Development and evaluation of a group-based program for children of divorce

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DEVELOPMENT AND EVALUATION OF A GROUP-BASED PROGRAM FOR CHILDREN OF DIVORCE

By

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B.S., East Carolina University, 1968

Presented in partial fulfillment of the requirements for the degree of

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The present investigation examined the effects of a group-based psychological treatment for children of divorce. Thirty-one children, ages 7-14 years, whose parents were recently divorced, were randomly assigned to treatment or waiting-list control conditions. Treatment consisted of a six-session group psychotherapy program focused on feelings identification, communication skills, and anger management training. While the first five sessions were entirely child-centered, the final meeting included both children and parents. Therapeutic effects were evaluated from pre- to posttreatment via child, parent, and teacher measures. Results indicated significant experimental group improvement on one teacher measure of child problem behavior. However, both experimental and control conditions evinced significant changes in parent-child and parent-parent conflict over time. These results were discussed with respect to: (a) subjective indices of change (i.e., consumer satisfaction), and (b) implications for future research and clinical application.
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CHAPTER I

INTRODUCTION

It has been established that by 1990, 33% of our nation's children, before they reach the age of 18, will experience the divorce of their parents (Glick, 1979). Although the divorce rate in the U.S. has begun to level off since 1976, the American divorce rate is still the highest in the world at 5.0 divorces per 1,000 total population (Glick, 1979; Hetherington, 1981). One must only look around oneself to become aware of how many children are affected. Families, friends, physicians, school teachers, clergy and mental health professionals are reporting more and more evidence of the impact that divorce has upon these growing numbers of children.

While the problems are not new, systematic research in the area of effects of divorce upon children is just beginning to gain momentum. Although there has long existed the commonly held belief that parental separation and divorce have significant negative psychological effects upon children, substantiating evidence in support of this belief is relatively recent.

**Negative Effects**

The negative effects divorce has on a child's development come to light repeatedly in the literature. Hess and Camera (1979) speak of the capacity of the divorce
experience to interfere with the normal progression of a child's developmental ability to work and play. These authors found that many children of divorce suffer severe emotional consequences such as depression, anger, anxiety and withdrawal, any of which, if prolonged, can have a negative impact on the child's overall emotional development. Hetherington, Cox and Cox (1979a, 1979b) report adjustment problems in the area of cognitive, emotional and social development among children of divorce as well. In addition, parental separation has been found to be particularly stressful for the developing adolescent (Springer & Wallerstein, 1983). These young people exhibit a strong sense of loss and a fear that their parents' conflicts might become public knowledge and a source of embarrassment to them. Adolescents from divorced families usually demonstrate increased conflict between siblings and often experience significant turmoil with regard to visitation arrangements with the non-custodial parent.

It has been hypothesized that major life changes like those which take place in the life of a child following the dissolution of his/her parents' marriage can have detrimental effects on the child (Rutter, in press). This theory was supported by Stolberg and Anker (in press) who found that such major personal/environmental changes were related to children's depression, social withdrawal, aggression and delinquency. These authors report that such problems as
low levels of prosocial behavior, low levels of school-appropriate behavior, high levels of acting-out and aggressive behavior and inappropriate interpersonal behavior patterns are not uncommon in children of divorce. Kurdek and Blisk (in press) reported such stressful life changes to be related to children's low self-esteem and problematic thoughts about divorce as well.

Conclusions from studies of children of divorce in psychiatric populations characterize these children as highly, although often temporarily, distressed (McDermott, 1970; Tuckman & Regan, 1966; Westman, 1972). Boys in this population reportedly manifest aggression toward their parents while girls exhibit sexual behavior, drug involvement, as well as hostility toward parents (Kalter, 1977). Westman, Cline, Swift and Cramer (1970) maintain that a significant number of divorces are followed by turbulent interaction between divorcing parents which could be pathogenic for the children involved. In his 1970 study of children of divorce, McDermott found that many of these youngsters were afraid of being harmed by forces outside of their control and felt unable to care for themselves. Feelings of weakness and vulnerability were common in these children.

In non-clinic samples (Hetherington, Cox, & Cox, 1978; Wallerstein & Kelly, 1974, 1975, 1976, 1977), divorce has been shown to be related to child adjustment problems using
a variety of measures of the child's psychological well-being. These authors found that the relationship between marital and child problems could be traced through child behavioral observations, teacher ratings, peer nominations and other child and parent measures. Of particular interest is the fact that the level of distress exhibited by children of divorce can be linked to the level and process of parental conflict (Emery, 1982). Specifically, content (e.g., finances, child rearing practices), process (e.g., physical abuse, verbal abuse, withdrawal), and temporal parameters (i.e., length of time conflict lasts) of conflict seem to have more detrimental effects upon children than do other conflictual aspects. Children from broken but conflict-free homes were seen to be less likely to have behavior problems than were children from conflict-ridden intact families (Gibson, 1969; McCord, McCord, & Thurber, 1962; Nye, 1957; Power, Ash, Schoenberg, & Sorey, 1974). Clinical impressions (Anthony, 1974; Kelley & Wallerstein, 1976) and empirical results (Hetherington, Cox, & Cox, 1976; Jacobson, 1978; Westman et al., 1980) have repeatedly revealed that children of divorced, conflictual families have more problems than children of conflict-free divorces. One longitudinal study found that many of the problems of children from broken homes were evident before the child was separated from the non-custodial parent (Lambert, Essen, & Head, 1977). This study supports the claim that it is likely interparental conflict and not parental separation, per se, that is the more relevant
component in a child's post-divorce adjustment. Similarly, Rutter, Graham, Chadwick, and Yule (1974) found a stronger relationship between child problems and unhappy, quarrelsome marriages than between child problems and unhappy, apathetic marriages. Children living in a single-parent family situation brought about by the death of a parent also were seen to exhibit fewer behavior problems than were those children living in divorce-caused single-parent situations. In sum, while children of divorce exhibit a whole host of negative effects, the primary areas of concern include child behavior problems, cognitive, social and emotional deficits and anger related issues.

**Treatment Literature**

The clinical literature describes the denial, grief, depression, fears of abandonment, loss of self-esteem, feelings of blame, guilt, shame and anger typically felt by children of divorce (Levitin, 1979). It, therefore, follows that some type of formal treatment program is of the utmost importance to help meet the specific needs of these young people. "... There is a large population of vulnerable children at the time of divorce who desperately need sensitive assessment by mental health professionals within the framework of the family court services, which should be interwoven into the operational tissue of the legal process, in order to work out immediate problems and to prevent more serious subsequent ones." (McDermott, 1970, p. 427). The research results cry out for the design of child-oriented, community, or school-based intervention programs that might
offset the short- and long-term effects of stressful family relations (Cantor, 1977; Hetherington, 1979). In a similar vein, Benedek and Benedek (1979) speak of the high rate of divorce coupled with its dire consequences for children as "mandating an inquiry" (p. 156) into the particular psychological needs of these children. The authors ask, "what measures should be taken to meet these needs?"

The seminal research projects examining the impact of divorce on children and providing some treatment or treatment-related data began in the early 1970s. One, by Hetherington, Cox, and Cox (1976, 1978, 1979a, 1979b, 1979c) was a quasi-experimental investigation while the other, by Wallerstein and Kelly (1974, 1975, 1976, 1977; Kelly & Wallerstein, 1975, 1976, 1977) employed a more clinical approach. These two research programs continue to be the most in-depth and long-term studies to date. They share several similarities in their methodology and produced some interesting findings which complement each other. Each project was concerned with the impact of divorce upon a non-clinical child population. Each examined the effects of divorce on children from a point in time close to the initial separation or divorce over an extended period (2 and 5 years, respectively). Each study also collected data on family functioning before, during, and after separation or divorce.

The Hetherington, Cox, and Cox project sampled 48 white, middle class divorced families with a preschool child (half
boys, half girls) and a matched sample of 48 intact families with a preschool child matched for age and sex with the target child in the divorced family. Data were obtained via parental interviews, use of structured diaries, direct observation of child-teacher interaction in the laboratory and home, direct observation of child-teacher and child-peer interactions in the classroom, parent and teacher checklists and rating sheets, self-report ratings by parents, personality tests, measures of sex role typing, cognitive performance, and social development. Results documented that families do experience severe stress and disorganization in the first year post-divorce. Overall, parental functioning was found to be impaired during this period; and on almost every measure of parental behavior, the coping abilities of divorced parents were found to be below those of non-divorced parents.

Children of the divorced families exhibited more negative behavior, less affection and less compliance than their non-divorced counterparts. Additionally, they were more dependent and demanding, exhibiting more whining and nagging behavior. However, Hetherington et al. (1979) report that high parental agreement on child-rearing practices and low parental conflict appeared to correlate with the amount of prolonged stress and disorganization in both parents and children of divorce.

The Wallerstein and Kelly project was designed to
observe and record the impact of divorce on each family member of 60 divorcing families. The overall goal was to minimize or prevent a psychopathological response in children of divorce and to facilitate adjustment to the post-divorce environment. Data were obtained at a time soon after the initial separation as well as at a one- and a five-year follow-up date. Child subjects included 131 normal children from the 60 divorced families, ranging in age from 3-18 years.

Methods of assessment consisted primarily of clinical interviews. These focused upon information about the quality of the marriage and family life prior to the divorce, events and feelings that preceded the divorce decision, personal history of each spouse, impact of the divorce on each family member and on the individual parent-child relationships, and parents' perception of how the children understood and were coping with the divorce. Information from teachers and school records were also obtained.

A six-week intervention program was offered to these divorced families. Each parent and child was seen individually by a member of an interdisciplinary team of six professionals trained in the area of clinical work with families and children. Wallerstein and Kelly (1977) report their data suggests that therapeutic intervention with preschool children is not very effective. They maintain that the treatment of choice for this particular age group should be primarily parent-focused. That is, the authors
suggest working with the parents, whom they see as the most able agents of change with preschool children.

Early latency children (as defined by Wallerstein and Kelly, 7-8 years old) had trouble effectively utilizing direct therapeutic intervention as well. The authors describe these children as being in a difficult developmental position since their defenses (e.g., denial by fantasy and reversal) do not hold up well under stress. Consequently, these children are left extremely vulnerable to their pain and tend to become immobilized. For these reasons, many children in this age group were unable to discuss the divorce without substantial distress. The authors found the use of a "divorce monologue" to be quite helpful. Here the therapist would gently recount for the child how other children their age feel about their parents' divorce. These monologues were tailored to the needs and situations of the particular child being seen. This accounting of shared affects seemed to give these early latency children permission to experience their own feelings about the divorce and provided many children with considerable relief. This particular age group also exhibited an intense longing for the non-custodial parent (usually father) and a flexible and frequent visitation schedule was strongly suggested to the parents of these early latency children.

Wallerstein and Kelly found that almost half of the later-latency and pre-adolescent children they interviewed
showed signs of "troubled and conflicted depressive behavior patterns" (1976, p. 269). While these children were more able to recognize and deal with their conflicts than were the younger children, they nevertheless exhibited a real need for therapist intervention. These children seemed to be helped by discussing the divorce with someone outside the family. To have some objective person to talk to appeared to fill a void strongly felt by these children.

Kurdek and Siesky (1980a, 1980b) and Tooley (1976) have also found a greater display of behavior pathology in this age group than in younger children and adolescents. In addition, empirical investigations of children's understanding of divorce-related events found the child's age to be a prime factor in how he/she perceives his/her situation (Kurdek, 1981; Kurdek & Siesky, 1980a, 1980b; Stolberg & Anker, in press). That is, later latency, pre-adolescent children were found to be more accurate in their perceptions of their parents' divorce and could therefore be considered to be more amenable to a psychotherapeutic intervention model than either the very young child or the adolescent.

Although Heterington et al. did not include a treatment aspect per se in their program, Hetherington (1979) advocates a crisis model to deal with the stressful effects of divorce on children in the first year post-divorce. According to the author, during this period critical factors tend to be related to the child's feelings of loss,
his/her adaptation to environmental change, conflict and uncertainty. It is reported that, while most children are able to cope with the short-term stresses of divorce within a few years, prolonged and multiple stresses may cause long-term developmental disruptions in children.

As mentioned above, Rutter (1980) and Hetherington (1979) point out that children of non-conflict ridden single-parent families show better adjustment than do children of high-conflict nuclear families. Also, low parent conflict and hostility both prior and subsequent to the divorce has been repeatedly shown to mitigate against children's adjustment problems following divorce (Berg & Kelly, 1979; Jacobsen, 1978; Lowenstein & Koopman, 1978; Porter & O'Leary, 1980; Raschke & Raschke, 1979; Rosen, 1979; Wallerstein & Kelly, 1980). However, in the first year post-divorce, family conflict tends to escalate rather than decline (Heterington et al., 1978). In addition, during this period, children from divorced families exhibit more problem behavior than do children from conflict-ridden nuclear families.

From the above discussion and review, the following conclusions can be drawn:

(a) Developmental and/or psychological problems are often the rule rather than the exception when it comes to the effects of parental divorce on children.
(b) Later latency and pre-adolescent children have been shown to be helped by the opportunity to discuss their parents' divorce with an objective person.

(c) The first year post-divorce is extremely stressful for both parents and children alike.

(d) The child's short-term adjustment and ability to cope with the stressful reaction to his/her parents' divorce appears to be highly dependent upon the child's age and stage of development at the time of the divorce.

(e) Family functioning (including such issues as parental conflict before and after the divorce) seems to have a strong effect upon the ability of the child to acclimate to his/her post-divorce situation.

**Treatment of Choice**

Kurdek (1981) indicates that support systems designed to mitigate the stress and adjustment problems of children of divorce are sorely needed. He reports that there is a wealth of evidence indicating the beneficial effects of support systems for adults following divorce (Chirboga, Coho, Stein, & Roberts, 1979; Raschke, 1977; Spanier & Castro, 1979). However, Kurdek argues there is no evidence that the use of these support systems by parents has any "trickle-down" effect upon their children. Cantor (1977)
and Hetherington (1979) argue for the establishment of child-oriented school or community-based intervention programs to offset the short- and long-term effects of divorce upon children. Kurdek, Blisk, and Siesky (1981) point out that children of divorce often benefit from discussing divorce-related problems with other children who have experienced their own parents' divorce. The child's realization that, "I'm not the only kid in the world who is going through this" is quite therapeutic in itself. These authors maintain that group intervention techniques could make good use of this finding. Indeed, the opportunity to participate in the examination of the shared experience of parental divorce is one easily afforded by a group situation. Here the divorce experience can become more normalized and less painful when shared by others who truly "understand".

Yalom (1970) in his classic book on group psychotherapy lists what he calls "curative factors" of group therapy. While he does not refer to children in particular, the considerations which he outlines seem to dovetail nicely with the needs of later-latency and pre-adolescent children in the initial stages following their parents' divorce.

For example, the imparting of information is the first curative factor which Yalom describes. He speaks of explanation as being the first step toward control. That is, explanation and clarification are therapeutic in and of themselves. In this vein an instructive approach would
be most helpful for the preliminary sessions with children of divorce. These children have been described as feeling vulnerable and helpless in determining the course of their family's lives after the divorce (McDermott, 1970). They believe that they have no control over their own destiny. Thus, a group could serve a didactic function for these children in terms of providing a forum wherein questions about what divorce is, what it is not, and related "informational" issues could be discussed and dealt with.

Next Yalom speaks of the instillation of hope as crucial to all psychotherapy and as a fortuitous, yet inherent ingredient in all group psychotherapy. The author makes much of the fact that any group's composition necessarily consists of individuals who are at differing places on the "control-collapse continuum." Therefore, in a group setting, individual clients have a first-hand look at others, with similar problems, who have coped more effectively and who have improved noticeably. Consequently, the client begins to feel hopeful that he/she will also be able to cope effectively with his/her own problems. Such hope and inspiration would be a tremendous boost to a group of children of divorce, many of whom experience depression, anxiety, and a strong sense of loss (Hetherington, Cox, & Cox, 1979a, 1979b).

Thirdly, Yalom mentions universality. This is perhaps the single-most important factor which a group milieu has
to offer to children whose parents have recently separated or divorced. All people experience feelings of inadequacy and low self-worth, but children of divorce are especially prone toward feelings of low self-esteem (Gardner, 1980). These children are likely to be deprived of parental affection, lonely, rejected and insecure (Franke, 1980). Such feelings of being worthless, unique and set apart from everyone else can be reduced by the opportunity to be in the company of other children like themselves (Gardner, 1980). The sense of belonging to a special club and the feeling of communality can enhance the child's self-worth and instill an enormous sense of relief.

Altruism is the next factor Yalom speaks of as having healing effects. In a group situation, individuals are able to offer help and support to one another and the resultant feelings of being needed would be therapeutic for the often lonely and withdrawn child of divorce.

Finally, while a large portion of patients, in general, enter psychotherapy with a history of an unsatisfactory family relationship, all children of divorce are having family relationship problems. Thus, the "corrective recapitulation of the family group" (Yalom, 1970, p. 12) is another particularly relevant factor which can be readily incorporated in a group program for children of divorce.

In addition to the curative factors described by Yalom, further benefits also derive from group psychotherapy.
Namely, therapist time per client and client costs are minimized. Moreover, both children and parents alike would tend to be less resistant to a group rather than an individual psychotherapeutic situation.

For these reasons, a group milieu appears to be a highly-efficient and appropriate medium through which to meet the needs of these children. While there remains a distinct paucity of available treatment programs for children in the initial stages of their parents' separation/divorce, a limited number of children's divorce support groups are beginning to emerge. Most of these programs are sponsored and run by selected public school districts in limited areas of the country and very little data has been collected on their efficacy.

Three such groups are the KIDS (Kids in Divorce Situations) program of Strongsville, Ohio (Weers & Logee, 1983), "Parting", a South Carolina, school-based support group (South Carolina Department of Education, 1982) and the Divorce Adjustment Project of Virginia (Stolberg, Cullen, & Garrison, in press). These programs seek to provide a supportive, skills-oriented experience for elementary school-aged children of divorce and are characterized as educational rather than therapeutic in nature. All attempt to sharpen the child's problem-solving, communication, and decision-making skills. However, as didactic programs, all of the above fail to provide a deliberate, focused, corrective
emotional experience for the children. Consequently, the purpose of the present investigation was five-fold:

(1) To provide a community-based therapeutic program for children in the initial stages of their parents' separation/divorce;

(2) to experimentally evaluate the effectiveness of such a program via child-, parent-, and teacher-based objective measures of change;

(3) to serve that population of children in Missoula County presently "at risk" and without available psychological care;

(4) to gather preliminary data to be used in putting together a training package for clinicians in their work with this child population; and

(5) to reduce and/or prevent the occurrence of serious psychopathology resulting from parental divorce.

To accomplish this, a group-based therapeutic program was initiated. Treatment was conducted by trained, professional persons experienced in both group process and children's behavior problems. Moreover, experimental procedures were implemented so as to allow controlled evaluation of program effectiveness.

Rationale and Design of Study

Although the numbers of children adversely affected by their parents' separation/divorce grow daily, there remains a conspicuous dearth of intervention programs
available. Evidence of the need for such programs exists by virtue of the data collected documenting the considerable short- and long-term effects of stressful family relations upon children (Cantor, 1977; Hetherington, 1979; Benedek & Benedek, 1979). Thus, an intervention procedure has been proposed to help children cope with the stressful aspects of their divorce experience, in the early weeks and months following initial parental separation. The goal of this study was to examine the effects of a group psychotherapeutic intervention on children whose parents have recently separated/divorced.

A between-groups, pretest-posttest, experimental-control group design was utilized. The group consisted of one experimental and one waiting-list control group condition.
CHAPTER II

METHOD

Subjects

Subjects were children aged 7-14 years whose parents had separated or divorced during the past 12 months. Recruitment was carried out via newspaper, television, and radio advertisements, fliers posted in the community, and referrals from professionals such as lawyers, judges, pediatricians, and school counselors.

Subjects were randomly assigned to experimental or control conditions. The experimental condition consisted of two groups of seven and eight children, respectively—a total of 15 experimental subjects. The delayed treatment control group contained 16 children (experimental + control conditions = 31 subjects). All groups were matched for sex, age, and parent ratings of parent-parent conflict. The latter was determined by the experimenter-generated Parent Rating of Parent-Parent Conflict administered to the parents during the initial screening interview.

Treatment

Treatment consisted of six weekly, one and one-half hour sessions conducted by a male and female co-therapist. One therapist had over 10 years post-doctoral clinical experience with a wide range of clients and treatment procedure. The other therapist, a graduate student
in clinical psychology, was specialized in working with children of divorce and familiar with group process.

The program proceeded in accordance with a time-limited group psychotherapy model. Specific issues dealt with each week focused on common problems faced by children of divorce. These included: (a) Informational issues, (b) Communication skills, (c) Clarification of feelings, (d) Problem solving, (e) Anger management, and (f) Support. While support was an on-going, underlying component of all sessions, the other issues were introduced serially.

Session one. This was an introductory session. Leaders focused on allaying participants' fears and anxieties about the group by providing a clear statement of the purpose, methods, and ground rules which were to be used. The importance of trust was stressed and adherence to a strict code of confidentiality was admonished. Children were asked why they had chosen to participate in the group and were told that this decision carried with it a commitment. That is, each participant was committed to attend every meeting.

Introduction "ice breaker" exercises (Stolberg, 1981) were conducted wherein members told about themselves (e.g., name, age, some of their likes and dislikes) and thus began to lay the groundwork for group cohesiveness. Instruction was an on-going enterprise taking place throughout the treatment phase of the investigation.
(Yalom's "imparting of information"). Instruction in session one not only centered around the working mechanics of the group, but also began to examine some divorce-related situations. Divorce data was made available (e.g., child-focused divorce situations were presented). A discussion was conducted on the broad topics of marriage and divorce revolving around such questions as, "What does it mean when you marry someone?"; "What makes a good marriage?"; "Why do some people get divorced?"

Session two. The interpersonal process of creating and sharing meanings (i.e., communication) is of vital importance in carrying on positive social interactions. Session two assisted the children in developing communication skills. Leaders emphasized that communication can take place on both a verbal and non-verbal level (e.g., through facial expressions, eye contact, body posture, movement, symbolic gestures, etc.). Communication exercises designed to provide guidelines for affecting positive social interaction were introduced. For example: (1) "The communication stoppers" (Fearn & McCabe, 1975), an exercise wherein the effects of such communication stoppers as interrupting, judging, confronting, dominating and putting-down was discussed and examined. (2) An exercise for sharpening listening skills was utilized (Fearn & McCabe, 1975). Here children role-played the importance of eye contact, looking interested in what is being said, etc.,
in contrast to looking away, interrupting, looking bored, etc., when engaged in a conversation with another person.

Role-play situations were also introduced where children were asked to use the communication skills they had learned. The situations centered around divorce and parent-related issues (e.g., telling a parent about some of the things he/she does that the child does not like). Additionally, children were encouraged to try some of the communication techniques out on their parents during the week.

Session two also laid the groundwork for an extra-therapeutic child-based maintenance program. Toward this end, each child was assigned a "buddy" within the group. "Buddies" were contacted on a weekly basis to aid the children in both problem-solving and emotional support. Each child was instructed to phone his/her "buddy" once during the week. In so doing, two contacts were made involving each child every week. The nature of this contact was solely up to the children. Its purpose was to enable each child to get closer to another member of the group and to use this relationship as a source of on-going support, both during the group and after it had terminated.

Session three. The goal of session three was three-fold: (1) To assist the children in recognizing and identifying feelings in themselves and others. For example, children broke up into pairs and shared with his/her partner the answer to the questions, "Name two good things about
yourself" and "What was the hardest thing about the divorce" (Stolberg, 1981). Each person of the pair then reported to the group the answers to the questions as given by his/her partner. (2) Increasing the children's awareness of events which precede and/or cause various feelings (South Carolina Department of Education, 1982). Discussion of "What kinds of things make you have feelings," "What are you thinking of when you are having some of these feelings?", "Do you think your thoughts have any effect on your feelings?" (3) Increasing the children's awareness of the impact of the divorce on their parents (Weers & Logee, 1983). Therapists led group discussions of "How the feelings of others influence how they relate to you," "What kinds of things upset your parents?", "How does your parents' mood affect you?" "How does your mood effect your parents?"

Session four. Problem-solving procedures and self-statements are intended to help children gain control over their behavior. In session four, the children were taught to evaluate a problem and generate alternative solutions. In addition, leaders instructed children in the use of self-statements to help them make the best choices in a problem situation. After a discussion of the kinds of problems a child might have, leaders asked, "What are some of the things you can say to yourself to help you solve these problems?" Children generated a list that included the following: (a) "What is the problem and what are the
the different possibilities?", (b) "What are my choices?", (c) "How can I be sure what the best choice is?", (d) "I'll make one choice", (e) ask myself, "Did it work?", (f) If the answer is "Yes" congratulate myself, (g) If the answer is "No", ask "What would have worked better" and try again (Stolberg, 1981). Next, a concrete divorce-related problem was presented to the children. They were then asked to solve it by means of the above self-statement method used in a role-play situation. Leaders reminded children of self-statements by whispering the appropriate statement as a prompt during the role play. In addition, children were asked to problem solve some "What would you do if" situations, again utilizing the above problem solution techniques (e.g., "What would you do if your father moved 1,000 miles away?", "What would you do if your mother decided to re-marry?"). The focus of these exercises was to get the children to prepare themselves for possible eventualities and generate viable solutions to difficult situations.

Session five. Anger is the most common emotion felt by children of divorce and its expression is often destructive. Session five was designed to help the children better understand their anger and provide them with coping methods to help them deal with it (Novaco, 1975). In this session, children learned to identify what anger feels like, what causes it and how best to express these feelings in a positive fashion. This was accomplished as follows:
(1) Through the discussion of how anger feels on the inside and how it looks on the outside.

(2) By taking a look at the antecedents of angry feelings in specific situations.

(3) By instructing the children in how to "cool off" angry feelings using self-statements and relaxation exercises.

(4) Through the introduction of positive coping mechanisms (e.g., keeping a feelings journal, writing a letter, talking to a friend or stuffed animal).

(5) Through discussion of poor anger control methods and their drawbacks.

Session six. Parents (both ex-spouses) were invited to attend this wrap-up session. Children were given the opportunity to discuss any final concerns they had. The major focus of the meeting was informational exchange and collective problem-solving. Video taped problem situations were played in order to generate discussion. Group leaders facilitated the process by informing parents of generic problem areas (e.g., parental time sharing, family conflict, dating). These problem areas were discussed in small family groups with therapists moving from group to group to aid in communication. Group leaders also encouraged children to continue to use their "buddies" and to practice the various techniques they had learned. Post measures were collected on both children and parents at this time.
Dependent Measures

Dependent measures were administered pre- and post-treatment to all subjects, one of their parents, and their teachers.

**Child measures.** Assessment devices that measure distress and overall personality adjustment were administered to the children. These included:

(a) **The Revised Children's Manifest Anxiety Scale** (Reynolds & Richmond, 1978). Work has been done on this scale in the areas of content (Reynolds & Richmond, 1978), concurrent (Reynolds, 1980b), construct (Reynolds, 1980a; Reynolds & Richmond, 1978) and predictive validity (Reynolds, 1981). Recently, Reynolds and Page (1982) have presented national normative and reliability data for the RCMAS. Reynolds and Richmond (1979) found three anxiety factors: "physiological," "worry/oversensitivity," and "concentration." A national standardization was undertaken by Reynolds and Paget (1981) involving 4,972 children between the ages of 6 and 19 years. Three anxiety factors were seen to emerge: the physiological factor; the worry/oversensitivity factor; and the concentration factor. In addition, the authors found a large general anxiety factor and two distinct lie scale factors.

(b) **Children's Attitudes Toward Parental Separation Inventory** (Berg, 1979). The CAPSI is a 60-item objective measure presented in a "yes-no" response format. Ten items
are included in each of six scales—Peer Ridicule and Avoidance ("It would upset me if other kids asked a lot of questions about my parents"), Paternal Blame ("My father caused the breakup of my family"), Fear of Abandonment ("Sometimes I worry that soon I may be left all alone with no one to take care of me"), Hope of Reunification ("Some­day the whole family will probably live together again"), Maternal Blame ("It was usually my mother's fault when my parents had a fight"), and Self Blame ("It's probably my fault that my parents are unhappy"). Each response is keyed for adjustment and a total score was derived by summing all the adjusted responses.

*(c) Piers-Harris Self-Concept Scale* (Piers & Harris, 1963). The PHSCS consists of 80 first-person declarative statements of the type "I am a happy person." Child responds, "yes" or "no." The scale was standardized on 1,183 children, grades 4-12. Internal consistency of the scale ranges from .78 to .93, and test-retest reliability from .71 to .77. The scale is recommended for use in studies of change in self concept with a 10-point score difference being necessary before change can be considered statistically significant.

*(d) Child Rating of Parent-Parent Conflict/Child Rating of Parent-Child Conflict.* Children completed an information sheet which included two experimenter-generated conflict rating scales. Child was asked to rate the
conflict between his/her parents as well as the conflict between the child and his/her parents. Scores on the scales ranged from 1 (don't fight at all) to 4 (fight a moderate amount) to 7 (fight all the time).

**Parent measures.** Assessment devices measuring adjustment level of the child, open marital conflict and parent/child conflict were administered to parent(s). These included:

(a) **Child Behavior Checklist** (Achenbach, 1978). This scale records a diverse array of behavior problems and adaptive competencies in children aged 4 to 16 as reported by their parents. The checklist comprises 113 behavior problem items to which a parent responds by circling 0, 1, or 2—with 0 indicating not true of the child, 1 indicating sometimes true of the child, and 2 indicating very true of the child (Achenbach & Edelbrock, 1979). The authors have reported a series of factor-analytic studies for boys aged 4-16 and girls aged 6-16. A factor of Depression was found for boys aged 4 and 5, and 6 to 11 years, and for girls aged 6 yo 11 years. A factor of Depressed Withdrawal was found for girls aged 12 to 16 years. Achenbach has reported test-retest reliabilities of .87 to .89, and interrater reliabilities of .67 to .74. The checklist has been shown to discriminate clinic and non-clinic samples on all behavior problem and social competency scales.
(b) **Parent Rating of Parent-Parent Conflict/Parent Rating of Parent-Child Conflict.** Parent completed an information sheet which included two experimenter-generated conflict rating scales. Parent was asked to rate conflict between him/herself and ex-spouse as well as the conflict between him/herself and the child. Scores on the scales ranged from 1 (no conflict) to 4 (a moderate amount of conflict) to 7 (extremely high conflict).

(c) **Conflict Behavior Questionnaire (CBQ) (parent form)** was designed to obtain evaluations of parent and adolescent behavior directly from mother or father. This was slightly modified for use with younger children. The questionnaire taps two potential sources of complaints: (1) dissatisfaction with the other person's behavior, and (2) evaluations of the interactions between the two members. All items are written in statement form and answerable in a yes/no format. Items describe both positive and negative behaviors.

**Teacher measures.** Two assessment devices measuring the adjustment level of the child were administered to subjects' teachers.

(a) **Behavior Problem Checklist (Quay & Peterson, 1967)** is extensively researched. Items for BPCL were first derived in an examination of 427 cases at a child guidance clinic (Peterson, 1961). A factor analysis of the original checklist revealed two primary factors: "conduct disorder" and "personality disorder." Quay and
Peterson (1967) have revised the scale which currently consists of 55 items. Two additional factors have been extracted, namely: "subcultural (socialized) delinquency" (Quay & Peterson, 1967) in a delinquent population, and "inadequacy-immaturity" in a population of emotionally disturbed children (Quay, Morse, & Cutler, 1966). Data have been reported indicating the discriminant and predictive validity of the BPCL; extensive normative data have been collected as well (Speer, 1971; Touliatos & Lindholm, 1976; Werry & Quay, 1971).

(b) The Walker Problem Behavior Identification Check-list (Walker, 1970) contains 50 items that constitute overt problem behaviors. Teachers indicate whether each behavioral item has been observed in the last two months. A factor analysis yielded five factors: (1) Acting Out, (2) Withdrawal, (3) Distractibility, (4) Disturbed Peer Relations, and (5) Immaturity. Norms are presented for each of the factors by sex, not age. Walker (1967) reports a split-half reliability of .98; Bolstad and Johnson (1977) reported a test-retest reliability of .96 for teachers; and Bolstad and Johnson (1977) found scoring high and low on teacher-completed checklists differed significantly in appropriate classroom behavior.
CHAPTER III

RESULTS

Treatment data were analyzed in a series of 2 (treatment) X 2 (assessments) ANOVAs across all dependent measures. Previous studies (e.g., Rush, Beck, Kovacs, & Hollon, 1977; Rush & Watkins, 1981) have also incorporated analyses of clients who "dropped out" during treatment. While no clients in the present investigation terminated treatment before the children's-group portion of the program was completed, one male subject refused to attend the final session (consisting of parents and children). This subject also failed to complete post-treatment assessment measures and thus his data is not included in the analysis of child measures. Nevertheless, post treatment data were collected from both this subject's teacher and referring parent and have been included in the analysis of parent as well as teacher data.

Additionally, post treatment assessment data were returned by the teachers of only 22 of the 31 subjects. Therefore, analyses done on these measures represent a reduced sample from those used in analyzing child and parent measures. Findings will be reported across each of the following areas: (a) Child Measures, (b) Parent Measures, (c) Teacher Measures.

One-way analysis of variance indicated that there
were no significant differences between groups at pre-treatment on any of the measures (i.e., child, parent, or teacher).

**Child Measures**

Analyses comparing control and treatment assessments at pre and post revealed no significant results (p > .05) on the Piers Harris Self-Concept Scale, CAPSI, or the RCMAS. A one-way ANOVA performed on the child's rating of parent-child conflict, however, demonstrated that both treatment and control children perceived a significant increase in the conflict between themselves and their parents over time \[ F(1, 26) = 6.97, p = .01324 \]. Child ratings of parent-parent conflict showed no significant differences across the two assessment periods.

![Figure 1. Parent-Child Conflict Child Rating](image)

**Parent Measures**

There were no statistical differences between groups
on the Conflict Behavior Questionnaire (CBQ). A trend toward significance was revealed over time on parent ratings of parent-child conflict in both groups \(F (1,28) = 3.39, p = .07295\). In addition, parent ratings of parent-parent conflict were significantly reduced in the experimental and control groups from pre to post assessment periods \(F (1,28) = 4.80, p = .03475\).

![Figure 2. Parent-Parent Conflict Parent Rating](image)

**Teacher Measures**

One way analyses of variance indicated no significant differences between groups on the Walker Problem Behavior Identification Checklist. However, significant interactions of Treatment X Time were observed on the BPCL \(F (1,20) = 5.52, p = .02757\) with experimental subjects exhibiting a decreased number of problem behaviors from pre to post treatment assessment.
In addition, Pearson Product Moment correlations conducted on all data revealed little supplementary information. Finally, individuals were administered a Consumer Satisfaction Questionnaire at post treatment. Results revealed a mean satisfaction score of 6.2 out of a possible 8 points for parents, and a mean score of 26.43 out of a possible 32 points for children. Both scores are indicative of high levels of satisfaction with the program.
CHAPTER IV

DISCUSSION

A review and analysis of the results of this investigation were quite disappointing in light of the positive subjective experience reported by the subjects. High group attendance rates and enthusiastic child-group participation were characteristic throughout the program. In addition, parental feedback, both during and following treatment, as well as therapist's estimates of the children's increased willingness to recognize and deal with divorce-related problems, lent support to this positive judgment.

In spite of the above, significant empirical findings of the study were quite meager.

Child Measures

Child reported measures of anxiety, divorce adjustment and self-concept showed no significant changes from pre to post treatment within either the experimental or control groups. Child ratings of parent-parent conflict displayed no significant changes over time. However, child report of parent-child conflict increased significantly in both the treatment and the control groups at post assessment. This increase may be a reflection of the children's perception of their participation in such a program. That is,
the groups were explained to all the children at pre-assessment, as a means by which they could learn to deal with divorce-related problems. It is hypothesized that the child-participants in both groups may have felt that these groups would force them, in some way, to deal with sensitive issues between themselves and their parents. While this was in fact a realistic perception, it may also have entailed the children's expectations that such revelations of divorce-related problems would increase the conflict between the children and their parents. This hypothesis is stated as a possible explanation for the significant increase in the child's report of parent-child conflict from pre to post assessment. However, while this increase is statistically significant, its clinical import is negligible. Experimental group children reported a conflict level, on a 1-7 point scale (1 = don't fight at all, 4 = moderate amount of fighting, 7 - fight all the time), of 1.857 at pre and 2.50 at post; while the control group children reported 2.14 at pre and 2.857 at post.

Finally, children in both groups reported no significant improvement in the conflict between their parents at post-treatment assessment.

Parent Measures

Here again, results were disappointing. Parent ratings of their child's social competency and behavior problems on the CBC revealed no significant improvement over time.
However, mean scores on this measure at pre-treatment revealed that, as a group, the children in this sample did not exhibit social competency deficits. Thus, great improvement would not be expected as this was not a problem area at pre-assessment (experimental group mean T score at pre was 49.40, and control group mean T score was 47.53). Parent-rated, child problem behavior as also revealed by the CBC showed no significant decrease from pre to post treatment as well. Nevertheless, the children in this study did score one standard deviation above the mean on this dimension at pre-assessment (experimental group mean T score at pre for behavior problems was 62.40 and control group mean T score was 61.46).

Parent-ratings of parent-child interactions on the Conflict Behavior Questionnaire merely displayed a trend toward significant improvement over time in both treatment and control groups. However, a significant improvement was evident in the parent's report of parent-parent conflict across both groups over time. Thus, all parents noted some improvement in parent-child interaction. More importantly, substantial improvement between ex-spouses apparently occurred. This last finding is clinically, as well as statistically, significant because interparent conflict has been found to be an important factor in children's adjustment to their parents' divorce (Emery, 1982). While the treatment package per se did not affect
the parents' perception of parent-parent conflict (since the controls improved as much as the experimental parents), perhaps the conflict-related information given at the pre-assessment interview as well as the knowledge that their child would be taking part in the program, accounts for this change. Another explanatory hypothesis is that divorcing individuals perceive the conflict between themselves as diminishing as a function of time.

Teacher Measures

Teachers were asked to assess subjects' problem behavior on the Walker Problem Identification Checklist and the BPCL. Teacher compliance at post-treatment was limited since the measures were collected during the last week of the school year. Nevertheless, findings, based upon 22 subjects', teacher's reports have proven to be of great interest. The overall or total scores on the BPCL showed significant Treatment by Time interactions. That is, children in the experimental group displayed significant improvement on this measure, while control subjects did not. The total scores on the second teacher measure (Walker Problem Behavior Identification Checklist) did not exhibit significant improvement from pre to post-assessment. Nevertheless, one of the subscales (scale 1 - acting out) did approach a significant Treatment by Time effect ($p = .07025$). In addition, the Walker total scores correlated .734 with the total scores on the BPCL at pre-assessment.
and .943 at post. The importance of these findings are twofold: (1) Teachers were the most objective raters of the children’s adjustment used in this study. Perhaps it is this objectivity which allowed differences to be observed in the children. That is, it is possible that children and parents may be "too close" to the child to recognize such changes, whereas teachers are somewhat removed. This difference also speaks to the importance of using objective measures of change in addition to self-report measures in evaluating the effects of treatment on subjects. (2) In addition, acting out can be interpreted as an indication that the children are undergoing some intrapsychic conflict. Such conflict, if not dealt with appropriately, can manifest itself in the form of problem behavior in the classroom. One may hypothesize that the ability of the group program to identify and teach children how to deal with divorce-related issues could have significant ramifications in terms of fewer problem behaviors being observed in school.

**Consumer Satisfaction Measures**

Satisfaction questionnaires were completed by children and parents at the close of the final (parent-child) treatment session. Results of these findings are indicative of considerable satisfaction with the program. Parents' anecdotal reports included in these questionnaires suggest that treatment effectiveness focused upon the
areas of communication and problem-solving abilities. Also, peer support and peer acceptance was cited as an additionally important aspect of the program. Most parents described their child's increased ability to express feelings. For example, one parent stated: "The children have opened up much more, and discussed what was on their minds." Another parent wrote: "Listens more calmly--says how he is feeling more." Yet another parent described her child as having "looked forward to the sharing and appreciated having others who felt as she did about some problems."

The primary focus of this treatment program was indeed to increase communication and problem-solving abilities in these children of divorce, as well as to help them learn to recognize and express their divorce-related feelings. It was hoped that such skills would aid the children's overall adjustment and that this change in adjustment could be measured objectively. Unfortunately, this did not prove to be the case. Two reasons for this outcome may be as follows: (1) If the program did impart these skills to the subjects (and anecdotal reports indicate that it did), perhaps insensitive measures were used to assess this. Several of the assessment devices which were administered were incapable of measuring communication or problem-solving skills. Instead, they measured the child's level of adjustment. (2) It was assumed that the acquisition of such skills would influence children's adjustment.
However, post-treatment assessment may have occurred too soon for these changes in adjustment to manifest themselves. Future researchers might consider using a three-month follow-up assessment in the hopes of yielding significant results on child and parent measures.

**Programmatic Considerations and Recommendations for Applied Research**

**Length of Program**

This treatment package used a time-limited group psychotherapy model. Given the 10-week university quarter and the time it took to recruit subjects, six weeks was determined to be the appropriate length of the program. In addition, the sessions were run in the Spring and coincided with the end of the elementary school year when several subjects would be leaving town (many of them would be visiting their non-custodial parent for the summer). While the above reasons accounted for much of the decision to make the program six weeks long, it was also felt that a six-week commitment was all that could reasonably be asked from 7-12 year-old children. Nevertheless, at the conclusion of the program, several parents expressed the wish that the program were one or two sessions longer. Interestingly, these sentiments were not echoed in the child population. Indeed, there is a good possibility that the short length of the program could account for the paucity of the results of this study. Perhaps five
child-group sessions and one parent-child group session was not a potent enough intervention to cause substantial changes in child and parent ratings of child adjustment. However, it appears that it may not be the children who needed more treatment, but perhaps the parents. The final parent-child group session was particularly beneficial in terms of the many productive issues which were explored. But one two-hour session seemed hardly enough time to begin to make a lasting impact upon the precarious relationship between these ex-spouses with regard to their children. Since parent-parent conflict has been shown to influence children's divorce adjustment, and since both children and therapists were satisfied with the length of the child group aspect of the program, it is recommended that future research projects add one or two more parent-child sessions at beginning, middle and end points throughout the program. Here parents can more effectively learn to deal with each other in a less conflictually-charged atmosphere while their children observe and participate in this process. Expansion of the program in this way may also allow for some additional time necessary to change children's levels of adjustment in a more objectively observable manner.

**Age of the Participants**

While there was not a significant correlation between the age of the subjects and their scores on any of the
administered measures, older children (i.e., nine years and older) seemed to involve themselves in the group process more actively than did the younger children. Due to research design considerations, groups were balanced for age and sex. However, because younger children had a harder time talking about their feelings in this mixed-age group, it is recommended that future research projects separate children by age. Groups consisting of all younger or all older children could be more effective. In any case, comparisons of the efficacy of the group treatment program with younger as compared to older children would be a worthwhile research undertaking.

Final Considerations

Although several group programs exist throughout the country, virtually no controlled experiments have been run in order to examine if and why they are effective. While the present study has not answered those questions, it has provided a method and an approach to answering them. There remains a tremendous need for the development and implementation of programs geared to help children through the disturbing effects of their parents' divorce. This need must be met, but it must be met in a way that is efficacious and that is both time and cost efficient. Group treatment of children of divorce appears to be a viable method. The specific approach outlined in this study includes many of the components essential to meeting
the needs of this identified population. As mentioned earlier, children of divorce suffer from many negative effects, most common being behavior problems, cognitive, social and emotional deficits, and anger-related issues. This program focused upon feelings, communication skills, problem-solving techniques and anger management in a process-oriented treatment approach. Children of divorce need to learn how to identify and communicate their feelings, both to themselves and to their parents. In addition, problem-solving skills are necessary to give the children the sense that they do have some control over their lives and can get through the hard times. Identification and management of the anger these children hold can allow for an appropriate release of these feelings rather than their displacement in terms of behavior problems in school and elsewhere.

The above treatment components were part and parcel of the present study, and were found to have positive effects upon the children and their parents. Thus, it is suggested that measures more sensitive to changes in the areas of feelings talk, communication skills, problem-solving and anger management techniques be used in future research in order to provide proof of the efficacy of such a program. Possible methods such as the objective rating of process changes as recorded in video taped sessions could be used to this end. Other such possibilities are
available. However, future empirical research must bear this out.
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REFERENCES


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APPENDIX A: INTERACTION BEHAVIOR QUESTIONNAIRE

NAME ______________________________ DATE ______________

INTERACTION BEHAVIOR QUESTIONNAIRE (PCBQ)

Below is a list of statements which may or may not be true for your family. Consider the last two weeks only. For those statements that are mostly true, circle YES, for those that are mostly false, circle NO.

yes no 1. My child sulks after an argument.
yes no 2. My child is easy to get along with.
yes no 3. My child and I sometimes end our arguments calmly.
yes no 4. My child is receptive to criticism.
yes no 5. My child curses at me.
yes no 6. We joke around often.
yes no 7. My child, for the most part, accepts punishment.
yes no 8. My child enjoys being with me.
yes no 9. At least once a week, we get angry with each other.
yes no 10. My child is well behaved in our discussions.
yes no 11. My child lets me know when he is pleased with something I have done.
yes no 12. We do a lot of things together.
yes no 13. My child almost never complains.
yes no 14. For the most part, my child likes to talk to me.
yes no 15. We almost never seem to agree.
yes no 16. My child usually listens to what I tell him.
yes no 17. My child never talks when I discuss things with him.
yes no 18. I enjoy the talks we have.
yes no 19. Often when I talk to my child, he laughs at me.
yes no 20. My child will approach me when something is on his mind.
yes no 21. At least three times a week, we get angry at each other.
yes no 22. My child screams a lot.
yes no 23. Several hours after an argument, my child is still mad at me.
yes no 24. After an argument which turns out badly, one or both of us apologizes.
-2-

yes no 25. My child doesn't pay attention when I have discussions with him.

yes no 26. My child says that I have no consideration of his feelings.

yes no 27. We argue at the dinner table at least half the time we eat together.

yes no 28. My child embarrasses me in front of my friends.

yes no 29. My child does not usually abide by decisions that the two of us reach.

yes no 30. We listen to each other, even when we argue.

yes no 31. When we discuss things, my child gets restless.

yes no 32. My child usually starts our arguments.

yes no 33. My child and I compromise during arguments.

yes no 34. I enjoy spending time with my child.

yes no 35. My child mistreats me in front of his friends.

yes no 36. At least once a day we get angry at each other.

yes no 37. My child leaves the house after an argument.

yes no 38. My child runs to his room after an argument.

yes no 39. We argue until one of us is too tired to go on.

yes no 40. My child often seeks me out.

yes no 41. My child often doesn't do what I ask.

yes no 42. The talks we have are frustrating.

yes no 43. My child often seems angry at me.

yes no 44. My child often cries when I question him.

yes no 45. We have enjoyable talks at least once a week.

yes no 46. When angry, my child becomes aggressive.

yes no 47. My child acts impatient when I talk.

yes no 48. My child and I speak to each other only when we have to.

yes no 49. My child often criticizes me.

yes no 50. My child says I don't love him.

yes no 51. In general, I don't think we get along very well.

yes no 52. My child holds a grudge.
yes no 53. My child contradicts everything I say.
yes no 54. We argue at the dinner table almost every time we eat.
yes no 55. My child almost never understands my side of an argument.
yes no 56. My child lies to me often.
yes no 57. We never have fun together.
yes no 58. During a heated discussion, my child tries to hit me.
yes no 59. My child slams the door after an argument.
yes no 60. My child and I have big arguments about little things.
yes no 61. My child is defensive when I talk to him.
yes no 62. My child thinks my opinions don't count.
yes no 63. We have enjoyable talks at least once a day.
yes no 64. My child does things to purposely annoy me.
yes no 65. My child provokes me into an argument at least twice a week.
yes no 66. We argue a lot about rules.
yes no 67. My child rarely follows through with his end of the bargain, after we have reached an agreement.
yes no 68. My child tells me he thinks I am unfair.
yes no 69. My child compares me to other parents.
yes no 70. My child talks under his breath during a discussion.
yes no 71. My child blows up for no reason.
yes no 72. My child often isolates himself in his room after an argument with me.
yes no 73. If I speak calmly, my child doesn't do what I ask.
yes no 74. My child doesn't look at me when I try to talk to him.
yes no 75. When my child is upset about something, he clams up.
APPENDIX B:

Walker Problem Behavior Identification Checklist

Published by

WESTERN PSYCHOLOGICAL SERVICES

INSTRUCTIONS:

Please read each statement carefully and respond by circling the numbers to the right of the statement if you have observed that behavioral item in the child's response pattern during the last two month period. If you have not observed the behavior described in the statement during this period, do not circle any numbers. In other words, make no marks whatsoever if the statement describes behavior which is NOT present.

Examples:

1. Has temper tantrums
2. Has no friends
3. Refers to himself as dumb, stupid, or incapable
4. Must have approval for tasks attempted or completed

Statements 1 and 4 are considered to be present while statements 2 and 3 are considered to be absent. Therefore, only the numbers to the right of items 1 and 4 are circled, and the numbers to the right of 2 and 3 are NOT circled.

Profile Analysis Chart (PAC)
1. Complains about others’ unfairness and/or discrimination towards him.
2. Is listless and continually tired.
3. Does not conform to limits on his own without control from others.
4. Becomes hysterical, upset or angry when things do not go his way.
5. Comments that no one understands him.
6. Perfectionistic: Meticulous about having everything exactly right.
7. Will destroy or take apart something he has made rather than show it or ask to have it displayed.
8. Other children act as if he were taboo or tainted.
9. Has difficulty concentrating for any length of time.
10. Is overactive, restless, and/or continually shifting body positions.
11. Apologizes repeatedly for himself and/or his behavior.
12. Distorts the truth by making statements contrary to fact.
13. Underachieves: Performs below his demonstrated ability level.
14. Outbursts either children; teasing, provoking fights, interrupting others.
15. Tries to avoid calling attention to himself.
16. Makes distrustful or suspicious remarks about actions of others toward him.
17. Reacts to stressful situations or changes in routine with general body aches, head or stomach aches, nausea.
18. Refuses to participate in class activities.
19. Approaches new tasks and situations with an “I can’t do it” response.
21. Habitually rejects the school experience through actions or comments.
22. Has enuresis. (Wets bed.)
23. Utters nonsense syllables and/or babbles to himself.
24. Continuously seeks attention.
25. Comments that nobody likes him.
26. Repeats one idea, thought, or activity over and over.
27. Has temper tantrums.
28. Refers to himself as dumb, stupid, or incapable.
29. Repeatedly one idea, thought, or activity over and over.
30. Has temper tantrums.
31. Has rapid mood shifts: depressed one moment, manic the next.
32. Does not obey until threatened with punishment.
33. Complains of nightmares, bad dreams.
34. Expresses concern about being lonely, unhappy.
35. Expresses concern about something terrible or horrible happening to him.
36. Has no friends.
37. Must have approval for tasks attempted or completed.
38. Displays physical aggression toward objects or persons.
39. Is hypercritical of himself.
40. Does not complete tasks attempted.
41. Doesn’t protest when others hurt, tease, or criticize him.
42. Shuns or avoids heterosexual activities.
43. Steals things from other children.
44. Refuses to respond to instructions or commands.
45. Weeps or cries without provocation.
46. Shuts, slams, or blocks on hearing words.
47. Easily distracted away from the task at hand by ordinary classroom stimuli, e.g., minor movements of others, noises, etc.
48. Frustrates himself into space and is unaware of his surroundings when doing so.

<table>
<thead>
<tr>
<th>Scale 1 Score</th>
<th>Scale 2 Score</th>
<th>Scale 3 Score</th>
<th>Scale 4 Score</th>
<th>Scale 5 Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Scale: 1 = Always true; 2 = Often true; 3 = Sometimes true; 4 = Rarely true; 5 = Never true.
APPENDIX C:

Behavior Problem Checklist

Donald R. Peterson, Ph.D. and Herbert C. Quay, Ph.D.
Children's Research Center
University of Illinois
Champaign, Illinois
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Donald R. Peterson, 1967

<table>
<thead>
<tr>
<th>Col. No.</th>
<th>Please complete items 1 to 6 carefully.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1-8)</td>
<td>1. Name (or identification number) of child</td>
</tr>
<tr>
<td></td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>(9-10)</td>
<td>2. Age (in years) ______________________</td>
</tr>
<tr>
<td>(11)</td>
<td>3. Sex ________ (Male-1; Female - 2)</td>
</tr>
<tr>
<td>(12)</td>
<td>4. Father's Occupation __________________</td>
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<tr>
<td></td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>(13)</td>
<td>5. Name of person completing this checklist</td>
</tr>
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<td></td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>(14)</td>
<td>6. Relationship to child (circle one)</td>
</tr>
<tr>
<td>a. Mother b. Father c. Teacher d. Other (Specify)</td>
<td></td>
</tr>
</tbody>
</table>

Please indicate which of the following constitute problems, as far as this child is concerned. If an item does not constitute a problem, encircle the zero; if an item constitutes a mild problem, encircle the one; if an item constitutes a severe problem, encircle the two. Please complete every item.
<table>
<thead>
<tr>
<th>Col. No.</th>
<th>Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>1. Oddness, bizarre behavior</td>
</tr>
<tr>
<td>16</td>
<td>2. Restlessness, inability to sit still</td>
</tr>
<tr>
<td>17</td>
<td>3. Attention-seeking, &quot;show-off&quot; behavior</td>
</tr>
<tr>
<td>18</td>
<td>4. Stays out late at night</td>
</tr>
<tr>
<td>19</td>
<td>5. Doesn't know how to have fun; behaves like a little adult</td>
</tr>
<tr>
<td>20</td>
<td>6. Self-consciousness; easily embarrassed</td>
</tr>
<tr>
<td>21</td>
<td>7. Fixed expression, lack of emotional reactivity</td>
</tr>
<tr>
<td>22</td>
<td>8. Disruptiveness; tendency to annoy &amp; bother others</td>
</tr>
<tr>
<td>23</td>
<td>9. Feelings of inferiority</td>
</tr>
<tr>
<td>24</td>
<td>10. Steals in company with others</td>
</tr>
<tr>
<td>25</td>
<td>11. Boisterousness, roughness</td>
</tr>
<tr>
<td>26</td>
<td>12. Crying over minor annoyances and hurts</td>
</tr>
<tr>
<td>27</td>
<td>13. Preoccupation; &quot;in a world of his own&quot;</td>
</tr>
<tr>
<td>28</td>
<td>14. Shyness, bashfulness</td>
</tr>
<tr>
<td>29</td>
<td>15. Social withdrawal, preference for solitary activities</td>
</tr>
<tr>
<td>30</td>
<td>16. Dislike for school</td>
</tr>
<tr>
<td>31</td>
<td>17. Jealousy over attention paid other children</td>
</tr>
<tr>
<td>32</td>
<td>18. Belongs to a gang</td>
</tr>
<tr>
<td>33</td>
<td>19. Repetitive speech</td>
</tr>
<tr>
<td>34</td>
<td>20. Short attention span</td>
</tr>
<tr>
<td>35</td>
<td>21. Lack of self-confidence</td>
</tr>
<tr>
<td>36</td>
<td>22. Inattentiveness to what others say</td>
</tr>
<tr>
<td>37</td>
<td>23. Easily flustered and confused</td>
</tr>
<tr>
<td>38</td>
<td>24. Incoherent speech</td>
</tr>
<tr>
<td>39</td>
<td>25. Fighting</td>
</tr>
<tr>
<td>40</td>
<td>26. Loyal to delinquent friends</td>
</tr>
<tr>
<td>41</td>
<td>27. Temper tantrums</td>
</tr>
<tr>
<td>42</td>
<td>28. Reticence, secretiveness</td>
</tr>
<tr>
<td>43</td>
<td>29. Truancy from school</td>
</tr>
<tr>
<td>44</td>
<td>30. Hypersensitivity; feelings easily hurt</td>
</tr>
<tr>
<td>45</td>
<td>31. Laziness in school and in performance of other tasks</td>
</tr>
<tr>
<td>46</td>
<td>32. Anxiety, chronic general fearfulness</td>
</tr>
<tr>
<td>47</td>
<td>33. Irresponsibility, un dependability</td>
</tr>
<tr>
<td>48</td>
<td>34. Excessive daydreaming</td>
</tr>
<tr>
<td>49</td>
<td>35. Masturbation</td>
</tr>
<tr>
<td>50</td>
<td>36. Has bad companions</td>
</tr>
<tr>
<td>51</td>
<td>37. Tension, inability to relax</td>
</tr>
<tr>
<td>52</td>
<td>38. Disobedience, difficulty in disciplinary control</td>
</tr>
<tr>
<td>53</td>
<td>39. Depression, chronic sadness</td>
</tr>
<tr>
<td>54</td>
<td>40. Uncooperativeness in group situations</td>
</tr>
<tr>
<td>55</td>
<td>41. Aloofness, social reserve</td>
</tr>
<tr>
<td>56</td>
<td>42. Passivity, suggestibility; easily led by others</td>
</tr>
<tr>
<td>57</td>
<td>43. Clumsiness, awkwardness, poor muscular coordination</td>
</tr>
<tr>
<td>58</td>
<td>44. Hypoactivity; &quot;always on the go&quot;</td>
</tr>
<tr>
<td>59</td>
<td>45. Distractibility</td>
</tr>
<tr>
<td>60</td>
<td>46. Destructiveness in regard to his own &amp;/or other's property</td>
</tr>
<tr>
<td>61</td>
<td>47. Negativism, tendency to do the opposite of what is requested</td>
</tr>
<tr>
<td>62</td>
<td>48. Impertinence, sauciness</td>
</tr>
<tr>
<td>63</td>
<td>49. Sluggishness, Lethargy</td>
</tr>
<tr>
<td>64</td>
<td>50. Drowsiness</td>
</tr>
<tr>
<td>65</td>
<td>51. Profane language, swearing, cursing</td>
</tr>
<tr>
<td>66</td>
<td>52. Nervousness, jittersness, jumpsiness; easily startled</td>
</tr>
<tr>
<td>67</td>
<td>53. Irritability; hot-tempered, easily aroused to anger</td>
</tr>
<tr>
<td>68</td>
<td>54. Enuresis, bed-wetting</td>
</tr>
<tr>
<td>69</td>
<td>55. Often has physical complaints, e.g. headaches, stomach ache</td>
</tr>
</tbody>
</table>
APPENDIX D: CONSUMER SATISFACTION QUESTIONNAIRE

Parent Form

Please help us improve our program by answering some questions about the program for Children of Divorce. We are interested in your honest opinions, whether they are positive or negative. Please answer all of the questions. We also welcome your comments and suggestions. Thank you very much, we appreciate your help.

Circle your answer.

1. To what extent has our program met your child's needs?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>None of his/her needs have been met</td>
<td>Only a few of his/her needs have been met</td>
<td>Most of his/her needs have been met</td>
<td>Almost all of his/her needs have been met</td>
</tr>
</tbody>
</table>

2. In an overall, general sense, how satisfied are you with the program for Children of Divorce which your child(ren) has received?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quite dissatisfied</td>
<td>Indifferent or mildly dissatisfied</td>
<td>Mostly satisfied</td>
<td>Very satisfied</td>
</tr>
</tbody>
</table>

Comments

Are there any particular areas you have seen changes in your child?

If so, describe.

Did your child enjoy coming to the group?

Explain.

Other:
APPENDIX E:

PARENT INTERVIEW FORM

1. Name: ___________________________ Phone: ___________________________ *Interviewee

   Mother: ___________________________ __________________
   Father: ___________________________ __________________

   Age
   Child: ___________________________ __________________
   Child: ___________________________ __________________

2. How long were you married?

3. How long since separation/divorce?

4. Custody?

   Joint_______? Legal_______?
   Sole_______? Physical_______?

5. How much time does child spend with mother?

6. How much time does child spend with father?

6. On a 7-point scale, rate the amount of conflict between you and your ex-spouse.

   1  2  3  4  5  6  7
   No conflict Moderate Extremely high conflict

7. On a 7-point scale, rate the amount of conflict between you and your child.

   1  2  3  4  5  6  7
   No conflict Moderate Extremely high conflict

8. Could child attend sessions Mondays or Wednesdays, 4:30-6:00?

9. Could child attend six sessions beginning June 4th through July 16th?
APPENDIX F: CONSUMER SATISFACTION QUESTIONNAIRE

Child Form

Please help us improve our program by answering some questions about the group program for Children of Divorce. We are interested in your honest opinions, whether they are positive or negative. Please answer all of the questions. We also welcome your comments and suggestions. Thank you very much, we appreciate your help.

Circle your answer.

1. How would you rate the quality of this group program?

   1. Poor
   2. Fair
   3. Good
   4. Excellent

2. Was it the kind of program you wanted?

   1. No, not definitely
   2. No, not really
   3. Yes, generally
   4. Yes, definitely

3. To what extent has this program met your needs?

   1. None of my needs have been met
   2. Only a few of my needs have been met
   3. Most of my needs have been met
   4. Almost all of my needs have been met

4. If a friend were in need of similar help, would you recommend our program to him/her?

   1. No, definitely not
   2. No, I don't think so
   3. Yes, I think so
   4. Yes, definitely

5. How satisfied are you with the amount of help you received?

   1. Quite dissatisfied
   2. Indifferent or mildly dissatisfied
   3. Mostly satisfied
   4. Very satisfied

6. Has the program helped you to deal more effectively with your parents?

   1. No, it seemed to make things worse
   2. No, it really didn't help
   3. Yes, it helped somewhat
   4. Yes, it helped a great deal
7. In an overall, general sense, how satisfied are you with the program?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quite dissatisfied</td>
<td>Indifferent or mildly satisfied</td>
<td>Mostly satisfied</td>
<td>Very satisfied</td>
</tr>
</tbody>
</table>

8. If you were to seek help again, would you come back to our program?

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, definitely not</td>
<td>No, I don't think so</td>
<td>Yes, I think so</td>
<td>Yes, definitely</td>
</tr>
</tbody>
</table>

Comments

Are there any particular areas you have seen changes in yourself?

If so, describe.

Did you enjoy coming to the group?

Explain.

Other:
APPENDIX G:

CHILD INTERVIEW FORM

1. Name_____________________________________

2. Age_____

3. Date of Birth_____________________________

4. Brothers or sisters?

   Name(s) Age(s)

   __________________________ __________

   __________________________ __________

   __________________________ __________

5. Grade_________

   School___________________________

   Teacher_________________________

6. Tell child I will contact teacher to fill out some
   forms for me.

7. Which parent do you live with most of the time?

8. How much do you see the other parent?

9. On a scale from 1-7, rate how well your parents get along.

   1  2  3  4  5  6  7
   They
   don't fight Moderate They
   at all       amount of    fight all
   fighting     the time

10. How do you get along with your mom (rate on the same
    scale)?

11. How do you get along with your dad (rate on the same
    scale)?

12. How do you get along with your sister(s), brother(s)
    (rate on the same scale)?

13. How do you feel about being in this group?

14. Can I answer any questions for you?
APPENDIX H: CHILDREN'S ATTITUDES TOWARD PARENTAL SEPARATION INVENTORY

Here are some statements. Some of them are true about how you think or feel, so you will want to circle YES. Some are not true about how you think or feel, so you will want to circle NO. There are no right or wrong answers. Your answer will just tell us some of the things you are thinking and feeling now.

1. I LIKE TO BRING FRIENDS TO MY HOUSE. YES NO
2. MY FATHER LEFT THE FAMILY EVEN THOUGH I WANTED HIM TO STAY. YES NO
3. SOMETIMES I WORRY THAT SOON I MAY BE LEFT ALL ALONE WITH NO ONE TO TAKE CARE OF ME. YES NO
4. SOME DAY MY FATHER WILL PROBABLY COME BACK AND THE WHOLE FAMILY WILL LIVE TOGETHER AGAIN. YES NO
5. IT WAS USUALLY MY MOTHER'S FAULT WHEN MY PARENTS HAD A FIGHT. YES NO
6. IT'S PROBABLY MY FAULT THAT MY PARENTS ARE UNHAPPY. YES NO
7. IT WOULD UPSET ME IF OTHER KIDS ASKED A LOT OF QUESTIONS ABOUT MY PARENTS. YES NO
8. IT WAS USUALLY MY FATHER'S FAULT WHEN MY PARENTS HAD A FIGHT. YES NO
9. I SOMETIMES WORRY ABOUT WHAT MIGHT HAPPEN TO ME IF MY MOTHER LEFT ME ALL ALONE. YES NO
10. MY FATHER STILL LOVES MY MOTHER. YES NO
11. WHEN MY FAMILY WAS UNHAPPY IT WAS BECAUSE OF SOMETHING MY MOTHER SAID OR DID. YES NO
12. WHEN MY PARENTS ARGUE WITH EACH OTHER IT IS USUALLY MY FAULT. YES NO
13. I CAN TELL MY FRIENDS THAT MY PARENTS DON'T WANT TO LIVE TOGETHER. YES NO
14. MY FATHER IS USUALLY A NICE PERSON. YES NO
15. I SOMETIMES WORRY THAT MY MOTHER WILL WANT TO LIVE WITHOUT ME. YES NO
16. I SOMETIMES THINK THAT IF I TRY REAL HARD I CAN BRING MY FAMILY BACK TOGETHER AGAIN.  YES  NO
17. MY MOTHER MADE MY FATHER LEAVE THE FAMILY EVEN THOUGH I WANTED HIM TO STAY.  YES  NO
18. MY PARENTS OFTEN ARGUE WITH EACH OTHER AFTER I MISBEHAVE.  YES  NO
19. A LOT OF MY FRIENDS KNOW THAT MY PARENTS AREN'T LIVING TOGETHER.  YES  NO
20. WHEN MY FAMILY WAS UNHAPPY IT WAS USUALLY BECAUSE OF SOMETHING MY FATHER SAID OR DID.  YES  NO
21. PARENTS SOMETIMES LEAVE THEIR CHILDREN AND NEVER SEE THEM AGAIN.  YES  NO
22. MY MOTHER WILL ALWAYS LOVE MY FATHER.  YES  NO
23. MY MOTHER IS USUALLY A NICE PERSON.  YES  NO
24. MY PARENTS WOULD PROBABLY BE HAPPIER IF I WERE NEVER BORN.  YES  NO
25. I LIKE TALKING TO MY FRIENDS AS MUCH NOW AS I USED TO.  YES  NO
26. MY FATHER CAUSED MOST OF THE TROUBLE IN MY FAMILY.  YES  NO
27. I SOMETIMES WONDER WHO I WOULD LIVE WITH IF MY MOTHER AND FATHER LEFT ME ALL ALONE.  YES  NO
28. IF I BEHAVED BETTER I MIGHT BE ABLE TO BRING MY FAMILY BACK TOGETHER.  YES  NO
29. I USUALLY HAVE FUN WHEN I'M WITH MY MOTHER.  YES  NO
30. IT'S EASY FOR ME TO START A FIGHT BETWEEN MY PARENTS.  YES  NO
31. I LIKE PLAYING AS MUCH WITH MY FRIENDS AS I USED TO.  YES  NO
32. IF MY FATHER WERE A NICER PERSON MY PARENTS WOULD STILL BE LIVING TOGETHER.  YES  NO
33. I FEEL THAT MY PARENTS STILL CARE ABOUT ME.  YES  NO
34. MY FAMILY WILL PROBABLY DO THINGS TOGETHER JUST LIKE BEFORE. YES NO
35. MY MOTHER CAUSED MOST OF THE TROUBLE IN MY FAMILY. YES NO
36. MY PARENTS PROBABLY ARGUE JUST AS MUCH WHEN I'M NOT AROUND. YES NO
37. I SEEM TO HAVE FEWER FRIENDS NOW THAN BEFORE. YES NO
38. I HAVE FUN WHEN I'M WITH MY FATHER. YES NO
39. I FEEL THAT MY PARENTS STILL LOVE ME. YES NO
40. MY PARENTS WILL PROBABLY SEE THAT THEY HAVE MADE A MISTAKE AND GET BACK TOGETHER AGAIN. YES NO
41. MY MOTHER CARES ABOUT ME. YES NO
42. MY PARENTS ARE PROBABLY HAPPIER WHEN I'M NOT AROUND. YES NO
43. USUALLY I'D RATHER PLAY WITH OTHER KIDS THAN BE ALONE. YES NO
44. MY FATHER CARES ABOUT ME. YES NO
45. I SOMETIMES THINK THAT ONE DAY I MAY HAVE TO GO LIVE WITH A FRIEND OR RELATIVE. YES NO
46. I SOMETIMES THINK THAT MY MOTHER WILL GO LIVE WITH MY FATHER AGAIN. YES NO
47. MY MOTHER IS MORE GOOD THAN BAD. YES NO
48. MY PARENTS WOULD PROBABLY STILL BE LIVING TOGETHER IF IT WEREN'T FOR ME. YES NO
49. MY FRIENDS AND I DO MANY THINGS TOGETHER. YES NO
50. THERE ARE A LOT OF THINGS ABOUT MY FATHER I LIKE. YES NO
51. IF SOMETHING HAPPENED TO MY MOTHER I'D BE LEFT ALL ALONE WITH NO ONE TO TAKE CARE OF ME. YES NO
52. I SOMETIMES THINK THAT IF I GOT SICK OR IN TROUBLE THAT WOULD GET MY PARENTS BACK TOGETHER. YES NO
53. IF MY MOTHER WERE A NICER PERSON MY PARENTS WOULD STILL BE LIVING TOGETHER.  YES NO

54. I CAN MAKE MY PARENTS SAD BY WHAT I SAY OR DO.  YES NO

55. MY FRIENDS UNDERSTAND HOW I FEEL ABOUT MY PARENTS.  YES NO

56. MY FATHER IS MORE GOOD THAN BAD.  YES NO

57. I FEEL MY PARENTS STILL LIKE ME.  YES NO

58. I SOMETIMES THINK THAT ONCE MY PARENTS REALIZE HOW MUCH I WANT THEM TO THEY'LL LIVE TOGETHER AGAIN.  YES NO

59. THERE ARE A LOT OF THINGS ABOUT MY MOTHER I LIKE.  YES NO

60. IT'S BECAUSE OF ME THAT MY PARENTS BROKE UP.  YES NO
Here are a set of statements. Some of them are true of you and so you will circle the YES. Some are not true of you and so you will circle the NO. Answer every question even if some are hard to decide, but do not circle both yes and no. Remember, circle the YES if the statement is generally like you, or circle the NO if the statement is generally not like you. There are no right or wrong answers. Only you can tell us how you feel about yourself, so we hope you will mark the way you really feel inside.

1. My classmates make fun of me. YES NO
2. I am a happy person. YES NO
3. It is hard for me to make friends. YES NO
4. I am often sad. YES NO
5. I am smart. YES NO
6. I am shy. YES NO
7. I get nervous when the teacher calls on me. YES NO
8. My looks bother me. YES NO
9. When I grow up, I will be an important person. YES NO
10. I get worried when we have tests in school. YES NO
11. I am unpopular. YES NO
12. I am well behaved in school. YES NO
13. It is usually my fault when something goes wrong. YES NO
14. I cause trouble to my family. YES NO
15. I am strong. YES NO
16. I have good ideas. YES NO
17. I am an important member of my family. YES NO
18. I usually want my own way. YES NO
19. I am good at making things with my hands. YES NO
20. I give up easily. YES NO
21. I am good in my school work.  YES  NO
22. I do many bad things.  YES  NO
23. I can draw well.  YES  NO
24. I am good in music.  YES  NO
25. I behave badly at home.  YES  NO
26. I am slow in finishing my school work.  YES  NO
27. I am an important member of my class.  YES  NO
28. I am nervous.  YES  NO
29. I have pretty eyes.  YES  NO
30. I can give a good report in front of the class.  YES  NO
31. In school I am a dreamer.  YES  NO
32. I pick on my brother(s) and sister(s).  YES  NO
33. My friends like my ideas.  YES  NO
34. I often get into trouble.  YES  NO
35. I am obedient at home.  YES  NO
36. I am lucky.  YES  NO
37. I worry a lot.  YES  NO
38. My parents expect too much of me.  YES  NO
39. I like being the way I am.  YES  NO
40. I feel left out of things.  YES  NO
41. I have nice hair.  YES  NO
42. I often volunteer in school.  YES  NO
43. I wish I were different.  YES  NO
44. I sleep well at night.  YES  NO
45. I hate school.  YES  NO
46. I am among the last to be chosen for games.  YES  NO
47. I am sick a lot.  YES  NO
48. I am often mean to other people.  YES  NO
49. My classmates in school think I have good ideas.  YES  NO
50. I am unhappy.  YES  NO
51. I have many friends.  YES  NO
52. I am cheerful.  YES  NO
53. I am dumb about most things.  YES  NO
54. I am good looking.  YES  NO
55. I have lots of pep.  YES  NO
56. I get into a lot of fights.  YES  NO
57. I am popular with boys.  YES  NO
58. People pick on me.  YES  NO
59. My family is disappointed in me.  YES  NO
60. I have a pleasant face.  YES  NO
61. When I try to make something, everything seems to go wrong.  YES  NO
62. I am picked on at home.  YES  NO
63. I am a leader in games and sports.  YES  NO
64. I am clumsy.  YES  NO
65. In games and sports, I watch instead of play.  YES  NO
66. I forget what I learn.  YES  NO
67. I am easy to get along with.  YES  NO
68. I lose my temper easily  YES  NO
69. I am popular with girls.  YES  NO
70. I am a good reader. YES NO
71. I would rather work alone than with a group. YES NO
72. I like my brother (sister). YES NO
73. I have a good figure. YES NO
74. I am often afraid. YES NO
75. I am always dropping or breaking things. YES NO
76. I can be trusted. YES NO
77. I am different from other people. YES NO
78. I think bad thoughts. YES NO
79. I cry easily. YES NO
80. I am a good person. YES NO

Score:________
APPENDIX J: REVISED CHILDREN'S MANIFEST ANXIETY SCALE

1. I have trouble making up my mind.  YES  NO
2. I get nervous when things do not go the right way for me.  YES  NO
3. Others seem to do things easier than I can.  YES  NO
4. I like everyone I know.  YES  NO
5. Often I have trouble getting my breath.  YES  NO
6. I worry a lot of the time.  YES  NO
7. I am afraid of a lot of things.  YES  NO
8. I am always kind.  YES  NO
9. I get mad easily.  YES  NO
10. I worry about what my parents will say to me.  YES  NO
11. I feel that others do not like the way I do things.  YES  NO
12. I always have good manners.  YES  NO
13. It is hard for me to get to sleep at night.  YES  NO
14. I worry about what other people will think about me.  YES  NO
15. I feel alone even when there are people with me.  YES  NO
16. I am always good.  YES  NO
17. Often I feel sick in my stomach.  YES  NO
18. My feelings get hurt easily.  YES  NO
19. My hands feel sweaty.  YES  NO
20. I am always nice to everyone.  YES  NO
21. I am tired a lot.  YES  NO
22. I worry about what is going to happen.  YES  NO
23. Other children are happier than I.  YES  NO
<table>
<thead>
<tr>
<th></th>
<th>Statement</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>I tell the truth every single time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td>I have bad dreams.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td>My feelings get hurt easily when I am fussed at.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td>I feel someone will tell me I do things the wrong way.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td>I never get angry.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td>I wake up scared some of the time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td>I worry when I go to bed at night.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td>It is hard for me to keep my mind on my schoolwork.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32</td>
<td>I never say things I shouldn't.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33</td>
<td>I wiggle in my seat a lot.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>I am nervous.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>35</td>
<td>A lot of people are against me.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>36</td>
<td>I never lie.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>37</td>
<td>I often worry about something bad happening to me.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Child Behavior Checklist for Ages 4

## Child's Information

**Child's Name:**

- **Gender:**
  - [ ] Boy
  - [ ] Girl

**Age:** [ ]

**Race:** [ ]

**Today's Date:**

- **Month:** [ ]
- **Day:** [ ]
- **Year:** [ ]

**Child's Birthday:**

- **Month:** [ ]
- **Day:** [ ]
- **Year:** [ ]

**Grade in School:**

## Part I: Likes

1. **Please list the sports your child most likes to take part in.**
   - For example: swimming, baseball, skating, skiboarding, bike riding, fishing, etc.
   - [ ] None
   - a. __________________________
   - b. __________________________
   - c. __________________________

2. **Compared to other children of the same age, about how much time does he/she spend in each sport?**
   - [ ] Don't Know
   - Less Than Average
   - More Than Average

3. **Compared to other children of the same age, how well does he/she do each one?**
   - [ ] Don't Know
   - Below Average
   - Average
   - Above Average

## Part II: Hobbies

1. **Please list your child's favorite hobbies, activities, and games, other than sports.**
   - For example: stamps, dolls, books, piano, crafts, singing, etc. (Do not include T.V.)
   - [ ] None
   - a. __________________________
   - b. __________________________
   - c. __________________________

2. **Compared to other children of the same age, about how much time does he/she spend in each hobby?**
   - [ ] Don't Know
   - Less Than Average
   - More Than Average

3. **Compared to other children of the same age, how well does he/she do each one?**
   - [ ] Don't Know
   - Below Average
   - Average
   - Above Average

## Part III: Organizations

1. **Please list any organizations, clubs, teams, or groups your child belongs to.**
   - [ ] None
   - a. __________________________
   - b. __________________________
   - c. __________________________

2. **Compared to other children of the same age, how active is he/she in each?**
   - [ ] Don't Know
   - Less Active
   - More Active

## Part IV: Jobs or Chores

1. **Please list any jobs or chores your child has.**
   - For example: paper route, babysitting, making bed, etc.
   - [ ] None
   - a. __________________________
   - b. __________________________
   - c. __________________________

2. **Compared to other children of the same age, how well does he/she carry them out?**
   - [ ] Don't Know
   - Below Average
   - Average
   - Above Average

---

*This form filled out by:*

- [ ] Mother
- [ ] Father
- [ ] Other (Specify)
1. About how many close friends does your child have? □ None □ 1 □ 2 or 3 □ 4 or more

2. About how many times a week does your child do things with them? □ less than 1 □ 1 or 2 □ 3 or more

VI. Compared to other children of his/her age, how well does your child:

   a. Get along with his/her brothers & sisters?
   b. Get along with other children?
   c. Behave with his/her parents?
   d. Play and work by himself/herself?

Worse  About the same  Better
□       □        □
□       □        □
□       □        □
□       □        □

VII. 1. Current school performance—for children aged 6 and older:

   □ Does not go to school

   a. Reading or English
   b. Writing
   c. Arithmetic or Math
   d. Spelling

Failing  Below average  Average  Above average
□        □        □        □
□        □        □        □
□        □        □        □
□        □        □        □

Other academic subjects—for example: history, science, foreign language, geography.

   □        □        □        □

2. Is your child in a special class?
   □ No  □ Yes—what kind?

3. Has your child ever repeated a grade?
   □ No  □ Yes—grade and reason

4. Has your child had any academic or other problems in school?
   □ No  □ Yes—please describe

When did these problems start?

Have these problems ended?
   □ No  □ Yes—when?
Below is a list of items that describe children. For each item that describes your child now or within the past 6 months, please circle the 2 if the item is very true or often true of your child. Circle the 1 if the item is somewhat or sometimes true of your child. If the item is not true of your child, circle the 0.

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Circle 0</th>
<th>Circle 1</th>
<th>Circle 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acts too young for his/her age</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Allergy (describe):</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Argues a lot</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Asthma</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Behaves like opposite sex</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Bowel movements outside toilet</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Bragging, boasting</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Can't concentrate, can't pay attention for long time</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Can't get his/her mind off certain thoughts; obsessions (describe):</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Can't sit still, restless, or hyperactive</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Clings to adults or too dependent</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Complains of loneliness</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Confused or seems to be in a fog</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Cries a lot</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Cruel to animals</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Cruelty, bullying, or meanness to others</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Daydreams or gets lost in his/her thoughts</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Deliberately harms self or attempts suicide</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Demands a lot of attention</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Destroys his/her own things</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Destroys things belonging to his/her family or other children</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Disobedient at home</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Disobedient at school</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Doesn't eat well</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Doesn't get along with other children</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Doesn't seem to feel guilty after misbehaving</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Easily jealous</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Eats or drinks things that are not food (describe):</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Fears certain animals, situations, or places other than school (describe):</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Fears going to school</td>
<td>0</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

Please see other side
<table>
<thead>
<tr>
<th>No.</th>
<th>Behavior (describe)</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>57</td>
<td>Physically attacks people</td>
<td>0 1 2</td>
</tr>
<tr>
<td>58</td>
<td>Picks nose, skin, or other parts of body</td>
<td>0 1 2</td>
</tr>
<tr>
<td>59</td>
<td>Plays with own sex parts in public</td>
<td>0 1 2</td>
</tr>
<tr>
<td>60</td>
<td>Plays with own sex parts too much</td>
<td>0 1 2</td>
</tr>
<tr>
<td>61</td>
<td>Poor school work</td>
<td>0 1 2</td>
</tr>
<tr>
<td>62</td>
<td>Poorly coordinated or clumsy</td>
<td>0 1 2</td>
</tr>
<tr>
<td>63</td>
<td>Prefers playing with older children</td>
<td>0 1 2</td>
</tr>
<tr>
<td>64</td>
<td>Prefers playing with younger children</td>
<td>0 1 2</td>
</tr>
<tr>
<td>65</td>
<td>Refuses to talk</td>
<td>0 1 2</td>
</tr>
<tr>
<td>66</td>
<td>Repeats certain acts over and over; compulsions (describe):</td>
<td>0 1 2</td>
</tr>
<tr>
<td>67</td>
<td>Runs away from home</td>
<td>0 1 2</td>
</tr>
<tr>
<td>68</td>
<td>Screams a lot</td>
<td>0 1 2</td>
</tr>
<tr>
<td>69</td>
<td>Secretive, keeps things to self</td>
<td>0 1 2</td>
</tr>
<tr>
<td>70</td>
<td>Sees things that aren't there (describe):</td>
<td>0 1 2</td>
</tr>
<tr>
<td>71</td>
<td>Self-conscious or easily embarrassed</td>
<td>0 1 2</td>
</tr>
<tr>
<td>72</td>
<td>Sets fires</td>
<td>0 1 2</td>
</tr>
<tr>
<td>73</td>
<td>Sexual problems (describe):</td>
<td>0 1 2</td>
</tr>
<tr>
<td>74</td>
<td>Showing off or clowning</td>
<td>0 1 2</td>
</tr>
<tr>
<td>75</td>
<td>Shy or timid</td>
<td>0 1 2</td>
</tr>
<tr>
<td>76</td>
<td>Sleeps less than most children</td>
<td>0 1 2</td>
</tr>
<tr>
<td>77</td>
<td>Sleeps more than most children during day and/or night (describe):</td>
<td>0 1 2</td>
</tr>
<tr>
<td>78</td>
<td>Smears or plays with bowel movements</td>
<td>0 1 2</td>
</tr>
<tr>
<td>79</td>
<td>Speech problem (describe):</td>
<td>0 1 2</td>
</tr>
<tr>
<td>80</td>
<td>Stares blankly</td>
<td>0 1 2</td>
</tr>
<tr>
<td>81</td>
<td>Steals at home</td>
<td>0 1 2</td>
</tr>
<tr>
<td>82</td>
<td>Steals outside the home</td>
<td>0 1 2</td>
</tr>
<tr>
<td>83</td>
<td>Stores up things he/she doesn't need (describe):</td>
<td>0 1 2</td>
</tr>
</tbody>
</table>

PLEASE BE SURE YOU HAVE ANSWERED ALL ITEMS. UNDERLINE ANY YOU ARE CONCERNED ABOUT.
APPENDIX L:

Children of Divorce: A Group Treatment
Manual for Research and Application

Marcy Tepper Bornstein, Philip H. Bornstein, and Herman A. Walters
University of Montana

Running head: CHILDREN OF DIVORCE
Abstract
Recent evidence indicates that parental divorce can have pervasive negative effects upon children. The current paper provides "treatment manual" descriptions of a therapeutically-oriented group for 7-12 year-old children whose parents have recently divorced. A time-limited group psychotherapy model was employed with emphasis placed upon: (a) presentation of information, (b) development of communication skills, (c) clarification of feelings, (d) problem-solving, (e) anger management, and (f) the provision of support. While results indicate considerable initial success (see Bornstein, Bornstein, & Walters, 1984), the present paper is designed to be heuristic in nature. That is, to provide explicit detail thereby allowing for systematic replication and continued empirical examination of treatment effectiveness.
It has been estimated that by 1990, 33% of our nation's children, before they reach the age of 18, will experience the divorce of their parents (Glick, 1979). Although the divorce rate in the U.S. has stabilized since 1976, it still remains the highest in the world at 5.0 divorces per 1,000 total population (Glick, 1979; Hetherington, 1981). Interestingly, however, evidence accumulates indicating the vast effects that divorce has upon the ever-increasing number of children affected.

The negative implications of divorce on a child's development have been repeatedly demonstrated in the literature. Hess and Camera (1979) speak of the capacity of the divorce experience to interfere with the normal progression of a child's developmental ability to work and play. Hetherington, Cox and Cox (1979a, 1979b) reported adjustment problems in the area of cognitive, emotional, and social development among children of divorce. Stolberg and Anker (in press) found that major personal/environmental changes such as parental divorce were related to children's depression, social withdrawal, aggression and delinquency. In addition, Kurdek and Blisk (in press) recently reported such stressful life changes to be related to children's low self-esteem and continuing family problems.

The clinical literature describes the denial, grief, depression, fears of abandonment, loss of self-esteem, feelings of blame, guilt,
shame, and anger typically experienced by children of divorce (Levitin, 1979). Yet, only limited treatment programs have thus far been developed. Knowledgeable professionals, however, have repeatedly called for the implementation of child-oriented, community, or school-based intervention programs that might offset the short- and long-term effects of stressful family relations (Cantor, 1977; Hetherington, Cox, & Cox, 1979c). In fact, noting the high rate of divorce coupled with its dire consequences for children, Benedek and Benedek (1979) have mandated an inquiry into the particular psychological needs of these children. But, just what is to be done to meet their needs? Kurdek (1981) advocates the use of support systems designed to mitigate the stress and adjustment problems of children of divorce. While results indicate beneficial effects of support systems for post-divorce adults (Chiriboga, Coho, Stein, & Roberts, 1979; Raschke, 1977; Spanier & Castro, 1979), there is no evidence of any "trickle-down" effect upon their children. Thus, Cantor (1977) and Hetherington (1979) have argued for the establishment of child-oriented school or community-based intervention programs to prevent and/or remediate the problems of children of divorce. More recently, Kurdek, Blisk and Siesky (1981) have noted that children of divorce often benefit from discussing divorce-related problems with others who have experienced similar family strife. The child's realization that, "I'm not the only kid in the world who is going through this" can be quite therapeutic in itself. These authors maintain that group intervention techniques provide opportunity for an emotional, shared and corrective experience. As a result, children can experience
their parents' divorce as more normalized and less painful.

Given the above, the present authors attempted to develop a group-based treatment program for children of divorce. This was done as part of a larger, data-based investigation examining the general effectiveness of such a therapeutically-oriented group for children 7-12 years of age. The goal of the program was to aid children in coping with the stressful aspects of their parents' divorce in the early period following marital break-up. The purpose of this paper, however, is to describe in detail the procedural aspects of this group experience. All too often, as scientists, we seem to get lost in the empiricism of our own data. While we are fully supportive of objectively evaluating therapeutic effectiveness (see Bornstein, Bornstein, & Walters, 1984), we also believe that treatments must be replicable. Thus, our purpose in the present paper is to provide "treatment manual" descriptions enabling other therapists to conduct and utilize similar methods in their own clinical work with children of divorce.

**Treatment Manual**

The program outlined below utilized a time-limited group psychotherapy model. Groups met weekly for hour-and-a-half sessions across six consecutive weeks, and ranged in size from 5 to 10 children per group. Siblings were always placed in separate groups and male-female therapist teams were chosen as leaders to serve as positive parental role models. Throughout the course of treatment, co-therapists facilitated the examination of specific issues and
focused on selected problems commonly faced by children of divorce. While therapists clearly provide some structure, rules and regulations were kept to a bare minimum so as to facilitate a more child-centered group format.

Session One

At the initiation of the session, snacks (graham crackers, milk, juice) are set out and children are told to help themselves. The first session begins with group member introductions. An overview of the program is then presented and the importance of regular attendance is stressed. If necessary, attempts are then made to allay any questions, concerns, or misgivings that the children may have about the program.

Feelings typical among children whose parents have been divorced (e.g., sadness, anger, etc.) are next described by the co-therapists. It is stressed that such feelings are quite common. In addition, however, children are told that feelings cannot be "bottled up" inside. An analogy is provided: "Feelings are like a balloon--if you keep pushing them down, like the air inside a balloon, they feel like they will burst out and pop the balloon. But if they are allowed to come out in a calm and natural way, you feel, not as if you are about to explode, but much better and more relaxed." Members are encouraged to speak within the group about this or any topic that may be relevant. Hand-raising is explicitly discouraged and children are told that the group is "theirs", a place where they can come to discuss anything that is bothering them. The
concept of confidentiality is introduced and each child makes a commitment not to discuss personal matters outside the group. Examples of appropriate/inappropriate extra-therapy topics of discussion are provided.

In order to facilitate the group members' expression of feelings about their parents' divorce, "safe" topics are serially introduced for discussion by the group at this time. These include:

(a) Why do people get married in the first place?
   1. Which of these are good reasons? (Why?)
   2. Which of these are bad reasons? (Why?)

(b) What makes a marriage good?

(c) How did your parents first meet?

(d) What kinds of things did your parents do together when they were first dating?

(e) Why did they get married?

(f) Did your parents have a good marriage in the early years?

(g) Why do some marriages fail?

(h) Why are more people getting divorced today than ever before?

At this point, therapists explain that many couples getting divorced today have children, and professionals are just beginning to realize how divorce affects children. Therapists then ask:

(i) What makes divorce so hard on kids?

(j) What were the two hardest things about the divorce for you? (Stolberg & Garrison, 1981)
(k) Are there any benefits to divorce?

(1) How did you first find out that your parents were getting divorced? How did you feel?

(m) Did they answer all your questions?

(n) Do you feel free to ask your parents questions about the divorce?

Discussion of these topics should be conducted in a supportive and "feelings focused" manner with special attention paid to facilitating group process. At the close of this discussion, it is suggested that between the first and second sessions children make inquiry as to how parents first met and what they enjoyed doing together. Since the next session is focused on communication, it is advised that group members pay special attention to both verbal and nonverbal forms of interaction (again, examples are provided). The session concludes with a brief review of the topics discussed.

Session Two

The session begins with a discussion of what the children learned regarding how parents met and early activities together. The general concept of communication is introduced; a list of the different ways in which people communicate is compiled. This list is written on a large, visible chart or board and separated into its verbal and non-verbal components. Exercises designed to provide guidelines for affecting positive social interaction are then introduced.

Exercise I. Therapists role-play a divorce-related conflict situation (e.g., child arrives home two hours late from a weekend
visit with non-custodial parent). The custodial parent (played by one therapist) employs communication stopper tactics (Fearn & McCabe, 1975) such as interrupting, confronting, dominating, and limited eye contact in a "discussion" with the child (played by the other therapist). This role-play is performed before the group, videotaped, and then played back. Group members observe/discuss the interaction and communication stoppers are identified.

**Exercise II.** Therapists role-play another divorce-related conflict situation (e.g., child does not like the person Mom is dating). This time the child (again played by one therapist) uses communication stoppers rather than the parent (played by the other therapist). Once again, the role-play is videotaped in front of the group, played back and discussed.

Following these role-play exercises, discussion becomes more personalized. Group members are asked what communication stoppers are employed in their own home and how these feel. The discussion then shifts to more positive forms of communication and the following suggestions are offered.

1. Talk about something that is bothering you when it occurs.
2. Use the **SANDWICH TECHNIQUE**. That is, sandwich what you want to say (i.e., the "meat" of the communication) between two positive, understanding remarks. For example, "Mom, I know this is a hard time for you being the only parent in the house, but it really upsets me when I have to do your jobs. I know you've got a lot to do, but there must
be another answer.

(c) Don't be nasty. Nasty talk begets a nasty response. This is not positive communication.

(d) Tell your parents what they did, when they did it, and how it made you feel. Be specific.

Group discussion then ensues around the topic, "What do your parents presently do that upsets you?"

**Exercise III.** Using the group discussion, a therapist and child volunteer role-play a situation generated above. The child is instructed to use positive communication skills and is prompted to do so by the nonrole-playing co-therapist if necessary. Videotaping, playback, and discussion then follow. Time permitting, this exercise is repeated with another child-therapist combination using a different stimulus situation.

Session Two closes with a review of communication skills and the assignment of buddies within the group. Telephone numbers are exchanged between pairs of children and they are specifically instructed to call their buddy one time during the upcoming week. Further, they are to use the sandwich technique with one of their parents during the week and inform their buddy how that proceeded.

**Session Three**

This session begins with a review of communication skills and a discussion of buddy contacts. This then naturally leads to group interaction regarding the sandwich technique and its effectiveness over the course of the past week. The major goal of this session,
however, is an examination of feelings. Consequently, at an appropriate time, the therapists state, "Most children whose parents have divorced are filled with lots of feelings. It is important to be able to recognize and work with these feelings." Therapists then attempt to assist children in becoming aware of events which precede and/or cause various feelings (South Carolina Department of Education, 1982). To accomplish this, therapists engage the group in the following questions.

(a) What are some feelings people have? (e.g., happy, sad, afraid, etc.)

(b) How do you know when you are happy (sad, afraid, etc.)? How does it feel on the inside?

(c) How do you know when someone else is happy (sad, afraid, etc.)? How does it look on the outside?

(d) What sorts of things make you have feelings? This list should include such things as: when we think someone does not like us, when someone does something to hurt us, when someone does something nice for us.

Following this discussion, the children are placed in their buddy pairs. Each child is to tell his/her buddy about a family situation that made him/her feel happy and one that made him/her feel sad. Members return to the group and all children report upon the two feelings situations of their buddy. Therapists then focus on what a child may have been thinking when he/she was having the feelings reported. An example of differentiating thoughts from
"You are about to spend the weekend with your father. You are really looking forward to it. You think—'Boy, Dad and I are really going to have a great time. I'll have him all to myself. We'll go fishing, to the movies, out to eat, and talk -- I can't wait!' But you also know that Dad has a new girlfriend and he is probably going to want to spend some time with her. You might think to yourself, 'If Dad spends time with her when he should be spending time alone with me, that's proof that he cares more for her than he does for me.'" The therapists then ask the group: "How would this child feel after saying these kinds of things to himself?" (sad, angry). "What could he do to not feel so sad and angry? The resulting discussion is apt to yield some of the following types of responses:

(a) The child could say different things to himself (e.g., "Dad loves me but he also needs time with his girlfriend"). Therapists use this to explore how different self-statements yield different feelings.

(b) Child could talk to Dad using the sandwich technique.

(c) Child could call a friend (or buddy) and talk to him/her about it.

(d) Child could write about his/her feelings in a diary or journal.

Finally, therapists note that while the group has been talking quite a bit about the feelings children have when their parents
divorce, parents too have feelings. The group is then asked to focus on the impact divorce has upon parents (Weers & Logee, 1983).

Discussion based upon questions similar to those below then follows. "Do you think divorce is hard on parents? How do you think your parents feel about the divorce? How do you think they feel about their ex-spouse? How do you think they feel about themselves?"

Children are asked to check-out their impressions over the course of the next week and share findings with their buddies.

Session Four

The purpose of this session is to teach children problem-solving techniques (i.e., how to evaluate a problem and generate alternative solutions). Initially, however, the session begins with a sharing of information regarding the interim assignment (viz., parental response to divorce).

To begin the problem-solving instruction, a therapist and child role-play an actual problem that the child has previously discussed in the group. The acronym I B E T E.T. is then introduced for purposes of problem-solving.

I - Identify the problem. Ask "What is the problem here? What do I want?" Have the group identify the problem in the above role-play situation.

B - Brainstorm. Children are encouraged to generate a wide variety of possible solutions to the problem.

E - Evaluate. The group now goes back to their list of solutions and carefully evaluates each one. Recommended evaluative
questions include: "Is this solution possible for me to carry out? What might happen if I were to choose this solution? Would I really be willing to do this?"

T - Try it. That is, choose that solution that appears potentially most effective and test it out. If time constraints are not of concern, have the child role-play the chosen solution with the therapist.

E - Evaluate the trial. Ask: "Did I get the results I expected? Am I pleased with the results I got? Did I carry out the solution properly? Could I improve upon it?" If the child or group is not pleased with the trial solution, return to the original list of brainstormed solutions.

T - Try another one. Find that alternative which now appears more promising and give it a try.

After the above has been completed for the original role-play, choose another problem from the group and apply problem solving using the I BET E.T. method. Once again, have individuals role-play their trial solution, videotape, playback, and evaluate.

Finally, group members are asked to call their buddies and brainstorm solutions to problems that might have arisen during the week.

Session Five

This meeting begins by discussing buddy phone calls and use of the problem solving technique. Children are told that, during the final session, parents will be invited to attend. An
overview of the procedures to be used in this concluding child/parent session is presented and any concerns are discussed. The remainder of Session Five is spent introducing methods of anger control and reviewing skills developed in previous sessions.

Therapists initiate discussion with regard to anger by asking the group to guess what most children commonly feel when they learn of their parents divorce. Quite naturally, a discussion of anger follows and the group is asked: "Do any of you ever feel angry at your parent(s)?, What kinds of things make you angry at your parents?, and How does the anger feel on the inside?" The following methods are then introduced to help the children cope with their anger (Novaco, 1975):

(a) Children are encouraged to look at the antecedents of angry feelings in specific situations and examine what they may be saying to themselves which promotes their anger.

(b) Children are instructed in "cooling off" angry feelings using self-statements, relaxation techniques, and/or release procedures (e.g., jogging, punching a pillow, etc.). Some of these strategies may even be practiced during the session.

(c) Additional positive coping mechanisms can be generated from the group (e.g., keeping a feelings journal, writing a letter, talking to a friend or a stuffed animal, talking to the person toward whom the anger is directed, etc.).
(d) Finally, the group discusses the drawbacks of poor anger control methods and reemphasizes the benefits of positive coping techniques.

At the conclusion of this discussion, therapists begin their review. They explain that an important focus of this program has been helping children identify feelings in themselves and their parents. The point is made that perhaps the most beneficial aspect of the program is recognizing that "kids have feelings too." Once the child knows how he/she feels about a situation and how his/her parent(s) feel(s), the child can let the parent(s) know these feelings via their newly-developed communication skills. While this may not always result in getting what one wants, at least feelings have been shared and greater honesty developed in the relationship. The children are reminded that some situations are more difficult and therefore require a more structured approach. It is at these times that the I BET E.T. method is recommended.

Before concluding, the therapists ask if there are any final comments or questions. The children are asked what they like best/least about the group and if there is anything in particular they would liked mentioned to parents at the final meeting. In closing, all children are thanked for their participation and told what a pleasure it has been to work with them.

Session Six

Therapists prepare for this final meeting in two specific ways. First, all parents are called and invited to attend this concluding
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session. Second, videotaped role-play vignettes are prepared in advance.

Once parents and children have arrived at the site, all are brought together in a large room. Parents and children are asked to find seats next to each other and everyone introduces themselves. Therapists thank the families for participating in the program and note how enjoyable it has been getting to know and work with the children. It is explained that group time was spent primarily learning to identify and communicate feelings. While this process was difficult for the children, the therapists recognize that attending this final session may be equally difficult for many parents. Accordingly, the therapists then begin the discussion by asking how participants feel about being attending tonight's meeting. At this point, conversation and tone should be somewhat relaxed in an attempt to allay anxieties and reduce tension.

The therapists then explain the session format. Prepared videotapes will be played and discussed in small family groups. As a means of facilitating discussion, therapists will move from group to group aiding parents and children in their communication process. The videotaped role-play vignettes are then shown to the group one at a time. While six such vignettes have been prepared (each approximately 3-5 minutes in length), limitations in time permit only the use of three per final session. The six vignettes are as follows:

(a) Child tells parent that she hates it when bad things are
said about the other parent.

(b) Child tells father that he seems to be busy all the time and they do nothing together.

(c) Child tells parent that he feels sad much of the time and often cries himself to sleep at night.

(d) Mother tells child that she cannot see her father next weekend because he brought her home late from her last visit.

(e) Child tells father that he feels disloyal to mother when spending time with father's new girlfriend.

(f) Child tells mother she does not feel comfortable in her blended family.

After observing the first vignette, parents are told to ask their child if he/she ever feels like the child on the tape. Parents are then individually encouraged to discuss this or a related issue with their child. As therapists move from family to family facilitating communication, they may utilize a wide variety of therapeutic techniques previously discussed in the literature (see Gurman & Kniskern, 1981). Following 10-15 minutes of such discussion, the larger group is re-formed and limited discussion follows. In a similar manner, the second and third vignettes are then presented. Of some note, therapists should be fairly well experienced in family intervention techniques. Our purpose is not to resolve all conflicts between parents or parent and child. Indeed, this session must not become yet another battleground for parent-parent
disputes. Rather, our purpose is to encourage the child's utilization of those skills learned as part of the group experience.

The conclusion of the meeting is dedicated to impressing upon parents and children the importance of effective communication. It is stressed that the group experience has been a beginning. Problems must be confronted, feelings expressed, and skills practiced. While all of the above may be somewhat risky, without risk there will be no gain. If the feelings are expressed and the parent punishes the child for expressing them, then the child will protect him/herself by holding the feelings inside. This will be of limited value to all parties concerned.

Summary

A group-based program designed to aid children in coping with the early stages of their parents' divorce has been described. Although this specific program was focused on 7-12 year-old children, many aspects appear applicable with a wide variety of ages. The primary purpose of the group experience was to facilitate communication between parent and child. While this undoubtedly can be accomplished in a multitude of ways, we have found this child-focused group to be particularly rewarding. The explicit description provided above should prove heuristic in nature, allowing for systematic replication and continued empirical examination of treatment effectiveness.
References


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