




 Department of Child and Adolescent Psychiatry

## Divorce Support: Nurturing Children Through Change

Justin R. Misurell, Ph.D.  
 Clinical Director  
 NYU Child Study Center's NJ Office

1

---

---

---

---

---

---

---

---

### Overview

- Presentation will provide psychoeducation on the spectrum of divorce (e.g., amicable vs acrimonious)
- Risk factors impacting children's mental health and well-being during and after parental separation and divorce
- Will provide a comprehensive overview about High Conflict Divorce and Separation
- Best therapeutic strategies for supporting children adjusting to divorce
- Top co-parenting tips for divorced parents to create a safe space and healthy adjustment
- Characteristics of health and unhealthy divorce
- Provide psychoeducation about High Conflict Separate Parents (HCSPs)
- Case examples illustrating healthy and unhealthy ways to resolve divorce
- Helpful resources for families

2




---

---

---

---

---

---

---

---

### Divorce in America

- Divorce rate has declined in the past decade
- Approximately 40-50% of marriages end in divorce
- Rate for second marriages is higher
- Children of divorced parents on average experience lower levels of well-being
  - Academic difficulties
  - Loss of interest in social activity
  - Difficulty adapting to change
  - Anger/irritability and feelings of guilt
  - Destructive behavior
  - Health problems
  - Loss of faith in marriage and family unit

*Caveat: this is "on average" not all children of divorce experience these difficulties*

3




---

---

---

---

---

---

---

---

### Reasons for Divorce

1. Irreconcilable differences
2. Communication breakdown
3. Infidelity
4. Abuse or domestic violence
5. Addiction
6. Financial disagreements
7. Lack of intimacy
8. Incompatibility
9. Continual conflict
10. Growth and personal development
11. Parenting disagreements
12. Unhappiness or dissatisfaction



4

---

---

---

---

---

---

---

---

### Spectrum of Divorce

- Amicable Divorce
- Acrimonious Divorce



5

---

---

---

---

---

---

---

---

### Amicable Divorce

- Practice good communication
- Putting children first
- Selecting cooperative divorce attorney
- Open to mediation and compromise
- Mindful of financial interests of both parties
- Show understanding for the other party



6

---

---

---

---

---

---

---

---

## Acrimonious Divorce

- High conflict separated parents (HCSPs) involves parents who are divorced or separated and are engaged in ongoing, intense, and often adversarial disputes or conflicts related to various aspects of co-parenting and child-rearing
- Court involvement and litigation are routinely indicated
- Children are typically caught in the middle of their parents' disputes
- Cases can be extremely stressful and exhausting for treatment providers



7

---

---

---

---

---

---

---

---

## High Conflict Parenting Dynamics

- Pervasive conflict regarding all manner of topics from the simple (e.g., vacations, holidays, after school activities) to the complex (e.g., disputes over which school the children should attend, custodial time, finances)
- Conflict is pervasive and dominates most topics and settings, persisting over time due to failed resolutions or compromises.
- Tit for Tat patterns
- Aggressiveness – Defensiveness
- Often, high-conflict parents are unaware of the impact of these mutually negative feelings on their children (Anderson et al., 2011).
- Attachment to toxic narratives:
  - "My ex-wife is controlling and domineering. She is sabotaging my relationship with my son"
  - "My ex-husband is a narcissist. Everything is about him. He doesn't consider what's best for the kids."



8

---

---

---

---

---

---

---

---

## Parent-Child Relationship Dynamics

- There are a range of familial dynamics between parents and children within high conflict divorce
- On one end of the continuum, children have *positive relationships with both parents*, in which the child values both parents and wants to spend significant amounts of time with each parent
- Next, on the continuum, children may have an *affinity for one parent* but still desire contact with both
- Next, *allied children* have developed an alliance with one parent. These children consistently prefer one parent and have limited contact with the other.
- In cases where children are refusing to see one of their parents, you may be dealing with one of three situations: family dysfunction, parental estrangement, or parent alienation



9

---

---

---

---

---

---

---

---

### Short-Term and Long-Term Effects Of High Conflict Divorce and Separation on Children

- High-conflict divorce is associated with parenting problems, strained parent-child relationships (including parental alienation syndrome), child maladjustment, use of negative coping strategies (e.g., substance abuse), depression, anxiety, and child abuse
- High-conflict divorce can lead to negative parent-child relationships, causing anxiety, distress, and loyalty conflicts for children
- Research links chronic high conflict to children's chronic stress, insecurity, agitation, shame, self-blame, guilt, and feelings of helplessness

10 Child Study 364



10

---

---

---

---

---

---

---

---

### Family dysfunction

- Can take many forms and may involve a variety of issues that interact in emotionally destructive ways and contribute to relationship rupture between parent and child
- Intense parental conflict (e.g., arguing, yelling, cursing)
- Toxic interaction patterns (e.g., frequent put-downs, insults, emotional manipulation, triangulation between parents and children)
- Parents and/or child mental health issues (e.g., depression, anxiety, disruptive behaviors, personality disorders, parental substance abuse)
- Children being put in the middle (e.g., involving them in conversation about court proceedings, inappropriate information about the other spouse, leveraging child for their allegiance and affection)

11 Child Study 364



11

---

---

---

---

---

---

---

---

### Parent Estrangement

- Occurs in cases where a parent is being rejected by their child for justifiable reasons
- Rejected parent likely has one or more of the following:
  - Personality disorder
  - History of abusive behavior towards the favored parent or the children (e.g., emotional, physical, verbal, sexual abuse)
  - Substance abuse history
  - Mental illness
  - Has not developed a healthy attachment with the child prior to parental separation (e.g., common example is father who works significant hours and delegates all parenting to the mother)

12 Child Study 364



12

---

---

---

---

---

---

---

---

## Parent Alienation

- Rejected or targeted parent vs. favored or alienating parent
- Occurs when one parent targets and villainizes the other parent with unwarranted claims of wrongdoing (e.g., abuse, neglect, mistreatment)
- Alienating parent typically involves children in discussions about the divorce/separation, disparages the targeted parent directly to the children, sends messages (verbally and non-verbally) that it is not acceptable for the child to have a positive relationship with the targeted parent
- Makes the child feel that if they express love towards the targeted parent then the alienating parent will withhold love/affection towards them

13 Child Study Q&A



13

---

---

---

---

---

---

---

---

## Passive vs. Active Alienation

- Passive alienation occurs when the favored or alienating parent unintentionally or unknowingly takes actions that contribute to the rejection of the other parent
  - Oftentimes this involves a parent who is not intentionally disparaging the other parent but who has a hard time hiding their contempt and emotional distress.
  - At times children will perceive their favored parent as emotionally fragile and will be afraid to hurt them, so they reject the other parent as a means to protect the favored parent
- Active alienation occurs when the favored or alienating parent intentionally attacks, disparages and manipulates the child to reject the other parent.
  - This is the stereotypical concept of parent alienation and it is the type of charge that is often cited by parents in the midst of a custody dispute in which a child is refusing or resisting parenting time with the rejected parent.
  - However, this form of alienation is relatively rare and very hard to prove.

14 Child Study Q&A



14

---

---

---

---

---

---

---

---

## The Role of the Clinician

- The various roles for mental health professionals
- Custody evals vs. intervention services
  - Custody = not intervening to change anything
  - Intervention = actively trying to change the destructive family dynamics
- Expert witness testimony (role of expert witness) vs. role of therapist or interventionist

15 Child Study Q&A



15

---

---

---

---

---

---

---

---

### Treatment & Interventions

- Individual Therapy
- Family Therapy
  - Reconciliation/Reunification Therapy
- Co-parenting Therapy
- Group Therapy
- Parent Coordination

16 Child Study 444



16

---

---

---

---

---

---

---

---

### Sharks vs. Shepherds

- Lawyers can be Sharks or Shepherds
- Sharks (attacks and punishes the other side, wants to make \$\$\$, those attorneys can be detrimental to therapy process
  - Communicating with shark- only advocating for narrow interest of client (parent they're defending) rather than expediting resolution to family conflict
    - "We can't move forward until the fundamental financial questions are resolved and I think Mr. Smith is hiding x, y, z" instead of "How do we get these people together for the best interest of the kid?"
- Shepherds (collaborative, want to work with the clinician towards getting the parents to be more aligned)
  - Collaborative Divorce attorneys

17 Child Study 444



17

---

---

---

---

---

---

---

---

### Risk Factors for Children's Poor Adjustment to Divorce

- Parent's ability to cope with divorce and overall mental health
- Developmental stage and age of children
- Child Temperament
- HCSP
- Legal Proceedings
- Loss of contact with parent

18



18

---

---

---

---

---

---

---

---

### Best Therapeutic Strategies for Children of Divorce

- Creating a safe and validating space
- Provide developmentally appropriate explanations
- Family Therapy is the most effective treatment for children of high conflict divorce families



19 nasponline.org



19

---

---

---

---

---

---

---

---

### Best Coparenting Tips for Families going through Divorce

- Don't take things personally
- Treat like a Coworker
- Be flexible and adaptative
- Keep children out of the conflict
- Seek support when needed



20



20

---

---

---

---

---

---

---

---

### Guidelines for Healthy Divorce

1. Seek support
2. Prioritize children's well-being
3. Communicate openly and respectfully
4. Focus on the future
5. Educate yourself
6. Take care of yourself
7. Consider mediation or collaborative divorce
8. Stay organized
9. Consult with professionals
10. Be patient and compassionate



21



21

---

---

---

---

---

---

---

---

### Characteristics of an Unhealthy Divorce

- 1. Involves children in adult conflicts
- 2. Impulsive decisions making
- 3. Uses children as pawns
- 4. Neglects self-care
- 5. Hides assets or information
- 6. Refuses to compromise
- 7. Rushes into new relationships
- 8. Neglects legal advice
- 9. Uses social media as a platform
- 10. Loses sight of the bigger picture.



22

---

---

---

---

---

---

---

---

### Successful High Conflict Divorce Example

#### The Case of Joshua



23



23

---

---

---

---

---

---

---

---

### Unsuccessful High Conflict Divorce Example

#### The Case of Lila



24



24

---

---

---

---

---

---

---

---



## Take Away Message

- Divorce is a serious matter that impacts children one way or another
- Don't take it lightly and consider options prior to separation including marriage counseling
- If divorce is unavoidable, there are better and worse ways to go about it.
- Amicable divorce is possible if you can be flexible and be willing to compromise
- At the end of the day – put children first

25



25

## Resources

- The New Jersey Council of Collaborative Practice Groups (NJCCPG)  
[www.collaboratenj.org](http://www.collaboratenj.org)
- The New York Association of Collaborative Professionals  
[www.nycollaborativeprofessionals.org](http://www.nycollaborativeprofessionals.org)

26



26

## Suggested Academic Readings

- Ahrons, C. R. (1995). *The good divorce: Keeping your family together when your marriage comes apart*. New York: William Morrow.
- Andre, K., & Baker, A. J. L. (2008). *If you want to choose: How middle school kids can resist the pressure to choose one parent over the other*. New York: Kindred Spirits.
- Baker, A. J. L. (2007). *Adult children of parental alienation syndrome: Breaking the ties that bind*. New York: W. W. Norton.
- Baker, A. J. L., & Sauber, S. R. (eds.). (2015). *Working With Alienated Children and Families: A Clinical Guidebook*. United Kingdom: Taylor & Francis.
- Darnall, D. (1998). *Divorce casualties: Protecting your children from parental alienation*. Dallas, TX: Taylor.
- Fidler, B. J., & Bala, N. (2010). Children resisting post-separation contact with a parent: Concepts, controversies, and conundrums. *Family Court Review*, 48(1), 98-111.
- Gardner, R. A. (1999). Differentiating between parental alienation syndrome and bona fide abuse/neglect. *American Journal of Family Therapy*, 27(2), 97-107.
- Gardner, R. A. (1985). *The boys and girls book of divorce*. New York: Bantam.
- Gardner, R. A. (1998). *The parental alienation syndrome: A guide for mental health and legal professionals*. Cresskill, NJ: Creative Therapeutics.
- Johnson, J. R. (2005). Clinical work with parents in entrenched custody disputes. In L. Gunzberg & P. Hyman (Eds.), *A handbook of divorce and custody* (pp. 343-363). Hillsdale, NJ: Analytic Press.
- Wallerstein, J. (1997). Transference and countertransference in clinical interventions with divorcing families. In M. Solomon & J. Segel (Eds.), *Countertransference in couples therapy* (pp. 115-124). New York: W. W. Norton.

27 Child Study Q&amp;A



27

## Questions and Answers



28 Child Study Center



28

---

---

---

---

---

---

---

---

### Justin R. Misurell, Ph.D. Clinical Director

NYU Child Study Center's NJ Office  
Hassenfeld Children's Hospital at NYU Langone  
Department of Child and Adolescent Psychiatry  
Child Study Center—New Jersey  
411 Hackensack Avenue, 7<sup>th</sup> floor, Hackensack, NJ 07601  
T 201.430.2111  
[Justin.misurell@nyulangone.org](mailto:Justin.misurell@nyulangone.org) | [www.nyulangone.org/csc](http://www.nyulangone.org/csc)

29



29

---

---

---

---

---

---

---

---

## Thank you



Department of Child and Adolescent Psychiatry  
Child Study Center

30

---

---

---

---

---

---

---

---