

MOVING ON: Families of Separation and Divorce

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This article describes an eight-session group for families of separation and divorce that facilitates the transitioning process by enabling more effective communication. In each session, parents and children meet separately and then come together to do a joint activity that synthesizes the theme of that session. The group is thus structured to enhance both peer group and family identity.

There are over one million divorces annually in the United States. Half of new marriages in the United States end in divorce, most in the first ten years. In some counties in California, the rate is as high as two out of three (Teyber, 1992). Approximately 80 percent of people who divorce remarry, usually within five years of the divorce. However, 60 percent of remarriages also end in divorce at some point (Friedman, 1994).

Over one-third of children in the 1990s experienced their parents' divorce, and approximately 25 percent of children today spend some time living in a stepfamily (Teyber, 1992). According to some estimates, almost one-half of all children live in a remarried family at some time (Friedman, 1994).

While divorce in the Jewish community occurs at a lower rate than in the general population, it is estimated that between one-third and one-fourth of Jewish couples divorce. As in the general population, most of these adults will remarry and, in most cases, raise a child from a previous marriage (Friedman, 1994).

Divorce traumatizes the family system and extended family system. A report from the National Center for Health Statistics concludes that children from stepfamilies or single-parent families are two to three times more likely to have behavioral or emotional

problems than children from homes with both biological parents. Wallerstein (1994) also cites several studies that confirm the deleterious impact of divorce on school behavior and success.

Children often have no view of their family as being one of thousands in the midst of this transition. Some are unaware of other children from families of separation and divorce. Many experience feelings of shame and isolation in this situation. They need a safe place to communicate their feelings and experiences.

PURPOSE OF THE GROUP

As therapists at Jewish Family Service in Los Angeles, we have witnessed firsthand the trauma of families navigating the troubled waters of separation, divorce, and remarriage. We had already run parenting classes, therapy groups for separated and divorced adults, and a group for children of separation and divorce. It became clear that we needed a venue that would better support the transitioning family and enable parents and children to communicate more effectively about these issues. The program we established is called "Moving On: Families of Separation and Divorce," an eight-week group for parents and children.

The program has run at least twice a year for the past five years and has several goals:

- to provide a safe environment within a peer group for both parents and children to address the impact of the family's transition, as well as the restructured family identity
- to teach parenting skills and to address issues unique to parenting in separate households
- to help families form a positive peer group and to provide a support system that might continue after the group
- to provide the opportunity for therapeutic interaction and reality testing in the presence of both peer groups
- to normalize the feelings experienced as a result of separation and divorce and to help families develop coping skills to deal with these feelings, as well as the challenges of this transition
- to raise awareness of services provided by Jewish Family Service and other community resources

INTAKE

Clients join the group in several different ways. First, there is a pool of clients who have completed intakes and are interested in or are already in counseling at the agency. In addition, ads are placed in local and community papers, and fliers are sent to local public and private schools, to religious and community organizations and agencies (e.g., the District Attorney's office, Department of Children and Family Services, Jewish Big Brothers), and to private therapists known to the agency.

Intake begins with a phone interview to explain and answer questions about the group, as well as to determine if the client family meets the criteria for the group: an age range of seven to eleven for children and a commitment to the goals of the group. A thirty-minute family interview with one of the group facilitators follows. This intake procedure is important for three reasons:

1. It reduces the family's anxiety and eases the transition into the group.
2. It enables the family to begin to develop a sense of trust in the facilitator and the process.
3. It enables the facilitator to better assess the needs of the family and of the group as a whole.

Often there are questions about participation of the other adults involved with the child. Biological parents and stepparents are encouraged to attend on the condition that they participate cooperatively and that their presence together will not cause the child anxiety. Part of the interview is spent with the child/children in order to explain the group at a developmentally appropriate level and to allow for questions and concerns. Ideally, each child meets with a facilitator during intake.

The fee for each of eight sessions is \$10.00 per child and \$10.00 per adult household. For example, a family with two separate households and two children would pay \$40.00 per session for eight sessions.

GROUP COMPOSITION AND STRUCTURE

A minimum of two facilitators—both masters-level social workers—run the group. The children's group is generally co-facilitated by an MSW student intern. Although it is not always the case, having a male and female facilitator for the children's group provides a good model for the genders working together.

Group composition is based on several factors. In some cases parents are newly separated, and in other families the divorce has been finalized years earlier. Usually the children are the identified patients, but it shortly becomes clear to all that each family member carries a burden and looks forward to the support to be derived from the group. We attempt to minimize the age differences of the children in the group in order to facilitate appropriate activities and discussions.

We select families with latency-aged children as we believe they will be most receptive to intervention. The children are old enough to have some abstract thinking skills and are able to verbalize on a fairly sophisticated level. Experience has taught us that in spite of pressures from families to include an older or younger child, neither extreme can sustain attention in a group geared to the average age. Those who fall outside the criteria for the group are referred for family and/or individual counseling.

Several of the groups have included siblings. In the screening interview, we ask parents and children how they think the children will function in the group together. In the group we are sensitive to their relationship and to treating them as individuals. In composing the group we are also sensitive to the balance of males and females.

Any adult from the extended family who is involved on a regular caretaking basis with the child is invited to participate in the group. This includes parents, stepparents, and significant others. Participating adults of the family group need to be able to come together on behalf of the child. Because we are creating a safe environment, we need to consistently monitor the adult relationships and their impact on the child. The adults are attending on behalf of the child and, therefore, need to be able to tolerate being in the same room together and be able to function in a civil manner.

In most cases, the child or children attend the group with the parent who has contacted the agency. In several cases, both members of the separated/divorced couple have attended, or one parent has also brought a stepparent or significant other. Because contact with the agency would often take place at the last minute, we were sometimes left to wonder whether the group would even materialize. Inevitably there would be a flurry of registration at the last minute, and the group would be filled to capacity (ideally, eight to ten children, which allows for individual participation and attention).

GROUP FORMAT

The group runs once a week for eight consecutive weeks, excluding holidays. We work within the constraints of the school calendar and take into consideration religious holidays. We are cognizant of the difficulties of sustaining a commitment to yet another activity in the busy lives of young families. Eight weeks has proven to be an effective time frame. It allows families to digest and integrate the experience between sessions. In some cases, families have enrolled a second time because it was such a positive experience.

Sessions run from 6:30 to 8 pm. This is an optimum amount of time because the children's attention can be sustained easily. It also allows us to end at a reasonable hour on a school night. Prior to the meeting, the facilitators meet to review the curriculum and prepare materials for the activities. After the meeting, families frequently consult with the facilitators. In addition, the facilitators regularly meet afterward to discuss any problematic issues that come up.

The group meeting is divided into two sections. The parents' and children's groups meet separately and simultaneously for the first forty-five to sixty minutes. Each group participates in activities or discussion on a common theme, which facilitates peer group bonding and allows each group to discuss its feelings and problems at an appropriate developmental level. This encourages reality testing within each peer group. The parent group focuses on the problems of single or two household parenting within the context of developmental and attachment theory. The children's group focuses on similar issues using role play, art, bibliotherapy, discussions, and activities aimed at self as well as peer awareness. The children have snacks and then join the parents for the second half of the meeting. Both groups then meet together for an activity and discussion that integrate and synthesize the theme of the evening.

GROUP STRUCTURE

In developing the topics and activities of the group, we are cognizant of the stages of group development and the unique issues that affect this population. The group is structured to help develop and/or enhance both peer group and family identity. This enables the families to develop skills for coping with the challenges inherent in the family transition and is a normalizing experience for the new family structure. Finally, we strive to facilitate the development of a whole group identity, composed of the individual family units. The following is a description of topics covered during the eight sessions of the group.

Session 1 is devoted to the introduction of both individuals and families. Subgroup activities are designed to help group members identify themselves to the group and to develop an awareness of common issues. The whole group activity—creation of a family shield—demonstrates the diversity of what constitutes a family (see Figure 1). Families are given an extra large sheet of paper and are directed to create a shield that represents them. Members generally draw the shape of a crest. Frequently, the shield is then divided into two or four sections. Each family can be as creative as it wants.

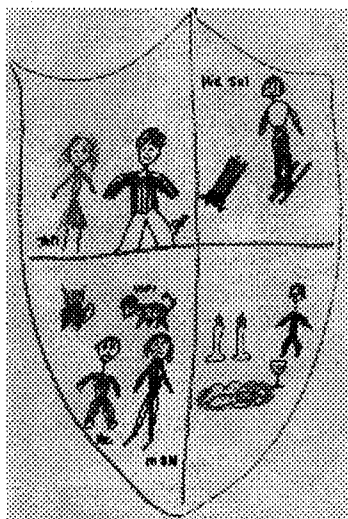
The shield includes members of the family identified by the participants. This facilitates an interesting family dynamic as the child now has an emotionally safe place to confront or express to the parent his or her need to remain connected to family members who might be estranged, such as the absent parent and/or ex-in-laws or other members of the extended family. This may also be evidenced by the child's inclusion of an emotionally or physically absent parent. Parents have often expressed surprise at the children's choices. This activity demonstrates that children may have a different view of the restructured family configuration than the parent. In addition to including family members on the shield (which always includes pets of both households), they also draw special family activities, family celebrations, rituals, and objects that represent the family identity.

As each family works on its shield, family members learn more about one another. When the family shares its shield, the group has the opportunity to get to know the other families. The normalization process has begun within the context of a family peer group. For some, this is the first time they are able to discuss how they understand the family's new configuration. It empowers the children to present this understanding to the adults in their lives and legitimizes their right to feel attached to both parents. This begins the process of normalizing their experiences and encourages dialogue between group members. As further sessions unfold, the group's identity crystallizes.

Session 2 focuses on the importance of rituals and how they contribute to emotional security, particularly for families in transition. This contribution is modeled by the facilitators' creating rituals within the group and by encouraging parents to keep basic rituals, such as health and sleep, consistent in both households. There is also acknowledgment of differences in the two households and helping the families adjust to them. Common differences are when to bathe, how much television a child is permitted to watch, chores, timing and types of snacks, etc. Often, parents need to be educated about the anxiety children experience when exposed to negative parental attitudes over seemingly minor changes in procedures or even scheduling. Family members are encouraged to negotiate and tolerate these differences.

Rituals of a religious nature are also discussed in this session. The facilitators have a background in Jewish family education, which provides a natural conduit for such discussions. Children are eager to share family rituals associated with Shabbat and other holidays, as evidenced by how often these rituals appear on the family shields in the first session. It is clear that these rituals hold a special place in forming and sustaining family identity and contribute to feelings of safety and continuity. Just as with other rituals, religious rituals may differ within reconfigured families. Family members are

Figure 1. Family Shield Created in Session One.



encouraged to respect these difference.

Session 3 focuses on helping families tolerate and talk about feelings of anger, sadness, loss, and fear. By the third week, the group has achieved a sense of identity and enough trust to be open about these feelings. The group activity focuses on how we mask our feelings and how each member manifests this masking on a day-to-day basis. Masking is defined as projecting one feeling to other people, but feeling something else inside. The activity for this session makes the concept concrete. We discuss examples solicited from members of times they felt one feeling on the inside and showed another on the outside. Many children admit to feelings of anger or sadness. When this occurs they sometimes mask the uncomfortable feelings with expressions of happiness or indifference. Parents also contribute examples. We talk about some of the reasons people may mask their feelings, such as fear of rejection, anger at various decisions or events, or protection of the feelings of others.

For this activity, each individual receives two white paper plates. Members are instructed to draw a face with crayons and markers, expressing one feeling on one plate and the hidden feeling on the other. Eyes and often mouths are cut out. The plates are then stapled or taped together with decorated sides

facing out. A tongue depressor or popsicle stick is attached as a handle. Members present their masks to the group. The activity helps validate these conflicting feelings and models how they can be expressed in a more healthy way.

Session 4 is devoted to issues of physical and emotional safety. Natural disasters, such as earthquakes, are metaphors for the shocks and aftershocks of family separation and divorce. Indeed, posttraumatic symptoms from separation and divorce are not uncommon. The group activity focuses on what each person needs in order to feel safe on a physical and emotional level. Each individual draws his or her perception of a safe space and is then encouraged to talk about it. For some children it is as simple as having a night light in the bedroom. Parents hear what changes may need to be made to help their children. For many family members, this is the first opportunity to admit to not feeling safe at times.

Session 5 focuses on coping strategies for difficult and sometimes overwhelming feelings. Family units brainstorm lists of healthy ways to deal with particular feelings. In sharing their ideas, family members are involved in a healing dialogue. These lists are typed and distributed during the next session.

Session 6 deals with parenting in separate

households and adjusting to differences in household rules as well as parenting styles. Group members are asked to share rules and rituals that differ in families in which there are two households. These are listed on the board and discussed. By this session, parents are more aware that sometimes fighting over issues (such as minor differences in bedtime schedules) may really be a way of staying negatively connected to the other parent or of fighting through the child. Children have an opportunity to share how they experience the different parenting styles and the parental discord. Hearing the emotional distress of many children, including their own, encourages parents to be more sensitive about these issues.

Session 7 focuses on acknowledging past experiences while looking toward the future. Each person creates a road map showing events of his or her own life on this metaphorical timeline. This concretizes the concept that we have the ability to cope with and survive most problems that emerge. Members demonstrate the importance of the group by its inclusion on the map. It is interesting to compare and contrast the road maps of members of the same family (e.g., which family events are considered pivotal by different family members). This activity also serves as a reflection of the group journey, which will be ending in the next session.

Session 8 is the final session. Each family creatively reviews three areas: the topics covered over the eight weeks, the emotions discussed, and the coping tools each member has learned to use. This is accomplished with mural paper and a variety of art supplies. The family generally divides the paper into three sections, each section representing responses to one of the three areas. The project is shared. After this activity there is a celebration with food. At the group's request, a group phone list is distributed. Group members are asked to fill out an anonymous evaluation form. During this last session, special attention is given to feelings of loss and any other feelings group members are experiencing evoked by the group's ending.

ADDITIONAL ISSUES

In Session one, the boundaries of confidentiality are explained to members. We explain that we are mandated by law to report child abuse as well as anything that might cause danger to self or others. Occasionally parents or children have reported incidents of physical abuse of the child perpetrated by the absent parent. One girl made a comment in the children's group that concerned the facilitators. A facilitator spoke to her privately and then followed up with an assessment with the parent as well. There was suspicion of abuse, and a report was filed with the Department of Children and Family Services.

Issues of suicidality have come up at different times in the parent and the child groups. One group included a family configuration of two children, both biological parents, and the mother's fiancé. The biological father presented as depressed and, when questioned privately by the parent group facilitator, admitted to suicidal ideation exacerbated by the upcoming remarriage of his ex-wife. A risk assessment was done, and appropriate referrals were made. The youngest child felt responsible for the father and felt guilty for becoming attached to his mother's fiancé. He internalized his father's depression, and when approached, he also admitted to feeling suicidal. We were able to assess and help the family system respond to this crisis.

Issues may arise when the other biological parent decides to come at the last minute or has missed the screening. Our screening of one particular parent and child failed to identify the intensity of a volatile relationship between the divorced parents. After a group meeting the parents argued uncontrollably in the building lobby, and one attempted to run over the other in the parking lot. This occurred in the presence of the child. Subsequently, we learned that one parent was simultaneously dealing with a substance abuse problem. In a follow-up call, that parent was assessed as not ready for this group and was given a referral to ADAP, the agency drug and alcohol program. This greatly relieved the child. Had that parent gone through the

screening process, the rage and substance abuse would probably have been detected.

Sometimes, unresolved custody issues affect group participation. In one family, a parent was supposed to bring the children to the group site so that the custodial parent could attend group with them. On one particular night, the children never arrived. Part of the session was spent dealing with the anxiety as well as the frustrations parents felt. When it was followed up during the week, it was learned that the other parent was noncompliant with the custody agreement and that this was a major factor affecting the children's lives. The attendance issue was resolved, and the children attended future sessions.

Some issues require collaboration with other agencies. One parent was so financially stressed that, while she was eager for her children to have a Jewish education, she could not afford it. We were able to refer her to a coalition of synagogues that had been recently created to alleviate this problem. Unfortunately, financial stress is a common theme for these families.

Other issues have included conflicts that arose from interfaith marriages or remarriages. In one example, a Catholic mother agreed to raise her child in the faith of the Jewish father. In divorcing, she also was divorced from the religious support system of the child. In another case, a disillusioned mother returned to the religion of her childhood and henceforth, the child was to be raised in two religions. Special attention is devoted to the issue of religion, particularly around holiday time, so that the children as well as the parents have a place to express related feelings and to acknowledge the importance of traditional rituals to each parent's family of origin.

CONCLUSION

Anonymous evaluations, attendance, member comments, and facilitator observations measure group efficacy. An unexpected outcome is that families sometimes choose to reenroll some months later, knowing that the

group composition will be different. Many times we are told that reenrollment comes at the request of the children who are happy to find a peer group and a forum to deal with their issues in a safe environment. Sometimes parents come back, saying that being in the group relieves some of the stress of the family. In every group, members wish the group could continue on an ongoing basis.

The bonding that takes place between individuals and families during the course of the group further validates the group's role as helping provide a support system. A number of parents have written that their children seem less angry at home and that their children feel more comfortable talking about problems. Children and parents appreciate finding a peer group and seeing how other families function under similar circumstances. Some parents have commented on how beneficial it is to be in a group that normalizes their experiences and provides validation and empathy. Some have commented on the warmth created in the group environment. This has been demonstrated by the connectedness some of the children feel toward the parents of other children, as well as toward each other. Toward the end of each group (and sometimes earlier) some families decide to network socially. Respondents have overwhelmingly replied that they would refer friends to the group, and a significant number have done so. The comments on the evaluation forms have been consistently gratifying and have validated the importance of the group. We have concluded that this group provides a valuable transitional tool for families of separation and divorce.

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