s memory. The sparse coping skills and defensive postures children employ to try to manage the terrible threat these scenes pose are likely to become organized into patterns and form defensive scripts that undergird their unconscious expectations about



how family relationships work. Under certain conditions, this interior script can organize the child's constricted, hypervigilant, rigid, and distrustful view of human relationships in general.

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When we first saw him, 12-year-old Isaac could not remember any of the frightening scenes of marital violence that occurred prior to his parents' separation, when his father would chase his mother around the house, beating her. The memory of those violent scenes suddenly returned to him years later, as a teenager, when he had an altercation with his father. In a halting voice he described a series of visual and auditory images to his counselor: father crashing through the door, loud, angry voices, contorted angry faces, father stomping on his mother, who was flailing on the floor, mother crying, mother's face bleeding, himself frozen in the doorway watching, the police arriving, the police arresting his father, the police forbidding him to hug his dad good-bye.

He then went on to describe flashbacks and fragments of other scenes of severe family conflict, intermingled with horrifying nightmares of mayhem that often disturbed his sleep. This boy's repressed rage and utter shame at his helplessness during those childhood events, when he witnessed his father abuse his mother, undergirded his alienated oppositional stance and highly distrustful (paranoid) personality style. At age 15, he is a careful, guarded boy, passive and emotionally expressionless much of the time, especially when conflict threatens. Intermittently, this boy is prone to aggressive outbursts, at which time he hits his mother and sister. In this respect, Isaac shows that he has "turned passive into active" and has identified with his abusive father.

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In the remainder of this chapter, the process by which emotionally highly charged family scenes (like those that Isaac experienced) form internal scripts and structure personality pathologies is described and illustrated in detail.

#### HOW DEFENSIVE SCRIPTS ARE FORMED IN EARLY CHILDHOOD

Incidents of severe family conflict and violence are believed to threaten children's emotional security in a very fundamental sense (Davies & Cummings,



1994). To understand this, we draw upon social cognitive theory about family scenes and scripts (or expectations) to explain how these incidents are stored in children's memory (Berger, 1988; Carlson, 1984; Schank & Abelson, 1977; Tomkins, 1978). Developmental theory about children's social cognition (Flavell et al., 1968; Kegan, 1982; Selman, 1980) and object relations (Mahler et al., 1975; Kohut, 1977; Kohut & Wolf, 1978; Winnicott, 1965, 1971) will complement this understanding and show how internal models of family relationship (Bretherton et al., 1990; Main et al., 1985) are shaped and distorted by repeated incidences of parental conflict, and how the distortions are defensively maintained to manage feelings of helplessness, shame, and rage. Furthermore, it will be shown how all this can inhibit the children's capacity for understanding themselves and other people, for tolerating the expression of the full range of feelings, for empathy, and for moral thought and action (Kagan & Lamb, 1987).

Traumatic scenes of family violence are now known to impact very young children, even infants and toddlers. A primitive script (or inchoate expectation) can initially be formed from schema of preverbal sensory and perceptual experience during infancy, long before the child has access to language to encode the experience. For babies and toddlers, then, frightening scenes of family conflict and violence may never be available for cognitive recall but can continue to manifest themselves in scary dreams and in diffusely anxious feelings. Two examples follow.

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Twelve-year-old Katie recalled a repeated dream from which she invariably woke up crying. It was of two disembodied voices shouting, at first faintly, from a distance, and then increasing in volume and proximity to a deafening roar. At the age of two, this child had been witness to the scene when her father discovered her mother with a lover.

When Tom was 2 years old, his father murdered his mother. After his mother was repeatedly stabbed in a nearby room, she struggled to the side of her son's crib, where she died. Tom has no memory of the event, and the facts were kept secret from him until he was a young adult. However, from the time he can first remember, he has suffered from repeated diffuse and overwhelming anxiety attacks, wherein he feels that some unknown, dreadful thing is happening.

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By the time the young child has achieved representational capacity (indicated by the capacity for language and symbolic play), the script has become a pattern that organizes children's largely unself-conscious "rules" for predicting, interpreting, responding to, and controlling their experiences within their families. Scripts derived from emotionally charged scenes tend to be conflated in memory and psychologically magnified. For pleasurable scenes, the script is generally magnified by the production of variants; that is, the child who has previously been gratified by a particular scene tends to innovate by producing variations on the theme inherent within the script. For example, an infant who receives a rewarding response for cooing is encouraged to experiment with other forms of vocalization. A child given warm appreciation for being helpful seeks new ways to please.

Negative scenes, on the other hand, tend to be magnified by the formation of analogs; that is, the child seeks to find and then to defend against similarities as new scenes are scanned for old dangers and previous disappointments. For example, a toddler who associates mother's angry expression with a punishing slap freezes when a caretaker seems disapproving. A youngster who associates his father's arrival to pick him up for visits with another parental fight becomes immobilized when his father calls him on the phone. Hence, scripts derived from highly negative family scenes generate more constriction and invariant coping responses. Children who experience particularly negative scenes tend to incorporate a greater number of previously unrelated scenes into forming and maintaining the negative script, thus minimizing creative new ways of coping and simplifying their perception of the world.

The intolerable feelings aroused by scenes of severe conflict and violence between parents result in memories that are defensively encapsulated and not easily recalled by the child. Moreover, parents commonly avoid, deny, or defensively distort incidents about which they are ashamed: they hope the child does not remember or did not understand what happened. Some adults think they are protecting their child by not talking about the event. As a result, the memory of the scene remains essentially private, fragmented, and embedded in the idiosyncratic experience of the child, and not easily talked about with others. This "conspiracy of silence" within the family prevents the reparative work of talking-through and emotional abreaction, which would enable the child to assimilate and master the traumatic episode. When this is not done, there is a heightened risk that the child will



with bland or commonplace affect. This is similar to what has been referred to as *screen memory* in the psychoanalytic literature (Spero, 1990). There is also a tendency for these memory fragments to be activated in response to any new negative experience or threat of trauma. We hypothesize that in actuality, the memory fragments are likely to be linked by virtue of the script, which conjoins several traumatic scenes. Ironically, this process provides the child with a kind of negative sense of predictability.

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Alicia's mother was severely depressed, angry, and resentful about having to care for her baby daughter during the first two years of the child's life. She harbored frightening fantasies of hurting or abandoning her baby. Gradually, her depression eased. At 7 years, the child suffered a ruptured appendix and was rushed to the hospital for emergency surgery. She spent several uncomfortable days there, reacting poorly to the medical procedures, with her mother constantly at her side. Later, when she was 10 years old, her parents separated. At that time, Alicia was exposed to many highly conflictual scenes, which involved her mother's becoming uncontrollably angry and physically attacking her father.

In the two years following the divorce, prominent among this child's symptoms of anxiety and distress were frequent somatic complaints, especially pain in her left lower abdomen. She feared she was going to die and became excessively dependent upon and unable to separate from her mother. In therapy, Alicia was highly anxious and unable to talk about the divorce situation. She did, however, recall quite vividly, though with astonishing indifference, being in the hospital as well as other seemingly mundane scenes in a day-care center as a preschooler. Those scenes were actually fragments of memories from times when she had been highly distressed about being left by her mother.

This child had evolved a script wherein the threat was abandonment and destruction by her mother. She tried to manage this threat by retreating into somatic symptoms and clinging dependency, because these behaviors would evoke her mother's caretaking response. It is interesting that the specific fears Alicia was trying to ward off by her scripted symptoms were also evident in repetitive terrifying nightmares, in which the symbolism of the angry mother and her unsafe world were barely disguised.

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The script produced from a traumatic scene (or scenes) will probably depend on a number of factors: the child's limited perceptual opportunities and cognitive capacities, the current emotional-developmental issues that concern the child, and the effectiveness of the child's coping efforts in any attempt to master or control the threat inherent in the situation. How might each of these factors help structure the particular script likely to be formed?

### *Cognitive Capacities*

Children often witness only part of a parental fight. For instance, a child may hear screaming or thumps through the bedroom walls or overhear threats and accusations from one side of a telephone conversation, or, in the aftermath of a fight, may see broken furniture or a blackened eye, or hear helpless sobbing. The child is then left to surmise the whole of the scene from these fragments. The meaning the child constructs is partly influenced by his or her cognitive capacity for perspective taking. According to social cognitive theory, this capacity provides a foundation for the development of interpersonal understanding, defined as the way children understand and reason about themselves, other people, and the interactions between them (Flavell et al., 1968; Selman, 1980).

The development of interpersonal understanding parallels the child's increasing ability to move beyond the boundaries of his or her own point of view in order to understand, maintain, and differentiate that point of view from the perspectives of others. A preschool child with an egocentric perspective and intuitive logic may form primitive scripts based on magical thinking that does not grasp the existence of any other point of view. For example, 5-year-old Amy explained that she was magic, "'cause when I come into the room, my mom and dad stop fighting." She went on to explain, "When I go to bed, I leave my magic by the door and it stops them fighting in the night!"

The younger school-age child who has developed the capacity to grasp another's perspective (as well as his or her own) but can keep in mind only one perspective at a time (unilateral perspective taking) will typically experience incidents of conflict from only one parent's point of view, and will then develop scripts for understanding herself, and relationships, that involve simple, concrete, one-way interactions: "My mom is mean, she yelled at my dad and he was sad. I make him happy!"



to visit him. She could not remember anything about the good times she had had with him, and construed all of his attempts to invite her back to him as dangerous. It was not until those early memories were reviewed and reworked in therapy that she was able to tolerate her mother's periodic rages against the father, without making this irrational alignment.

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### *Emotional Issues*

The thematic content of a script derived from a traumatic scene may be determined in part by the emotional issues being confronted by the child at that particular stage of his or her development (Erikson, 1963; Mahler et al., 1975). For example, consider a situation in which three boys from the same family witness their father hitting their mother. The 2-year-old, who is normally preoccupied with concerns about separation, will be the most anxious about the emotional unavailability of his mother to comfort him during the stressful experience. The script he develops for understanding and managing his relationships is likely to have a theme of separation and abandonment. The 5-year-old will probably focus on the father's wrath, seeing it as a potential attack upon himself because of his oedipal fantasies (i.e., his eroticized longing for exclusive possession of the mother and her resources). The thematic content of his script will probably reflect issues of competition and revenge. The attention of the 8-year-old, who is concerned about mastery, will more likely be captured by the exercise of power and control by the aggressive father and the induction of submission in the victimized mother. If so, the thematic content of his script will be about maintaining superiority and control and avoiding inferiority and helplessness.

There are indications from longitudinal observations (Terr, 1988, 1990) that the original traumatic scene can be reworked in the child's memory so that, as the child's central concerns shift over time, the content of the script reflects new developmental themes. Scripts can also be surfaced and reworked by children in conversation and play with their parents and peers, or they may be reconstituted within therapy. It is possible, however, for the script to remain fixed at its point of origin. This underscores the need to take a careful history about traumatic scenes witnessed at early ages and at critical developmental stages.



Eight-year-old Michael, who had long managed his parents' frequent fighting, was typically controlling with his peers. When minor disputes arose on the playground, he would interfere and "supervise," much to the resentment of his classmates.

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Sometimes these scripts appear to lie dormant for years, until the young person tries to form intimate relationships or becomes a parent (Egeland et al., 1987; 1988). When observing these disturbing, even tragic cases, however, it is important to remember that, fortunately, these are not the outcomes for the majority of children who have witnessed violence (Kalmuss, 1984; Kaufman & Zigler, 1987; Widom, 1989; Zeanah & Zeanah, 1989). Lacking good long-term studies, we do not yet fully understand why many children grow up without repeating these early patterns, while a significant and disturbing minority, like Carrie and Jose, described below, become victims or victimizers.

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Carrie's parents' violent marriage ended in divorce when she was in preschool. Never again did she witness her father hit her mother. In her late teens, however, she began living with an abusive young man. When asked why she tolerated his violence, she answered simply, "Because he loves me—I know he loves me because he hits me!" (Wallerstein & Blakeslee, 1989).

Ten-year-old Jose witnessed his drunken, jealous father beat up his mother on several occasions. Each time the boy tried to throw himself between his parents to protect his mother, he himself was hit, which made him feel small, helpless, and ashamed. This boy grew up with a seething rage at his father and intermittently suffered a brooding depression. At age 17, Jose fell in love for the first time and quickly became intensely possessive of his girlfriend. Then she broke off the relationship. Feeling again powerless and shamed, he took a gun and threatened to kill her.

## IMPLICATIONS

Whereas highly significant scenes (in these cases, incidents of frightening conflict and violence) originally create the script (with its rules and expectations about relationships), the script itself tends to guide the child's appraisal,



emotions, and management of subsequent interpersonal events (Dodge & Somberg, 1987; Dodge et al., 1990). When the child is confronted with a threat of repeated conflict or violence, the script, or expectation, is quickly activated in response. In fact, in these highly vigilant children, defenses and coping responses embedded in the script can be triggered by minimal cues or enacted to preempt confrontation and conflict.

In summary, children exposed to distressing scenes of interparental conflict, especially those that include violence, manage their distress, make sense of what is happening, and control their world by forming a defensive script of family relationships, which then becomes the prism through which they view the world. In other words, when danger is perceived where refuge should be, children tend to cope by developing increasingly rigid and constricted patterns of feeling, thought, perception, attention, and memory, which become organized as largely unconscious "rules" for scanning and controlling interpersonal contact.

Without intervention, these patterns, or scripts, form a prism that allows in signals of interpersonal threat while more benign information is filtered out. As a result, such children feel, paradoxically, both confirmed in their view of the interpersonal world as dangerous and yet safe, because they can scan for and control the threat. As these patterns consolidate, they mitigate against the child's capacity to trust others and to tolerate intimacy with others. The *prism* therefore becomes a *prison*, as children's opportunities for cognitive and emotional growth are limited to the confines of the script. The result, to varying degrees, is emotional constriction, avoidance of feelings and genuine interpersonal contact, difficulty experiencing empathy with others, and distortions in moral reasoning and conduct.

Children show a wide range of adaptations, depending upon individual temperament and other buffering resources available within the family and community. In the following chapters, we show how children at each developmental stage are affected differently. Those who are younger tend toward the more severe forms of developmental distortion and arrest but seem more amenable to change when their family situation improves. Older children often appear to be more resilient to the acute stress associated with divorce conflict, but if given no relief from chronic conflict, they are likely to show consolidated disturbances that are more resistant to intervention.



## INTRODUCTION TO PART II

When parents in a conflicted divorce seek mediation, evaluation, or psychotherapy services from mental health professionals, they are likely to approach the process with an agenda that can be understood at two levels. Fundamentally, the agenda of each parent is to solicit the professional's alliance. Although the parent may not acknowledge or even be conscious of this covert intent, it is likely to be experienced quite forcefully by the professional. The pressure on the consultant is to unilaterally support one parent as being entirely good and to see the other parent as entirely bad. For example, one mother (Mrs. H) described herself as the loving, primary parent. She described the children's father, on the other hand, as "a manipulative liar whose only interest was in the appearance of being a perfect father." The vehemence of the parent's presentation alone is likely to elicit a degree of empathy from the professional, if not outright suspicion toward the other parent. In the first meeting with the other parent, however, the professional is likely to experience an initial feeling of confusion, as that parent also emerges as a person with an understandable set of concerns and point of view. In Mr. H's first meeting, for example, he described himself as "the only safe harbor the children have ever had," because the mother was "a self-involved depressed woman whose own history makes it impossible for her to really parent her children." This covert pressure to solicit an alignment on the side of one parent against the other tends to be articulated as a concrete and particular intention to change the children's custody or visitation plan. Parents tend to justify the changes they request as the solution to difficulties their child is experiencing.

For younger children, these difficulties may involve unusually aggressive or regressive behaviors before or after visitation. Others experience physical complaints such as stomachaches, headaches, or asthma. Some parents observe sexualized behavior in their children. When this happens, one parent may conclude, all too quickly, that this symptom is proof that the other parent is molesting the child. Parents of older children often worry about signs of school failure or breakdowns in the child's social or extracurricular life. In a highly conflictual situation, each parent is likely to believe that these types of difficulties are the direct result of the other parent's harmful or subversive influence. Mrs. H complained that her 7-year-old son, Jason, was "hyped up after visits with his father and exhausted from all the crap they do together. . . . His father can't sit still for a minute. And Jason won't



listen to me for a second when he gets home. . . . Next thing I know, he's crawling in my bed at night because he can't sleep alone. He needs a break from this . . . he's worn out from trying to keep up with his father. They have no real relationship, it's all just this running around!" Mr. H agreed that his son seemed agitated at the end of visits but felt that "he gets kind of hyper when he has to go back. . . . I can tell that he doesn't really want to leave me. I don't see why he has to either . . . and neither does he. What am I supposed to tell him!?"

The parents' views of themselves, of each other, and of the situation seem unconnected, and their ideas about what is best for the children are similarly polarized. Often, the visitation schedule becomes the focal issue, because it is here that the child's contact with the other parent can be regulated. The professional, in turn, may become overly involved with the minutiae of the scheduling disagreements and begin to shift support back and forth from one parent's perspective to the other. When this happens, a sense of clarity and position is lost. The result can be feelings of confusion, dissonance, and futility in the face of very real pressure from each parent. These feelings can serve as a window into the child's experience. It is the child's experience and point of view that are elucidated in Part II. It is the child's perspective that can create a fragile path through the quicksand of the parents' conundrum. Only when the child can be seen and understood as an individual separate from the parental conflict, and when the parents can be helped to reframe their agendas in terms of the child's concerns and preoccupations, can the professional then define his or her own position and advocate effectively for the child.

#### A SPECIAL NOTE TO THE READER

The following chapters are arranged in developmental sequence and are best understood as a hierarchical treatment of issues that will become layered within the child as he or she grows. For example, if the child is being seen for the first time at age 9, it will not be enough to read the school-age chapter (chapter 6). Rather, it will be important for anyone who wants to understand that 9-year-old to read the chapters that address the stage of life when that child was first exposed to parental conflict or violence. If the child was aged 2 at the marital separation (or was exposed to high levels of conflict or violence in the marriage at that time), it will also be important



to read the chapters that discuss the developmental risks for toddlers and preschoolers (chapters 4 and 5).

When the details of the child's history are not clear, or when there are concerns that one or both parents may have a long-standing history of emotional vulnerability, we strongly recommend a careful reading about separation-individuation (in chapter 4), because it presents the organizing foundation of many subsequent difficulties and intervention strategies. What we are stressing here is that a child's history lives on within him or her. We cannot understand that inner landscape without knowing all the forces, past and present, that have contributed to its shape.

#### Problems in Separation-Individuation

When very young children are exposed to chaotic conditions between their two primary parents, they sometimes tend to become "stuck" between them, unable to move back and forth freely and parentally home to the other's. These difficulties may include a range of behaviors such as enmeshment, irritability, clinging to one parent, and physical resistance to the other parent. These problems often surface when the child returns from a visit. Commonly described patterns include a period of defiance or irritability that the parent can tolerate. The resistance is likely to be followed by signs of regression. The child may have difficulty sleeping alone at night, wake with nightmares, have toileting difficulties, or want a bottle that had been previously discontinued. Clearly, the home, although very important, is probably not the only place with power or control in their life. One mother described a 3-year-old's behavior when she returned from visit:

"She is mean and cries all night when she comes home. She won't let me touch her. The only thing that works is to talk to her when she was a baby—she'll come to me to comfort her back to me. I talk to her about what a great dad she has—but obviously not returning the favor! Her crying is over her against me and show her what a rotten parent I am!" The father of



this little girl, on the other hand, felt she was having tantrums because she did not want to return to her mother and should have more time with him.

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Although the parents' individual concerns must be carefully considered, it is essential to understand what conflicts and anxieties the child may be trying to express or manage by means of these symptomatic behaviors. When the behavior can be understood from the child's point of view, both parents and professionals can respond more empathically and effectively. This chapter describes the developmental processes that ordinarily preoccupy young children and the ways in which parents' psychological vulnerabilities and bitter conflicts can distort these processes, generating insoluble internal conflicts and intolerable anxiety. It is these inner dilemmas that are expressed in behavior.

#### THE NORMATIVE PROCESS OF SEPARATION-INDIVIDUATION

To understand the young child's difficulties, it is useful to begin with a basic understanding of the normal developmental processes that may be disrupted by the parental conflict. To simplify the following discussion, we will mostly refer to the primary parent as the mother, though we do not assume this is necessarily the case. Sometimes the primary parent is the father, and sometimes both parents share primary caretaking responsibilities.

In the first three years of life, the child's most fundamental developmental achievement is to establish an authentic sense of self as a person physically and psychologically separate from the mother (or primary parent). If the child succeeds in this, the authentic self will fuel the child's sense of wholeness, inner vibrancy, and self-direction throughout life. Mahler and her colleagues (Mahler et al., 1975) referred to this process as *separation-individuation*. Mastery of this profoundly important process begins in infancy and depends upon the mother's fairly constant and empathic responsiveness to the child as a separate person. Take, for example, the mother's ordinary preoccupation with her baby's every coo and cry as she says, with a sort of weary pride, "That's just his little trying-to-settle-down noises." Or, "I'd better go up, she sounds like she's hungry." If the parent is accurately attuned to the child in a predictable way, a pattern of signaling and response develops between them. The mother may, for example, stay and



rub her baby's back until he shifts from an agitated cry to his "settling-down noises," which she recognizes as the signal that her baby is now soothed and ready to sleep. Alternatively, the mother responds to cries that she identifies as hunger by scooping the baby up and feeding her. These accumulating moments form a pattern that help the child to feel he or she is a separate person in a responsive, predictable world. Over time, that pattern and the mothering functions embedded in it (acknowledging, soothing, and protecting) become part of the child's own inner repertoire for coping.

In optimal situations, this pattern of responsiveness is "good enough" (Winnicott, 1960); it need not be perfect. The best intentioned mother does not, nor should she, always understand her child with perfect empathy. As the child learns to master disruptions in the familiar patterns of care, he or she matures. In the early phases of the separation-individuation stage, the infant normally experiences these expectable variations in the patterns of care as actual changes in the mother's identity (Mahler et al., 1975); therefore, the child's sense of self in mother's care shifts responsively as well; that is, when the infant experiences the mother as empathically available and responsive, she is the *good-mother*, and the self in her care is the *good-mother-me*. When she is not available and responsive, she is the *bad-mother*, and the self in her care is the *bad-mother-me*. If the mother's response range is reasonably steady, the young child learns to trust that these seemingly separate or split self/other states will shift in predictable ways, because they are inseparable parts of an immutable whole.

When, for example, the young child drops his cup from his high-chair for the first time, the mother may smilingly bring it back to him. She may do this several times. After the tenth time, however, she may reasonably feel irritated and decide to take the cup away. For the child, she is, at that moment, the *bad-mother*, who is angry and uncomprehending. The child is likely to protest loudly when this unsettling event occurs. In his rudimentary way, he is disappointed, because the *good-mother* (who gratified by steadily replacing the cup and appreciating his play) has gone away and he does not like the *bad-mother*, who has taken her place. In this moment, the child experiences himself as the *bad-mother-me*, who has lost his milk and his play and who made the *good-mother* go away.

If the mother can create a reasonable and predictable balance between frustration and gratification, then the child grows in his capacity for integration. If, for example, she tolerates his loud protests or his tantrum about the lost cup without withdrawing, punishing, or capitulating, the child learns that no



part of the self is so incomprehensible, intolerable, or overwhelming that it makes the good-mother go away forever. Over time, the mother's steadiness and predictability help the child to understand that the good-mother and the bad-mother are one and the same person. Similarly, the child learns that the good-mother-me and the bad-mother-me are aspects of one self.

This integration of contradictory feelings and experiences represents a major developmental achievement that has been referred to in both the psychological and the psychoanalytic literature as *object constancy* (McDevitt, 1975). This essential capacity allows the child to maintain a positive emotional attachment to another person, even in moments when that person is frustrating or ungratifying; that is, the child who has achieved object constancy can tolerate ambivalent feelings toward the same person and still value her or him for qualities not connected with need satisfaction (Burgner & Edgcombe, 1972). When this developmental achievement is in place, the child can learn to accept his or her whole self as a person who, like mother, has a shadow side. This unfolding tolerance supports the child's capacity for constant, realistic relationships that can survive frustration and ambivalence because they are founded on basic trust in the self and in others.

### *The Internalized Good-Mother*

By toddlerhood, the child exploring physical separateness is increasingly practicing psychological autonomy as well. She borrows from patterns of responsiveness learned in infancy (the internalized good-mother) to feel reassured, to figure out feelings, and to calm down. The child uses the real mother for refueling when these efforts to fly solo are unsuccessful or overwhelming. For instance, 2-year-old Sara might trip while she is running gleefully away from her mother. She tries to soothe herself, whispering, "Sara fall down, kiss the booboo, all better." But if the sting is too much to bear, she will run to her mother for help. As the mother comforts her daughter, she helps her determine what is safe in the world beyond mother's orbit and supports her pleasure in "doing it myself." She may say, "Go ahead, Sara, you can run ahead, but when you get to the bricks you can walk slowly or wait for Mommy, because there are cracks that make you trip." This refueling and support of the child's mastery, in turn, becomes part of the internalized good-mother. The child can then continue to feel loved and protected not only by the real mother but also by the mother's internalized representation when she is absent. In the foregoing



example, Sara may remind herself to stop when she gets to the brick part, just as her mother told her to do. In so doing, she calls upon memories and images of her mother's support and protection to take care of herself.

### *The Role of the Father in Supporting Individuation*

The father has an increasingly central role to play as he excites and invites the young child to venture forth into the wider world. In a family with normally loving spouses, the mother will likely show much pleasure as the child relates to the father. She may say, for example, "Look, Daddy's home!" and smile as the child runs happily into his waiting arms. These separations from mother to father bring feelings of pleasure and excitement. The child is venturing out but not too far, using the father as a transitional person. Likewise, when the child can be in contact with the father without losing contact with the mother—when a little boy can wrestle with his father and still hear mother's laughter as she watches them together—then growing up and becoming separate need not cost him her love. The child learns he can find connections in other relationships and need not lose his mother in the process, that feelings of dependence can coexist with feelings of independence. This kind of integration is a blueprint for healthy intimacy, and intimacy is the cutting edge of maturation and the lifelong process of learning about the self, other people, and relationships.

### DISRUPTIONS IN SEPARATION-INDIVIDUATION IN THE HIGH-CONFLICT DIVORCED FAMILY

In the high-conflict family, one or both parents tend to be psychologically fragile. This vulnerability may be due to the failure to achieve complete separation from the parents' own early caregivers, unresolved past experiences of traumatic loss, or the cumulative wearing down of psychological resources that characterizes the end of a failed marriage. These vulnerable parents struggle with a chronic sense of emptiness and remain dependent on others to help them fend off fears of abandonment and maintain a positive sense of self. Not surprisingly, they tend to see others as quite powerful, and they are highly vulnerable to loss, rejection, intrusion, or demands. Vulnerabilities in the parent are likely to disrupt the infant's and young child's separation-individuation process long before the marital separation occurs.



*Predivorce Disruptions of the Separation-Individuation Process*

The fragile primary parent's responses to the infant or young child are likely to be determined by how that parent feels at any given moment, rather than by the child's separate needs and experiences. Furthermore, the mother (usually the primary parent) may jealously guard the child's affections so that the father is marginalized. These combined circumstances leave the child particularly isolated and vulnerable to unpredictable shifts in one parent's emotional availability. The fragile mother may, for example, be able to comfort her young child when the mother herself is feeling calm and supported. In these moments, the child experiences her as the good-mother and the self as the good-mother-me that is part of her. On the other hand, if the mother is feeling particularly vulnerable, she may experience the child's cries as unreasonable demands that conspire to deepen her sense of helplessness and angrily refuse to help him. In these moments she is the bad-mother and the child in her care feels himself to be the bad-mother-me.

Because the mother's responses vary more with her own needs than with the child's, they do not cohere into a pattern the child can predict. As a result, the child lacks a foundation upon which to build an inner repertoire for coping. Instead, the child internalizes and maintains a split representation of the good-mother and the bad-mother, who come and go in ways that seem frighteningly random. In the face of this unpredictability, the child is likely to remain vigilantly focused on the parent, unconsciously learning how to keep the good-mother from disappearing. In a sense, the child becomes the soothing good-mother for the parent but cannot internalize a constant good-mother for him- or herself. Nurturing continues to come from outside the self but can never be taken for granted. Not surprisingly, separations are frightening for these ill-equipped children.

The dangers of individuation are further confirmed if the fragile primary parent feels shamed and rejected by the child's natural strivings for separateness and self-expression, and responds by becoming emotionally unavailable or punitive. In this situation, the child's inner fragmentation becomes intensified. The good-mother-me is increasingly experienced as the part of the self that does not separate but instead soothes, supports, and evokes the good-mother. The bad-mother-me is then associated with the child's normal strivings for autonomy, as well as with feelings that support these strivings, such as anger, power, and pleasure in mastery. In the context of this kind of relationship, the child's normal maturational impulses begin to arouse intense anxiety, because they make the good-mother go



away, leaving the bad-mother in her place. The child's experience is paradoxically both powerful and frightening. He feels powerful enough to soothe the good-mother or to make her go away; at the same time, he is helplessly and unbearably vulnerable without her. Abandonment and engulfment are the twin fears that haunt these children.

### *Parents' Clinging Dependence at the Marital Separation*

The child's developmental difficulties may intensify when the marriage ends, because the marital separation often evokes overwhelming terrors of abandonment within the fragile parent. These terrors may belong not only to the present but also to unresolved past experiences of rejection and loss. The parent is likely to cope by clinging desperately to the child. One mother, for example, described how, after meetings with her ex-husband, she would sit and rock her silent, compliant 2-year-old as she wept out her grief and rage. She said with a helpless shrug, "I know I shouldn't, but I have to depend on someone!" In such situations, it seems to the child as if the parent really might disappear or die without her. The power associated with the child's position can neither be realized nor relinquished. Instead, it binds the child to the fragile parent in a posture that shifts endlessly between helplessness and omnipotence. At the same time, the child's inner resources are consistently used to fend off abandonment rather than to support the emerging self.

### *The Father as a Toxic Figure*

The child's difficulties with individuation are further heightened in the high-conflict situation when she tries to use the mother to figure out what is safe in the world beyond the mother's orbit. In the ordinary way of things, the mother signals not only that the father is safe but also that she derives pleasure from the child's contact with him. In the high-conflict situation, on the other hand, the mother is likely to signal (often nonverbally) that the father is toxic and potentially dangerous in ways that may have been foreshadowed before the separation by her repeated signals that the father was ineffective or irrelevant. The child's own experiences with the father may not confirm these signals, and so she becomes confused about what is real. Compounding the child's confusion is the fact that the mother is likely to draw comfort from believing that the child's experience of the father is just



as negative as her own. The distressed mother and young child draw closer together as they share in a distorted view of the father. The double bind is that the availability of the good-mother depends upon the child's relinquishing her real feelings, memories, and perceptions associated with a positive connection to father. This bind is profoundly serious because father represents not only himself but also a bridge to the world beyond the primary relationship.

### *Exposure to Parental Violence*

If the child is exposed to interparental violence, his fears of the bad-mother and confusion about the father's possible dangerousness are dramatically heightened. Separation becomes associated with brutality and victimization that is not only imagined but acted out in real life as well.

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One 5-year-old boy described his memory, from age 3, of watching his father beat his mother: "I was closing my eyes really tight. I was trying to plug my ears. I didn't want to see the fight . . . he was gonna kick in the window. He was yelling at her, 'You little bitch, give me back my television.' I was thinking they'd just stop fighting . . . they'd notice I was there . . . I felt so scared they might hit me." Later, this boy made a drawing of the fighting. When asked why he made the people without faces, he said, "I didn't put any faces because . . . they didn't notice I was there."

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These kinds of experiences clearly rub salt into the child's earliest wounds, heightening his fantasies about the potential of the unintegrated shadow side of himself and his parents, and compounding the feelings of helplessness and nonbeing that have already become associated with any stirrings of the autonomous self.

### *The Child's Hostile Dependent Bind*

The hostile dependent bind that results from the young child's difficulties with separation-individuation is likely to affect the developmental course over the long term, as illustrated in the following projective story told by a 9-year-old girl named Tess.



viewer as a very self-contained little girl who looked older than her years, enjoyed showing the way to the playroom, and apologized if she dropped a marker on the floor. This impression of Frances's pseudomaturity was deepened when Mrs. J made a two-hour appointment to see a counselor at our service. When the counselor explained that she would need to see the mother alone, Mrs. J said that was fine, because Frances could play by herself in the playroom with no trouble. In fact, Frances did sit in the playroom for over two hours, without once disturbing the interview or straying from the little pile of toys and snacks her mother had provided. Mrs. J did not find this behavior in any way remarkable. Frances's good-mother-me posture disintegrated, however, at transitions, as illustrated by the following incident.

#### *Transition from Mother to Father*

Mr. J arrived at the prearranged time and sat in the corner of the waiting room in a chair to the left of the door. He did not speak but tapped his fingers anxiously as he waited for Mrs. J to arrive with Frances. Mrs. J arrived some five minutes later and approached the front door of the center with Frances molded to her hip. As soon as the front door opened, Frances caught sight of her father and scrambled to get down from her mother. It is not difficult to understand that Frances was beginning to anticipate this transition with a sense of danger. She was being helplessly propelled toward the bad-mother-me state (the visit with her father), risking the loss of the good-mother. Frances also knew there was a danger that the violence between her parents could happen again. This little girl's anxiety was further heightened by the fact that she understood, from her mother's signals, that she was approaching a parent who was bad, in a way that she could not completely comprehend. Frances stood silently, turning neither to her father nor to her mother for comfort. Mrs. J remained standing in the doorway, vibrating with rigid indignation.

Frances then walked to the center of the waiting room, about three feet from both parents. She seemed to be at a loss. In this moment, the loneliness of her double-binding situation was painfully apparent. She turned toward her father and opened her mouth wide, so he could see that she was eating something. It was a distant effort at contact and a test of her mother's mood. Mr. J asked Frances what she was doing, and Mrs. J hissed, her voice



and asked Frances for a hug. She obliged, stiffly and with minimal contact, while Mrs. J stood by, barely tolerating the interaction. Frances immediately returned to Mrs. J and began to show signs of a tantrum. She became increasingly whiny, demanded to be picked up, to look in her mother's purse, to take off her glasses, and so on. She would not listen to her mother but badgered her angrily. It is not unusual for young children to express their frustration and rage in this way, resisting the mother's unspoken demand to relinquish their own autonomy and their connection to the father.

Some children feel angry with the mother for lying, because, after all, father was really nice and not bad as she said. The child's anger may also be fueled more or less consciously by the father. Mr. J, for example, exhorted Frances to behave. He reminded her not to have any more tantrums "when Daddy drops you off," because "it's hard for Mommy to manage." The unspoken message was that Frances had better take care of her mother, partly because he, too, was afraid of a scene. Frances dissolved into tears and arched her back as she was carried out to the parking lot by her mother, with father pacing along beside them. As she was put into the car, Mr. J asked for one more hug, all the while reminding Frances to be a good girl for her mother. Again, Frances was placed in an untenable double bind. The hug for her father in her mother's presence was emblematic of her dilemma: If Frances did not hug her father, he would be hurt. If she did hug her father, she risked her mother's rage and bad feelings. For Frances, being good meant being in the good-mother-me posture in which she nurtured, soothed, and avoided making demands. Frances might just be able to manage this posture with each of her parents separately; to do so with both simultaneously presented an insoluble conundrum.

#### *Discussion of Frances's Family*

The difficulties that Frances expressed in her transition behavior had their origins in the beginning of her parents' relationship. Mrs. J was a psychologically fragile woman, who had failed to achieve a complete sense of psychological separation from her own mother. Like many fragile parents, Mrs. J had also experienced a traumatic loss, in this case the unexpected death of an older sibling. This event resulted in the more subtle loss of her mother's emotional availability: "I never got my mom back after my sister died and I still feel that loss."



cally to her or his child. In contrast, infants and toddlers making transitions between highly conflicted parents, who could not communicate about their child in this way, appeared to be insecure, disorganized, and anxious regardless of the schedule. Under either condition, it is clear that the schedule alone does not account for differences in young children's adjustment and cannot substitute for the kind of working relationship that parents must develop. This reframing of the agenda—that is, focusing on the parents' communication rather than on the schedule—is the first order of business when beginning an intervention with highly conflicted parents of infants and young children. In this approach, the schedule is defined as an important buffer that may be necessary but is certainly not sufficient to ensure the well-being of the young child. To address the schedule only is like providing a paper parasol in a hurricane. As might be expected, the parasol constantly has to be taped up or replaced.

### *Parenting Interventions*

When the child is struggling with separation-individuation in a high-conflict situation, there are two focal points in the therapeutic work with parents: first, to address the panic of separation in the mother (or primary parent), and second, to heighten the father's (or nonprimary parent's) attunement to the child in areas where empathic understanding is truly lacking. This process requires the mental health professional to function as a neutral figure who can maintain a reasonably accurate and compassionate representation of the child's experiences and concerns. In this role, it is essential to assess each parent's capacities as fully as possible. This cannot be done without taking a thorough history of each parent in his or her own nuclear family. Without an understanding of the parents' own issues and conflicts, it becomes impossible to identify their effects on the present crisis. The history may indicate, for example, that one or both parents may themselves have failed to achieve a complete separation from a primary parent, leaving them dependent and lacking in inner resources. When the marital separation occurs, such parents experience a sense of panic that cannot be fully appreciated without an understanding of its earliest origins. The marital separation (as well as the child's attempts at individuation) may also evoke feelings connected to previous losses that remain unresolved. Vulnerable parents often cope with these stresses in inflexible ways that are difficult to modify. In the case of Mrs. J, for example, the early loss of her



sibling (as well as her mother's subsequent withdrawal) left her vulnerable to fears of abandonment and feelings of helplessness. She tried to avoid these feelings by controlling her present-time relationships as much as possible. Not surprisingly, Mr. J's withdrawal and her subsequent loss of control over her marriage and exclusive relationship with Frances were intolerable. Mrs. J responded by becoming all the more intractable and controlling in the postdivorce situation. Mr. J had learned to manage the loss of his mother (at his age of 3) by avoiding his own emotional needs, while stoically taking on practical care of himself and his siblings. Mr. J tended to recapitulate this role in his adult relationships. When their histories can be understood, the depth of each parent's intransigence in the face of his or her current crisis can be also understood more empathically.

When the parents have some capacity for self-reflection, the mental health professional can begin to help them differentiate those aspects of their responses that belong to the present from those that belong to previous trauma. Mr. J, for example, had been able to make use of psychotherapy since his divorce and was beginning to understand aspects of the passive-aggressive style that propelled him into the position of an ambivalent and resentful caretaker. This insight was essential in getting him to acknowledge his current confusion about his role in Frances's life; that is, he wanted more time with his daughter, but he was afraid that Mrs. J would fall apart without her. As a result, he blocked the move to Texas but did not insist on the kind of time with Frances that he wanted or felt she needed. As Mr. J began to come to terms with his ambivalence and to see that he had essentially placed Frances in the role of her mother's caretaker, he became more specific about the kind of time-sharing arrangement he wanted. When he was able to be clearer about what he really wanted, Mrs. J was able to calm her fears that he was planning to take Frances away from her forever.

Careful assessment of the parents' histories and present functioning can also help the mental health professional to evaluate their capacity to be empathic with their child. This essential quality depends on the parents' ability to tolerate a full range of feelings in themselves and to understand that the child also has a range of feelings that are separate and distinct from their own. Evaluation of this capacity occurs naturally as the therapist attempts to heighten each parent's empathic understanding and, in the process, discovers her or his degree of openness and flexibility. For example, when the



therapist reviewed with the parents her written description of Frances's transition, she was attempting to counteract their denial of their daughter's helplessness and isolation and to provide instead a compassionate interpretation of the child's experience. Mr. J used the interpretation to think about changes in his parenting behavior that could more effectively support Frances's needs. Mrs. J, on the other hand, understood the interpretation but could not hold on to it. As a result, part of the work in each session was to help this mother recall her understanding of Frances's experience and separate it from her own. When this kind of groundwork has been done successfully, each parent will begin to think differently about the child or at least be able to tolerate the therapist's point of view about the child as a separate person.

#### *Addressing the Panic of Separation in the Anxious Parent*

At this point, the therapist can begin to sort out the anxious parent's realistic concerns about the child's separations from those that are distorted by his or her own needs. When this sorting-out process occurs in the presence of an empathic and respectful other, the anxious parent has the opportunity (often for the first time) to fully articulate his or her worries without being dismissed as hysterical, hypersensitive, or overcontrolling. Mrs. J, for example, was realistically concerned about Frances's safety with Mr. J because he frequently took her on visits to his parents' home, which had an unfenced swimming pool. No matter how much Mr. J reassured his former wife that he would watch Frances at every step, Mrs. J did not feel comfortable with the situation. Mr. J tended to dismiss her concerns as one more example of her need to control every move he made. The therapist, however, supported Mrs. J's concerns and asked Mr. J to arrange for the use of a temporary fence. At the same time, Mrs. J was equally concerned that Frances should not be exposed to Mr. J's girlfriend, claiming that the child would be confused about who her real mother was. This issue reflected Mrs. J's own worries about her capacities to be a competent and nurturing parent, because she herself lacked an internalized good-mother. Mrs. J's anxiety about her capacity to be a good mother was a real concern that required careful attention. However, it could not be resolved by erasing Mr. J's girlfriend from Frances's life but rather by focusing on Mrs. J's own parenting skills and supporting her as she struggled to find a way to be more nurturing and



figure the oedipal triangle. Instead, the child must find solace in identifying with the gifts and capacities of the same-sex parent and in the delayed fulfillment of sexual wishes (Ross, 1982). A boy no longer expects to marry his mother but hopes to grow up and marry someone just like her. A girl will consolidate her identification with her mother in a similar way. With this success, the child begins to internalize the parents' jointly held standards for being good (i.e., controlling aggressive and sexual impulses) and is diverted from courting the exclusive acknowledgment of the opposite-sex parent. Instead, she becomes focused on learning how to earn acknowledgment in the world of peers. The new competencies that result can then help the child feel able and entitled to achieve his or her delayed wishes and fantasies in the future (Erikson, 1963; Fast, 1990).

#### VULNERABILITIES IN OEDIPAL CHILDREN IN THE HIGH-CONFLICT FAMILY

In high-conflict families, the child's normal rivalries with the opposite-gender parent are often seen as pawn's moves conceived by one parent to undermine the other. As a result, vulnerable parents tend to feel attacked or betrayed as their child begins to change and grow. They may respond by becoming anxious, withholding, or punitive toward the child. For children in such a situation, it is not difficult to imagine that ordinary maturational impulses can begin to feel dangerous. There is no safe way forward, and no real way back.

Children caught in this kind of untenable bind tend to become symptomatic. Mothers of boys as young as 2½ describe feeling confused and angry when their sons begin to oppose them, to imitate their fathers, to distance themselves, and to reject their mothers. Typically, this oedipal behavior is followed by renewed signs of separation panic, as these boys become overwhelmed by the fear of losing their mothers forever. Little girls, on the other hand, often seem less overtly troubled as they confront issues of gender and sexuality. A closer look, however, suggests that girls in high-conflict families maintain a connection to their mothers by withdrawing from their own emerging power and sexuality. Some little girls, fueled by their rivalrous feelings, become oppositional with their mothers, while others reject whatever they perceive to be feminine in themselves and in their mothers.



In the endless spiral of the parental conflict, these new symptoms in the children, in turn, provide further ammunition for the battle. Increases in masturbation and sexualized play, which are particularly but not exclusively observed in boys in highly conflicted families, are perhaps the overt symptoms most likely to escalate the conflict. It is not uncommon for these symptomatic behaviors to trigger accusations of child molestation by one parent against the other. Such concerns about child sexual abuse should no more be automatically dismissed because of the presence of parental conflict than they should be automatically believed. Rather, we suggest here that it is the child's experience, including the developmental meaning of sexualized behavior and erotic play, as well as the possibility of actual abuse, that should be explored and understood.

## BOYS IN HIGH-CONFLICT FAMILIES

### *Vulnerabilities in the Formation of Gender Identity in Preoedipal Boys*

When little boys recognize that they are male, they also recognize that they are different from their mothers, to whom they are usually primarily attached. Therefore, consolidating his gender identity represents a significant step toward becoming an autonomous person. When separating from a fragile mother in a conflicted relationship feels dangerous, the additional step of consolidating gender identity can feel dangerous as well. The boy in this situation must contend with already entrenched fears that his mother will disintegrate in his absence or abandon him as punishment for leaving her, as well as with new fears that he will drive her away by becoming just like his father, who is toxic to her. The bind is that to become separate and male is to be abandoned by his mother, while staying merged with her is to risk emasculation.

This conundrum invites a kind of split that is organized around gender. In this defensive solution, boys appear to experience their maleness and their sexuality as a fragmented part of the self, the bad-mother-me, who makes the good-mother go away by striving toward separateness and the toxic father. The connection to mother (as well as the longing for intimacy and nurturance that is part of that connection) becomes associated with the good-mother-me, who keeps the good-mother satisfied and close. Unfortunately, this good-mother tends to threaten rather than embrace masculinity. What is disturbing here is that this kind of splitting works against



of intimacy with their sons in ways that violate appropriate physical boundaries. One mother, for example, acknowledged that she did not really want to help her son master sleeping alone because she felt reassured by his regressive longing to curl up next to her at night. Other mothers literally will not relinquish control of their son's bodies, remaining intrusive in toileting and hygiene long after the child could be taught to take responsibility for himself.

With this loss of boundaries, boys are likely to feel erotically stimulated in ways that deepen their fears of mother's engulfment and father's aggression. If the father has actually been physically violent in the past, the boy's fantasies about the father's rivalrous aggression have a terrifying basis in reality. For oedipal boys in a high-conflict situation, then, the dilemma is to remain emasculated, impotent, and connected to mother (and devalued or abandoned by the father) or to become male, sexual, and separate like father (and devalued or abandoned by the mother).

### *Oppositional Symptoms*

The way in which this conundrum ultimately shapes the boy's emerging sense of self, gender, and sexuality depends in large part on the availability and relative power of each parent. If the father is available, the boy may solve his dilemma by taking on the father's characteristics, thoughts, and feelings as if they were his own. All connections to the potentially engulfing mother and the good-mother-me aspects of the self that were connected to her are severed. The short-term risk is that these little boys may become imprisoned behind a wall of opposition toward their mothers, which cuts them off from her nurturing as well as from their own capacities for gentleness and intimacy. Over the long term, the risk is that boys in these situations may consolidate a kind of impersonal masculinity defined by an absence of these nurturing qualities. Furthermore, that impersonal masculinity may be affirmed by violence, if the boy has understood violence to be an essential aspect of being male and an instrument of power and separateness.

If the father cannot be available, or if the mother is so powerful that the risks of separating are too great, then boys are at risk of becoming immobilized, depressed, and confused about their masculinity and of remaining merged with the mother. For these boys, there seems to be no safe way forward into manhood.



first, saying, "Now why should I give him the idea that I approve of that lying son of a bitch? He certainly is not doing the same for me . . . and besides why can't Nathan just take James [her lover] as a role model!" In response, the therapist explained that Nathan felt himself to be a part of his biological father. The qualities in his biological father that his mother *could* accept represented the basis upon which Nathan would be able to weave together the mother/father identified parts of himself. The therapist emphasized that if Mrs. M could not provide this kind of support, Nathan would likely try to preserve his relationship to his father and his masculinity by pulling away from her completely. Although Mrs. M could not identify any qualities that she currently appreciated in Nathan's father, she was able to recall qualities in the man as she had known him when they married. It was these memories that she began to impart to her son.

### SETTING RULES AND EXPECTATIONS

When parents can cooperate about rules and limit setting, the child derives comfort from the resulting clarity about how to be good. This consistency, over time, becomes internalized as the child's own moral standard. When parents cannot explicitly support each other by sharing the same rules, they can work toward communicating a general expectation that the child will abide by the authority of the adults in charge, even if the specific rules are different; that is, one parent may say, "You will do it this way in my house, and I don't care if you do it differently at your [other parent's] house. When you are here, you follow my rules, whatever they are!"

For Nathan, neither the attempt to support his identification with his father nor the attempt at parental cooperation proved to be effective. In spite of the therapist's efforts, Mr. M continued to actively encourage Nathan's opposition in relationships with most authority figures, including Mrs. M. He was convinced that his son's defiance of her was an appropriate reaction to her toxic and overcontrolling parenting. Similarly, when Nathan was expelled from a summer camp for repeatedly throwing food in the dining hall, Mr. M was outraged that the camp director did not sit down with Nathan to hear his views on the topic. He felt the camp director was dictatorial and told Nathan so.

When the parents' disparate expectations continue to confuse and double-bind the child, a shift from joint to sole legal custody may be appropriate. In Nathan's case, joint legal custody was too well entrenched to shift without



## Chapter 6

### School-Age Children

#### The Struggle to Feel Lovable, Good, and Competent

In the ordinary way of things, the school-age child is focused on mastering a variety of physical, intellectual, and social challenges in the world beyond the family. Peer relationships, as well as relationships with adults other than parents, become vital anchors along the way. To a large extent the child's progress depends upon the continuing support of his or her family and the strength of internal resources achieved in preceding developmental stages. In particular, the well-functioning child draws on a steady sense of self-worth and trust. This foundation can help the school-age child to tolerate learning from failure as well as from success. In addition, children rely on an inner standard of right and wrong to guide their participation in the larger community. When these achievements are in place, "the inner stage is set for entrance into life" (Erikson, 1963), and the child can use the grade-school years to braid together what Bibring (1961) identified as the essential component of enduring self-esteem: the capacity to feel lovable, good, and competent.

#### BASIC TRUST AND THE CAPACITY TO FEEL LOVABLE

If the child's earliest relationships have provided a predictable supply of empathic nurturing and support, then he or she is likely to develop the basic



trust that is rooted in a reasonably constant sense of being lovable. Basic trust allows the child to turn to others without fear of becoming infantilized or disappointed when life's demands threaten to undermine this sense of self-worth. When basic trust is in place, the school-age child expects that adults—such as teachers, coaches, troop leaders, other parents—will provide the same kind of empathic support that his or her own parents have consistently provided. In fact, these very expectations, in turn, tend to engage the adults' support and affirm the child's original trust.

### *The Growth of Relationships and Social Understanding*

When 7-year-old Rose was in second grade, her best friend was a popular, willful little girl named Gillian. Rose, who tended to form intense connections with one friend at a time, was devastated when Gillian began to pal around with two other girls, who were the "princesses" of grade three. Although Gillian still wanted to be her friend as well, Rose was too resentful for compromise. She was preoccupied with feeling sad and angry about Gillian's betrayal and was disappointed when she tried to make new friends who did not seem to be nearly as much fun as Gillian. In her after-school program, Rose became noticeably bored and sometimes rude to the other children. After one such episode, she confided crabily to a teacher, whom she had known since kindergarten, "No one's fun like Gillian. I hate her . . . and I try to make new friends but nothing works . . . It's not the same, Gillian felt like my family, my sister! No one else feels that way."

At that point, the teacher wisely suggested that friends do not always feel like family. She told Rose, who played soccer, that friendships are like sport; they require practice and even coaching. After mulling over this new idea for a bit, Rose asked who could coach her. The teacher volunteered to do so, when Rose was in the after-school program. She said, "When you start to get cranky or bossy with your playmates, I'll remind you. We'll have a signal. Pretty soon, you will have some new friends." Although Rose progressed in a "two steps forward, one step backward" style, she eventually tipped the balance in favor of tolerance. After several months of coaching, Rose told her teacher she had invited Gillian and another friend to play at her house the day before. The teacher asked how things went and Rose replied, "It was good. . . . I told my mom how to coach me and it really worked!" In this situation, Rose was not questioning whether she was lovable or good; instead, she was irritated by the loss of what she felt



mally, this realization will deepen his trust in relationships and diminish his fear of failure in the future.

#### WHEN BASIC TRUST FAILS AND THE CAPACITY TO FEEL LOVABLE IS TENUOUS

For the youngster in an embattled divorced family, this type of progress through the grade-school years may be blocked as much by current conflicts as by compromised achievements in the preceding stages of development. If, for example, vulnerable parents were not able to be consistently and empathically responsive during the separation-individuation phase, the child will fail to completely internalize a steady and self-supporting sense of being lovable (see chapter 4). Lacking reliable inner resources, the child will continue to depend on emotional supplies that are unpredictably or only contingently available. A vulnerable parent may, for example, respond empathically only if she has access to some kind of emotional support herself. In this situation, the parent's availability is likely to seem entirely unpredictable to the child because it depends on unseen processes within the parent. The child remains preoccupied with figuring out how to control the parent's responsiveness because his or her survival and sense of self depend on it. In other situations, a vulnerable parent may be contingently responsive, often when the child is gratifying in a particular way. If these patterns persist, the child's sense of being lovable feels tenuous and hopelessly confused with being good. Being good becomes defined as being able to evoke the parental response that the child desperately needs but cannot trust, whereas being bad might result in a terrifying loss of the parent's physical or emotional presence, an abandonment.

#### *The Child's Defensive Fragmentation*

If early development has been disrupted in this way, the school-age child's "inner stage" is not set "for entrance into life." Instead, the child remains focused on the primary players in the first act (the parents) and the central question of whether he or she is lovable in their eyes. The child will unconsciously resolve the awful ambiguity of this question by developing an unconscious script for predicting his or her own part in the drama as well as those of parents. The script contains rules and expectations for understanding and controlling how to remain lovable and good and avoid being



unlovable and bad. Typically the script is entirely unconscious. Its rigid shaping of thought, feeling, perception, and behavior is best detected in the repeated themes of children's projective play, stories, and role plays. It is important to note that this unconscious script is likely to depart significantly from the self-description that children borrow from family mythology and will readily articulate.

The child's preoccupation with how to remain "perfectly good" and therefore lovable can inhibit confident progress and result in a profound sense of shame and fragmentation. Eight-year-old Karen, for example, had been the subject of her parents' bitter and sometimes violent conflict since her age of 18 months. Now in third grade, this bright and verbal child described her sense of inner disconnection by explaining to her therapist that she had "good parts" to show to the world and "bad parts" that she could not show. When the therapist asked Karen what these different parts of herself were like, she carefully divided a piece of paper in half. On one side she made a list of perfect attributes, on the other a list of negations: "awesome" versus "totally dorky"; "popular . . . everybody loves me" versus "creepy . . . everybody hates me"; "smart" versus "retarded"; "beautiful" versus "really ugly."

Karen's struggle with this shifting sense of whether or not she was lovable and good left her feeling acutely vulnerable to the judgment of others. A central question in every interaction was whether others would see the "good Karen" or the "bad Karen."

#### *How the Child's Defensive Fragmentation Can Undermine Relationships*

Developmentally vulnerable children like Karen seem to understand other people in equally simplistic terms. Eleven-year-old Wendy, for example, explained that she was really good friends with her classmate Margaret at the beginning of the school year. "She was really nice to me, we were like friends . . . but then she wouldn't sit next to me at the assembly and now I know she's really mean. . . . She fakes it when she feels like it." Wendy could not explain what had gone wrong between herself and her classmate, nor was she willing to explore the topic. She dismissed Margaret and the relationship with a shrug, saying, "I don't know. I thought she was like this really neat person, but she's really a creep. Sometimes she's nice now, but I know she's a big liar." Wendy was not interested in any further explanation



or exploration of her disappointment. From her point of view, she had solved the problem.

Like many of the school-age children in our project, Wendy seemed to have little capacity to tolerate fluctuations in her friend's attitude or behavior. Instead, unable to bear the threat of abandonment that Margaret's slight evoked, Wendy reverted to a scripted understanding of her friend's behavior. She decided that her friend had simply shifted from being "a really neat person" to being "a creep." This understanding was entirely consistent with Wendy's unintegrated experiences of other people and of herself. Ironically, Wendy's inability to stand the pain of her friend's inconstancy (without an immediate flight to the comforting confines of her inner script) robbed her of the chance to learn new ways of understanding relationships.

#### *How Defensive Fragmentation Can Undermine Social Understanding and New Mastery*

When children like Karen and Wendy fail to internalize a constant sense that they are lovable, they remain dependent on the reassurance and support of others to maintain a positive sense of themselves. Whenever that support is withdrawn, the child is left feeling unbearably unlovable, bad, and even nonexistent. Because of this, every interpersonal failure, from the mildest criticism to an imagined slight, tends to be experienced as a terrifying fall from grace. Parents in conflicted divorce situations are often baffled by their grade-school child's intense reactions to any type of confrontation or correction. Ten-year-old Karl's father, for example, described how he caught his son in a white lie and confronted him. He said, "Karl seemed to literally fall apart before my eyes . . . screaming and crying like I had accused him of murder! He totally denied it, like it couldn't possibly have happened, as if what I *knew* was true couldn't possibly have happened, had nothing to do with anything real. . . . I just could not bring it up again!" Karl's developmentally primitive belief, that bad and good are unconnected, can turn even the slightest human fault into unlovable "badness" without hope of redemption. This fragmented understanding of self and other, that tends to dominate these children's inner scripts, makes it impossible for them to acknowledge error. Their panicked flight into denial in turn robs them of the chance to learn more about how people see them and how to handle criticism more competently.



able to hold on to his affection for Scott in spite of his disappointment and confusion. This capacity to tolerate discomfort and ambivalence can catalyze new maturity.

#### *How Defensive Fragmentation Can Undermine Moral Growth*

When children cannot bear the natural ups and downs of friendship because they depend so completely on others to feel lovable and good, moral growth is sacrificed to the need for connection. When 10-year-old Leslie, for example, returned from a visit with her father and his girlfriend, Teresa, she confessed to her mother that she had spent her pocket money on a birthday card for Teresa. When Leslie saw that this news made her mother furious, she quickly added that her father had spanked her when she did not want to buy the card, so she felt she had no choice. In reality, Leslie's father was a passive man who never spanked his daughter; in fact, he had trouble getting her to do anything she didn't want to do. In addition, Leslie enjoyed a close relationship with Teresa and preferred visits that included her. Still, in that moment of confrontation, nothing else mattered to Leslie except the need to soothe her mother and restore the feelings of being lovable and good in her presence. All Leslie's other loyalties slipped away. It is difficult for children to follow any kind of moral standard when the need to feel loved, on any terms, is paramount.

#### *How Defensive Fragmentation Can Disrupt the Capacity for Empathy*

Sometimes when children succeed at being "good" (by meeting the exacting demands of the powerful other), they seem to feel almost superhumanly perfect. At these times, all frailties experienced as "bad" (unworthy and unlovable) are split off from consciousness. Empathy, the essential moral fiber of human relationships, cannot develop in this defensive fragmentation. When, for example, 9-year-old James ordered his 4-year-old stepsister to walk four blocks with him to the grocery store, she went. When he then insisted that she walk home alone (because he had met a friend at the store), the child wept and begged him to accompany her. James refused and walked away without a backward glance. When James's father learned about this, he was appalled by his son's coldness. Later, James told his counselor, with a shrug, "She's a stupid wimp. I would never beg



like that. She could go home alone. Big deal!" James's harsh view came from the power he gained from feeling he was "perfectly good" because he needed nothing. He unconsciously split off from any feelings of vulnerability or neediness that might undermine this state of perceived perfection. As a result, he was unable to identify or acknowledge these feelings in his young stepsister. He turned his back on her weeping in precisely the same way he turned his back on his own pain, because it was unbearable.

This lack of fellow feeling stands in sharp contrast to the empathic powers of a typically developing school-age child. When 8-year-old Peter teased his little sister until she began to weep with helpless rage, he paused to notice that she was really distressed. Making a small crooning sound of comfort, he stooped and put his arms around her. Peter was able to perform this simple act of kindness because the part of him that felt powerful was not achieved by disowning the part of him that felt helpless. Even when he felt powerful, he could identify and empathize with his sister's vulnerability. Moral sensibility and action rest on this essential recognition of the humanity of the other.

#### *How the Parental Conflict Can Undermine Moral Growth*

The daily realities of the parental conflict may threaten the child's capacity to hold, with any integrity, to a consistent standard of right and wrong, even if development has been reasonably steady until that time. This is because, in a high-conflict situation, each parent is likely to explain to the child that he or she (in contrast to the other parent) is on the side of the angels. In fact, these conflicting messages tend to become more overt as children reach school age, because the parents tend to see the child's growing awareness and rationality as a new capacity to make judgments about the other parent. The child now has the potential to become an informed ally in the conflict. Parents often say that they need to fully explain the other parent's failings to their child to teach appropriate standards of right and wrong. This need for moral guidance, they say, now supersedes the child's need for protection from the conflict. As one father explained, in a tone that was both self-righteous and bewildered, "My kid's furious with me for pointing out bad things about her mom, but it's time she learned. How else do I help her know right from wrong, now that she's getting older? I'm like a mirror for both of them; they hear about their faults from me and they hate it, they prefer denial!"



one that was flattened, run-over, a cat." "This one is of a rainbow being washed away by the morning breeze, 'cos you can see the colors are dripping and melting away." "A flower that is dying."

### *Rules and Expectations About Relationships*

Additional findings indicated that by the time they reach school age (if not before), these children have consolidated a set of rules and expectations about relationships that protect, on the one hand, and isolate from corrective experience, on the other. Specifically, they tend to ignore intense or complex feelings and oversimplify their own and other people's ideas to the point of distortion. Rorschach testing showed that unusually high levels of unexpressed anger are central among the feelings these children try to avoid. While this shutting-down process works to reduce experience to patterns that can be predicted and controlled, it also closes children off from vast amounts of interpersonal learning that ordinarily occurs during the grade-school years.

In almost half the youngsters tested, their pervasive lack of basic trust, alienation from other people, and unexpressed anger accumulated to a level of clinically significant hypervigilance; that is, their psychological energy was devoted to vigilant scanning of interpersonal and intrapsychic experience. Again, the content of children's responses provides some insight into the substance of the quantitative deviations in the Rorschach test scores. Their responses communicate the kind of dangers that might erupt in themselves or others without this ceaseless hypervigilance. For example: "A monster. Right here are eyes, and he's really mad, eyebrows like this, and dots in eyes, his face, this is his mustache, my dad has a mustache." "Look at this demon . . . two legs . . . his head . . . a big roaring mouth . . . two eyes and he has spikes on top of his head." "Some kind of devil or a pirate with a big greedy mouth." Furthermore, responses frequently contain benign figures that have threatening elements, and vice versa. These suggest a world in which the split-off "shadow side" of human experience intrudes with terrifying unpredictability. For example: "Two clowns clapping hands and their heads just came off." "Santa Claus, the hat, beard, nose, tummy, and this pirate sword." "Frankenstein doing the splits."

Because they expect so little from others, these children seem to expect everything of themselves, inflexibly using their own thoughts and ideas as



protection and control, but at the cost of their capacity to be spontaneous, flexible, and, ultimately, real.

### *The "Happy-Happy Joy-Joy" Mask*

Some children find safety in patterns that limit their own awareness or expression of any authentic aspects of themselves. These children do not seem to be fully present as they relate to others. They appear instead to offer a kind of inflexible mask which screens them from any real contact. Some children maintain this kind of distance by pleasing and distracting with their smiling responses to the cues of others. In this presentation, any feelings of anger, sorrow, or opposition seem to have been erased from inner consciousness. Karen (described earlier), who saw her father assault her mother on several occasions, provides a case in point. When she was first seen, her counselor noted, "She talked without stopping, as if silence or stillness would be intolerable . . . hugging me tightly at the interview, saying, 'I like you sooooo much.'" Karen's frenetic efforts to please and entertain seemed to be her way of managing the terrifying inconsistencies she described in the following story.

"This is the story of Little Red Riding Hood. She lives in a big dark forest. Sometimes she lives with the beautiful good fairy and sometimes she lives with the wolf. Sometimes the good fairy tells her, 'You are so good and so smart and so beautiful and so everything I always wanted you to be.' But some days Little Red Riding Hood forgot to bring the fairy fifty cents . . . then the fairy would yell and scream and say, 'Get out of here and go to the stupid wolf!' and she would wander off into the dark forest and get to the wolf's house. The wolf would say, 'Oh you are so beautiful and good and sweet my little puff ball . . . ' but sometimes he would roar, 'Where's my meat?' and Little Red Riding Hood forgot the meat and she was scared so she ran off into the forest until she got to her secret box of clothes and she put them on and turned back into a perfect princess."

Karen's longing for a protective state of perfection was also reflected in a drawing she completed during group work. The task was to draw a completely private room that contained anything that could be imagined. Karen's room contained only a magical dress-up box that could turn her into a fairy princess whenever she wanted. Later, in treatment, Karen began to refer to her inflexible sprightliness as her "happy-happy joy-joy



mask." Children like Karen seem to consolidate this kind of artificial exterior when their experience of love and protection in primary relationships has been fundamentally unpredictable. As a result, they need to feel completely in control of themselves and their contact with others to feel real, protected, lovable, and good. In Karen's case, these feelings depended on an appearance of perfect responsiveness.

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#### *The Facade of Remote Self-Control*

Other children achieve a kind of safety by refusing to be drawn into any interaction that might jar their self-control. In this presentation, spontaneity is cut off and replaced with a kind of impenetrable remoteness, which serves to mask the underlying vulnerability. For example, when Leslie (described earlier) was first seen, she marched, silent and unsmiling, into the counselor's office, where she sat down in the counselor's chair. She spoke very little and answered all direct questions with a shrug. After some coaxing, she approached the sandtray. In her first play, a baby dinosaur repeatedly teamed up with "its mother" to bury a third dinosaur "who was always trying to butt in and play with the baby." When asked if the third dinosaur belonged with the first two, Leslie said, "The baby's not sure, but the mother comes and fights it off." Leslie then anxiously dug out the buried dinosaur and began the play again. She masked her worries and ambivalence with an appearance of solemn, almost mechanical self-control. This outward presentation did not shift for many months. During the intervening period, Leslie seemed to hover at an invisible interpersonal boundary; that is, she was physically in the room but was emotionally unavailable. She spent hours sifting sand with her back to the counselor but checking periodically to see whether the counselor was still watching. Later, she would write messages in the sand and then challenge the counselor to decipher them. She responded to the counselor's inevitable failures with the resigned disappointment of a tired adult. In this way, Leslie managed to communicate how she felt as she repeatedly failed to solve the endless puzzle of her parents' paradoxical demands.

In this defensive configuration Leslie did not acknowledge her confusion or her helplessness in the face of her parent's conflict. These feelings were split off from her conscious awareness because they were unbearable. Instead, she presented as being fully in control, both rejecting and bored,



while she induced feelings of helplessness and confusion in her counselor. It was the counselor who described session after session of feeling immobilized, distant, unable to figure out what was going on, and cut off from any possibility of connecting with Leslie. After an arduous number of these numbing sessions, the counselor began to talk to Leslie about the feelings that seemed "so big for you that they floated out for me [the counselor] to catch." Leslie at first resisted, then slowly began to tolerate this gentle but persistent acknowledgment. When this kind of tolerance develops (and there is no substitute for time and patience here), real contact in the treatment relationship may become possible.

Both Karen and Leslie achieved a measure of safety and distance by presenting a pleasing or controlled facade. This kind of presentation is consistent with girls' defensive tendencies to avoid separation and definition in high-conflict families. It also fits well with the kind of social expectations that confront girls in their school-age years, and it provides the appearance of 'fitting in.' In projective play, however, the underlying constriction is often represented as a kind of death.

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### *Intermittent Explosiveness*

Boys in high-conflict families often have a more difficult time organizing themselves quite so neatly. Areas of safety and danger seem to be more amorphous for them and less easily defined. Nine-year-old Kurt's mother, for example, described him as "trying very hard to take his dad's place. He helps me out with the kids, he's incredibly sweet . . . then he gets mouthy and goes into these tantrums like you would not believe . . . and I don't know what to do with him then." His parents' divorce and bitter conflict had robbed Kurt of any regular contact with the father whom he loved and blindly admired. He was furious with his father for leaving, and with his mother for banishing him. He could not acknowledge his anger toward his father for fear of hurting him. Nor did he feel safe expressing his anger toward his mother, because he knew she was his only real support in the world. At the same time, he could not relinquish these feelings. First of all, the anger was a tolerable way to mask his underlying pain and to set a boundary between himself and his mother. As Kurt's mother said, "He shows only the anger, not the hurt." The anger also represented a way for Kurt to maintain a kind of connection with his often explosive father. For



achieving autonomy. As adolescents de-idealize their parents and become more emotionally disengaged, there is typically a loss of some superego control, as the youngster becomes temporarily less influenced and grounded by parents' approval and censure. Consequently, uncharacteristic misbehavior and minor delinquencies can occur.

Parents typically need a great deal of self-confidence and support from each other to weather the storm of assaults that normal adolescents make on their self-esteem, judgment, and authority. Clear expectations, firm, consistent limits, and appropriate monitoring of the young person's whereabouts and behavior are important to sustain during this time. Young adolescents are particularly stabilized by the ability of parents to cooperate and provide a united front in their care and guidance. This kind of environment is not available in highly conflictual families where parents disrespect and denigrate each other.

As a consequence of divided parental authority and the competition for the youngster's affection and allegiance, adolescents can easily dismiss one or both of their disputing parents or manipulate them both to obtain special privileges and avoid responsibility. Moreover, because disputing parents are not able to communicate and coordinate with each other, monitoring the whereabouts of the elusive young teenager becomes almost impossible. It is not uncommon in high-conflict divorced families for young teenagers to precipitously reject, or be rejected from, the household of one parent as a consequence of fairly normal adolescent challenges to parental authority. This often happens when the acting-out becomes linked to the ongoing parental conflict. Of course, they are usually welcomed with open arms by the other parent, who is highly gratified by their defection from what is perceived to be "the enemy camp." In the ensuing struggle, the internal images of one or both parents are precipitously de-idealized, leaving the youngster without moorings. In this way, parents undermine not only each other's authority and status as an ego ideal but the adolescent's perception of what is fair, expectable, and responsible conduct as well. Hence conscience development is further eroded, and delinquent behavior may consolidate.

The costs of separating from a primary parent and becoming psychologically autonomous are too great for some young adolescents, and they do not dare attempt the enterprise. This is especially true for youngsters who have lived at the center of the marital battle for many years, as well as for those who have assumed the burden of sustaining an embittered, depressed, and emotionally dependent parent in the fight with the ex-spouse or with



part, which precipitated the separation. At the time of entry to our counseling service four years later, the mother had remarried and had a new baby, while the father lived with his widowed mother. An initial shared custody arrangement, recommended by a custody evaluator, rapidly broke down and was shifted by court order to give the mother primary care of Jason, who visited his father on alternate weekends and some holidays. The father was chagrined at this arrangement and continually agitated to have more time with his son.

Though an attractive and intellectually gifted woman, the mother was impulsive, emotionally labile, erratic, and unpredictable in relationships with others. She had a shifting view of relationships and was markedly lacking in self-confidence. In the ensuing custody dispute, she relied excessively on advice from a series of professionals, attorneys, and therapists, whom she initially hired and idealized, and then de-idealized and fired when they failed to meet her needs and expectations. The father, by contrast, was extremely interpersonally sensitive, quick to take offense, and easily humiliated. He was also intelligent, competitive, and ambitious in his work as a football coach at a prominent college. He was defensive and distrustful to the point of being paranoid about the series of therapists and evaluators that the mother involved in the ongoing custody litigation.

Both parents were highly vulnerable to criticism, to any sense of failure. Both were highly invested in Jason, whom they both perceived to be an extension of themselves whenever he was gratifying, good, and well achieving. He was perceived to be an extension of the other parent when he was ungratifying and underachieving. Sadly, Jason had a congenital deformation that left him slightly crippled. He also had some emotional and behavioral problems, largely as a consequence of the long-standing, entrenched parental disputes. Not surprisingly, the boy's problems were a constant source of narcissistic injury for both parents.

Typically, the mother became extremely anxious and disorganized, openly blaming the father whenever Jason was unhappy or difficult to manage. She usually did this to publicly humiliate the father among his prominent friends, family, and colleagues. The father felt that this was intolerable and typically became enraged. During the marriage, this kind of public criticism precipitated his controlling behavior and violence toward her. After the separation, it precipitated another round of litigation, in which the mother's requests were dismissed in court. (In the legal arena,



## Chapter 8

### Parental Alignments and Alienation Among Children of High-Conflict Divorce

Most children and adolescents of divorce are eager to have an ongoing relationship with both of their parents, and most are pained by loyalty conflicts and the fear that they might have to choose one parent and lose the other. A minority of children, however, will become enmeshed in the parental conflict to such a degree that they are said to be aligned with one parent and alienated from the other.

When this happens, rejected parents may give up and go away (thus contributing to the dropout rate of fathers after divorce). A small proportion of rejected parents, however, do not disappear from their children's lives without protest; instead, the matter becomes a subject of litigation in family court. In these cases, judges are called upon to arbitrate, while mediators and therapists are expected to resolve the problem through negotiation and counseling. Police may be asked to enforce court-ordered visitation between a reluctant child and the persistent parent. Within the polemics of court litigation, the aligned parent may be accused of aiding and abetting the child's noncompliance and of "brainwashing" the child on behalf of the parent's own agenda. This all results in a plethora of ethical, legal, and family dilemmas usually regarded as extremely difficult if not impossible to resolve to everyone's satisfaction (Lund, 1995; Turkat, 1994).

This chapter summarizes an array of etiological factors that contribute



of developmental factors: the young child's capacity to apprehend both sides of the conflict, which results in intolerable loyalty conflicts, and the young adolescent's tendency to adopt a judgmental or moralistic view of the situation. In addition, as the child enters adolescence, there is typically greater pressure from family members to take a more active role in the parental fight, because the child is now perceived as being "old enough to take a stand." Parents need to be educated about these expectable shifts in attitudes and behavior, to see them as quite normal; otherwise, they can be exacerbated and intensified by parents' anxious, punitive responses to the child and the competition between the parents for the child's affection and allegiance.

## PATHOLOGICAL FACTORS

### *The Chronicity of the Parental Conflict*

In general, the more intense and prolonged the divorce conflict and the more exposed children are to parental disputes, the more likely the children will be drawn into an alignment with one parent and become alienated from the other. This is an expectable outcome, and parents should be warned of this possibility early on in counseling. Of course, the optimal goal is to have them cease fighting and cooperate in their parenting, but this is not always possible. Instead, the counselor can help parents to construct protocols for communication, barriers to constrain their interaction (e.g., no in-person contact), and buffer zones for the child (e.g., exchanges at a neutral, safe place). Antagonistic parents are encouraged to develop separate, parallel parenting relationships with their children, governed by an explicit court order that documents their access schedule, times, dates, and place of exchange for all occasions. The need for collaborative decision making should be kept to a minimum, with mediators or arbitrators used when necessary.

### *The Parents' Contribution to Alienation*

THE ROLE OF THE ALIGNED PARENT. It is important to consider the psychological dynamics of each parent in creating and maintaining the aligned/alienation syndrome within the highly conflictual divorcing family. Both the covert and the overt tactics of the alienating parent have long been recognized and are well described elsewhere (Clewar & Riven, 1991;



Gardner, 1987). In general, the alienating parent has been portrayed more or less unsympathetically, as one who is primarily vengeful and malicious. From our perspective, separation and divorce for these parents is typically experienced as loss (with accompanying feelings of anxiety, sadness, and fear of being alone). It is also experienced as rejection (together with feelings of shame and failure). Consequently, these vulnerable people can become acutely or chronically distressed. For relief, some turn to their children for nurturance and companionship, as allies against the world and as the salve for their wounded self-esteem. Others, in an effort to defend themselves from the humiliation of rejection and failure, project all the blame onto their divorcing spouse, whom they now view as the bad parent: endangering, neglectful, and irresponsible. As a result, they feel self-righteously compelled to fight to protect their children from the other parent.

To have their own needs met, the children must reflect whatever the wounded parent needs and wants. Consequently, these children can become vigilant and highly attuned to the parent. The child fears that disappointing or abandoning the depressed or emotionally volatile parent (often the mother) may result in being ignored, rejected, punished, or even destroyed by that parent. Alternately, sensing an apparent omnipotence in caring for a distressed parent, the child acts as though the parent's survival depends on his or her constant vigilance and caretaking. For these reasons, the child may find it extremely difficult if not impossible to leave willingly for visits to the nonresidential parent, fearing what might happen to the left-behind parent during his or her absence, or out of anxiety at disappointing and betraying that parent by "going over to the other side."

Parents who wittingly or unwittingly fuel alienation in this manner need a combination of support (for their own distress) and counseling (to help them to relieve the burdens they are placing on their child). Many of these empathic children can also use a supportive counselor to help them withstand the pressure to rescue their parent and maintain their own integrity. This kind of intervention needs to be paired with gradually increased access arrangements at a rate tolerable to the child. In extremely rare cases, where the aligned parent is flagrantly psychotic or unremittingly sociopathic in the use of the child, a radical custody change may need to be effected to rescue the child.

**THE ROLE OF THE REJECTED PARENT.** The part played by the rejected parent in maintaining the child's alignment has received very little attention to



date; hence, these parents have been viewed somewhat as passive victims of the other parent's vengeful rage. It is our observation that alienated parents are often rather inept and unempathic with their youngsters. While the aligned parent is fueling the child's alienation (either overtly or covertly), the rejected parent is often contributing to the alignment by a combination of counterhostility and dogged pursuit of the child (either overtly or covertly). Most rejected parents are not only hurt but highly affronted, even outraged, by the child's challenge to their authority and the lack of respect accorded them. Some try to reassert their parental position by force, which can end in physical struggles with the child. Other alienated parents pursue the child relentlessly with a barrage of phone calls, letters, unexpected appearances at the child's activities, all of which feel intrusive and even frightening to the young person. The child's negative reactions are denied, or are simply dismissed as "the other parent talking" and by declarations that the child has been "brainwashed." These declarations are especially infuriating to adolescents trying to hold on to their emerging autonomy. In fact, many rejected parents do not clearly distinguish their children as separate persons from the ex-spouse and attempt to carry on the marital dispute, in all of its primeval intensity, through the medium of the child. It is not surprising that such children feel utterly disempowered as a person in their own right.

What is often evident, however, is that beneath these children's strident anger is a pathetic longing for the rejected parent. They want to be rescued from their intolerable dilemma and seem to be continually testing, by more and more extreme, negative behaviors, how much the rejected parent does or does not care, and whether they exist for that parent in any other way than as a shadow of the adversary. In intervention, the first order of business is usually helping the rejected parent to reach out to the child in a nonintrusive and respectful manner, and to patiently tolerate the child's testing in a manner that sends the message that the parent does indeed care and can be trusted. Increased access to alienated parents should be contingent upon their capacity to provide this kind of empathic attunement and their capacity to acknowledge the child as a person separate from the ex-spouse.

### *The Family Dynamics*

The family dynamics that produce alienated children are typified by extremely divergent parenting styles. Aligned parents are usually extraordinarily naive about their own psychological neediness and their confused



emotional boundaries with their children (Lampel, 1996). They tend to relate to their children as equals, often speak of them as their "best friends," or, in a reversal of roles, rely on them for direction and nurturance. Hence, they are often permissive and undemanding as parents and give their children a great deal of authority to make their own decisions, including the resolution to have nothing to do with the other parent. Once the children voice their own views and feelings toward the rejected parent, aligned parents calmly and self-righteously declare their neutrality in the issue. They often justify their parenting style as "empowering the child" and point to the (pseudo)mature stance of the child as proof of its effectiveness.

By contrast and often in reaction to this emotional enmeshment and permissiveness, the rejected parent is likely to be overly autocratic, demanding, rigid, and punitive (i.e., their parenting style can be markedly authoritarian). As the conflict between the parents escalates, the child retreats back into the protection of the aligned parent, sharing that parent's distress and phobic reaction to the other, and will actually characterize the alienated parent as "mean" and "scary." Of course, this intensifies the humiliation and rage on the part of the rejected parent and the antagonism and avoidance on the part of the alienated child in a vicious cycle of self-fulfilling prophecy. When these disputes enter the courtroom, the traditional adversarial approach provides the ideal environment to reify the villain/victim dichotomy.

#### *The Role of Domestic Violence in Alienation*

Domestic violence is another etiological agent for parent alienation. Children of various ages who have witnessed incidents of violence between their parents are likely to have been severely frightened if not traumatized. In general, younger children are likely to suffer greater distress than older ones. As explained in chapters 2 and 3, from our perspective children who witness incidents of high conflict or violence between parents appear to exacerbate the defense mechanism of splitting, so that one parent (the abuser) is seen as either all bad or completely justified, and the other parent (the victim) is seen as either all good or totally deserving of the abuse. (Other interpretations have explained this process as identification with the aggressor or the victim.) As we have agreed in chapter 5, young boys who witness their father's powerful, aggressive posturing tend to manage their fears of him by merging with him and incorporating his disparaging view



interferes with the child's ability to make use of the father as an alternative primary parenting figure. The child's perception of the father, then, remains a primitive projection of that which is potentially bad, frightening, and unsafe. For the child, this means not being able to integrate the sense of good and bad in the self, the mother, and the father in order to experience each as a separate, whole person.

In sum, children who have lived with chronic parental conflict since infancy or toddlerhood and those whose parents are inconsistently available to them emotionally are more likely to grow up highly dependent, with insecure attachments to both parents and ongoing difficulties with separation from the primary parent, usually the mother. These children are candidates for the more extreme forms of parent alienation. It is these children who are not able to differentiate their own feelings about the other parent from those of their primary parent.

The point we wish to emphasize is that parent alienation that derives from these very early developmental failures in the child is laid down in the pre-verbal memory banks of the child and is, therefore, largely unconscious and nonvolitional. The alienation involves very primitive psychological defenses not easily amenable to treatment. Removing the child precipitously from the aligned parent in these cases can be ineffective and even dangerous, unless it is done with extreme therapeutic care. (We are aware of one 10-year-old boy who hanged himself when he was court-ordered from his aligned mother into the custody of his father. Another child had an epileptic seizure, her first, when she was forcibly removed from her aligned father.) Parent alienation in these cases is not simply a matter of pernicious, conscious "brainwashing" by an embittered parent: the more important ingredient is a vulnerable, receptive child who has likely sustained early developmental damage.

The treatment of choice involves long-term therapy of the child with the goal of effecting a gradual separation in a supportive therapeutic environment. This therapy should include collateral counseling and support for both parents. When young adolescents struggle with their new, more complex cognitive understanding of their parents' conflicts at the same time they are renewing their attempts to separate from an ambivalent relationship with an aligned parent, the thought of reconciling with an alienated parent may be intolerable. Therapeutic efforts in this direction are likely to stall and may, in fact, be ill-advised. Efforts are better spent using the therapy to help these youngsters begin to separate from the primary (aligned) parent. In the most severe cases, when a child is caught in a *folie à deux* relationship (i.e.,



law requires that all families attempt mediation before they can litigate their custody disputes.)

In terms of the public costs associated with divorce, these figures indicate that, on average, one fourth of all divorcing families seek the assistance of the courts. Almost half of those in court (or more than one tenth of all divorcing families) make up the highly conflicted subgroup that cannot settle their disputes in brief mandated mediation. Clearly, these families consume a disproportionately large share of the court's precious resources. This small subgroup use twice their share of family court counseling hours and, presumably, the majority of judicial time available for all custody hearings (Duryee, 1991, 1992). In addition, it is estimated that the children of these families are four to five times more likely to have emotional and behavioral problems of clinically significant proportions (Johnston, 1992a, 1994b). Hence they are likely to be over-represented among children receiving mental health services and to consume disproportionately those resources offered by the schools and the community.

Highly conflictual divorcing families make heavy demands on the energies of family law attorneys, mediators, custody evaluators, counselors, and even judges. Despite the increased attention they receive, these clients are more likely than any other group to be hostile and unappreciative of professional efforts. They may fail to pay assigned fees, allege bias on the part of court officers, and even try to report or sue professionals for malpractice. A very small minority of these vulnerable clients can become paranoid, volatile, and ominously threatening. Quite apart from their excessive demands for professional time, their behaviors are particularly stressful for legal and mental health professionals, and contribute greatly to staff "burnout."

The private financial costs to the families concerned can be prohibitive. These may include extraordinary legal fees, costs of custody evaluations and therapy for all family members, as well as expenses associated with psychological testing, supervised visitation and exchanges, or drug and alcohol monitoring. Time taken from employment to attend court hearings and to seek legal and mental health counseling reduces potential earnings, as does loss of productivity owing to emotional stress and preoccupation with the disputes. It is not unusual for men and women to become emotionally and financially destitute as a result of these struggles over custody.

What is the most troubling is that these families often do not seem to resolve their conflicts despite the increased attention they receive and the unusual amount of private and public resources expended on their behalf.



Dante). With the input of the preschool and the counselor, the parents also agreed to keep Dante back in nursery school for another year. Following recommendations by the pediatrician, a plan was mediated to manage the child's asthma when he was being transferred from one to the other parent.

When there were disputes over finances, a separate mediator was employed, as this was not part of the CM's role with the family. When the mother sought the support of the counselor to move out of the area with Dante, the counselor explained how this child's fragile sense of himself as separate and autonomous from both parents had been developmentally delayed by the entrenched custody dispute, and that a consistent relationship with both parents was needed before he could manage a long-distance relationship with either one. Finally, the CM encouraged both parents to place Dante in nursery school daily and, a year later, in kindergarten. These opportunities allowed Dante to become more independent of his parents and gave them more time to devote to their own lives and professional interests. Within nine months, both parents were working for the major portion of the workweek, and expressing a good deal of pleasure in their individual achievements.

**WORKING WITH THE CHILD.** Decisions about when to initiate direct treatment for children of highly conflicted custody disputes and what kind of therapy is likely to be helpful must be made with considerable thought and care. There are not always clear answers to the many questions that arise, and each case must be considered on its own merits. For example, is child therapy the best way to allocate scarce family resources? Should the child be seen by the CM as part of the family intervention or assigned her own individual therapist? Should siblings be seen by the same therapist, and if so, when are conjoint sessions appropriate? How can one be sure that individual therapy for the child is well coordinated with the rest of the family intervention? Can the child benefit from individual therapy or would group therapy be more useful at this stage in the child's development? Should the intervention be short- or long-term, and what might one expect to achieve in each mode? What are the consequences if children revise their defensive processes when they continue to be in a malignant family situation? In short, what kind of therapy can one effectively conduct inside a domestic war zone?

More often than not, the need for therapy for the child is yet another hotly disputed issue between parents. Too often, the child is taken to therapy



of support from the leader for using her mask when she so clearly felt that she needed it.

These different levels of response can help the leader to assess the degree of constriction in individual children and define their treatment needs over the long term. As the children work with masks, they can begin to be more conscious of their inner life and how it might be represented in behavior. This new awareness introduces the possibility that they can make choices about how, when, and with whom to express themselves. The leader addresses the question of choice in the context of the role plays by asking each child to consider safe persons, places, or times when she might remove the mask and communicate how she really feels. For example, 12-year-old Mary made a smiling mask, without eyes, for a role play in which she was required to visit her father when she wanted to stay home with her mother. When prompted by the leader, Mary was able to show the furious face beneath the smiling mask to her "brother" in the role play. She affirmed that sometimes he seemed safe enough for her to be real with him in this way.

As they begin to practice and assimilate more flexible ways of achieving interpersonal safety and control, some children experience a degree of release from their inner constriction. At the same time, they begin to understand that other people have thoughts, feelings, ideas, and motives that may or may not be inferred from their behavior. For many of these youngsters, these new ideas can challenge their rigid and oversimplified patterns of understanding how people and relationships work. The resulting dissonance and interest can, in turn, catalyze new developmental progress. The more vulnerable children in the group seem to benefit most from observing other children's process. In so doing, they take in new words, concepts, and possible behaviors that become building blocks in later individual or group work.

#### DEFINING AND UNDERSTANDING THE SELF

Because children in high-conflict families tend to organize their experience in response to the needs and expectations of others, they often lose sight of themselves. As a result, they have difficulty identifying and supporting their own feelings, ideas, motives, and preferences. While this absence of self can masquerade as compliance during the school-age years, it will not serve in adolescence, when issues of identity press for resolution.

The issue of self-definition is first addressed when children are invited to imagine and then draw a private room to which they have exclusive access.



**VI. Assessment of Parenting Ability**

- What is parent's attitude/feelings for child (e.g., guilt, resentment)? Any particular psychological meaning of child to parent?
- What is the style of the overt relationship with the child (e.g., conflict-laden, cooperative, distant, warm)?
- What is the quality of the more unconscious relationship (e.g., identification with child, needs child for scapegoat, for nurturance)?
- To what degree does parent cognitively understand child's needs? Comment on perceived and real understanding.
- To what extent is parent sensitive to child's needs (e.g., intuitive understanding, actual awareness of needs, real and perceived)?
- What is parent's ability to cope with child's needs, real and perceived?
- What is parent's usual style of coping with child demands (e.g., avoid, deflect, ignore, punish, impatience, desperation)?
- Overall estimate of parenting; characterize type/style of parenting (e.g., benign neglect, overprotective, "good enough," very competent, loving, etc.)
- Critical incidents. Please note reported or suspected child abuse, physical, psychological, sexual, incest, etc.

**VII. Assessment of Parent-Parent Relationship**

- What are the feelings of each parent for the other (e.g., bitterness, rage, mixed)?
- How intense are these feelings?
- Amount of parental friction/fighting/hostility/conflict?
- Resolution of the divorce/disputes
- To what extent does parent still think/obsess about the marriage/divorce/spouse? How much yearning for past?
- Estimate how resolved feelings are for spouse.
- To what extent does parent yearn to be married; to remarry?
- To what extent has parent established a separate life (e.g., new friends, new relationships, job, education, hobbies, etc.)?
- Estimate of amount of contact/communication between parents
- What is the content of this communication (e.g., child issues only; child issues/ex-spouse's family/discuss their feelings for each other; whether they have sexual relations)?
- Critical incidents. Please note any present actual or threatened physical violence, instances of abuse, etc.



- Empathy for parent; to what extent does this child feel parented?
- Child's response to parent's distress or psychopathology
- Supportive figures and activities currently available and used; degree to which child has turned for support to extrafamilial figures, particularly teachers and peers; relationships with grandparents and other extended family members

#### IV. Child's Reactions to Current Visiting/Custody Arrangements

- Visitation or custody patterns as perceived by the child; child's desires regarding custody and visitation
- Ambiance of the home (or homes) as perceived by the child; response to custodial parent working outside the home; availability of the parent(s) psychologically; which parent child perceives as supportive; reversal of roles with parent

#### V. Coping and Symptomatology

- Defensive and adaptive resources employed to deal with stress; coping strategies
- Changes or presence of acute symptomatology; exacerbation or return of chronic symptoms; evidence of regression
- Premature sexual activity; pseudomaturity; drug/alcohol use; delinquent behavior

#### VI. Child's Attitudes and Participation at School, with Peers, and in Extracurricular Activities

- From child's perspective, how well he or she gets on with peers; how many friends; pride in school/sports achievements and pleasure from participation

### FORMULATION OF THE IMPASSE AND ITS IMPACT ON THE CHILD

- What prevents the family from settling the dispute?
- *External Components*—e.g., extended family, significant other, and legal provocation of the dispute; economic hardship or sociocultural factors that help lock the impasse
- *Interactional Components*—e.g., polarized, negative images of the ex-spouse; ambivalence about separation; special psychological signif-



icance of child; adaptive and defensive use of each other, which creates the impasse

- *Individual Components*—e.g., intrapsychic conflicts and needs of individual members, psychopathology; or special needs of the child (such as illness or disability)
- What is the impact of the dispute and the impasse on the child? Evaluate to what extent the dispute and the impasse are related to child's symptomatology; assess the potential effects on the child's development if the dispute/impasse is not resolved
- What strengths and resources are available within the family and their social system to help resolve the dilemma (e.g., relevant parenting capacities, availability of others, capacities of the child, etc., and the possibility of mobilizing these)?