RUNNING HEAD: PARENTS' EXPERIENCE OF CHILD CONTACT FOLLOWING ENTRENCHED CONFLICT SEPARATION AND DIVORCE

<u>Parents' experience of child contact within entrenched conflict families following separation and divorce:</u>

<u>A qualitative study</u>

Abstract

Child contact arrangements with parents following separation and divorce are strongly endorsed for children in both public policy and law where safe, but can be difficult to sustain. Entrenched high-conflict post-separation relationships between parents can cause substantial emotional risks to children as well as impacting severely on parents' mental health. This paper describes a qualitative study, aimed at examining parents' experiences of contact arrangements post-separation, undertaken within a mixed methods random allocation study of therapeutic outcomes for parents in entrenched conflict over their children. Two established semi-structured interviews with 22 parents, were jointly subjected to thematic analyses. A thematic analysis across interviews revealed three main themes: 'Dealing with contact evokes extreme states of mind' for parents; when speaking of contact, the child is 'everywhere and nowhere' in the parents' minds; 'the hardest thing about contact is dealing with my ex-partner'. These findings indicate the immense strain children and parents are under and shed much light on the desperate states of mind for parents, particularly the anxieties driving relentless child contact disputes. This paper may contribute to the understanding of parents' experiences of contact arrangements post-separation, potentially providing important information which can inform best practice for professionals working with this population.

Key words; mentalization, parental conflict, child contact, separation and divorce, qualitative

According to figures from the Office for National Statistics (ONS), in 2012, 42% of all marriages in England and Wales ended in divorce, and almost half (48%) of these divorces involved children under the age of 16 (ONS 2014). Divorce has been described as one of the most stressful life events by both parents and children (Davies and Cummings 1994; Hetherington et al. 1985). One major consequence experienced by most children is the departure of one parent from the household, most commonly the father. Public policy and case law in the courts strongly endorse continuing contact with both parents following divorce if safe, however in practice this is a challenge for many parents and children in divorced families.

Co-parenting effectively following divorce or separation is frequently cited as the most difficult aspect of the divorce process (Emery 2011). The ability to adjust to this, and the strength of the co-parenting alliance have been found to be two of the most significant factors contributing to children's wellbeing following a divorce (Amato 2010; Emery 2011; Hetherington and Stanley-Hagan 1999). A high quality co-parenting alliance (Abidin and Brunner 1995) is defined as one in which parents actively put their own conflicts aside to focus on the children's needs (Oppenheim and Koren-Karie 2012), try not to expose their children to conflict, do not encourage the children to form allegiances with one parent (Amato and Afifi 2006; Emery 2011; Hetherington and Stanley-Hagan 1999), are able to communicate positively about child rearing (Graham 2003), and allow some flexibility in arranging contact (Kelly 2006). However, Kelly (2006) estimates that around 20-25% of divorced parents remain in conflicted co-parenting relationships, with frequent clashes, an inability to think about their co-parenting role as distinct from their troubled relationship with their former partner, angry behaviours, and the use of children as arguing tools (Hetherington and Kelly 2002; Kelly 2006; Maccoby and Mnookin 1992).

The present paper explores experiences of contact arrangements within this subset of separated and divorced parents from the perspectives of both resident and non-resident parents. As mothers assume custodial responsibility for children in the overwhelming majority of cases (Braver et al. 1993), the following review of research in relation to contact arrangements in divorced families mainly focuses on fathers as the non-resident parents. This study, however, was not restricted to families where the father had left.

Contact with Children Following Divorce or Separation

The quality of contact experiences has far more impact on children's psychological wellbeing than does the quantity or format. Factors which predict positive involvement by non-resident fathers have been found to include

higher levels of education (Cooksey and Craig 1998), higher income (Arditti 1999), children being older (Peacey and Haux 2007), regular financial contributions from fathers (Peacey and Haux 2007; Trinder et al 2002), less geographical distance (Kelly and Lamb 2003), and shorter time since separation (Baum 2003). Lower levels of non-resident father involvement have also been linked to the remarriage of either parent, arrival of new biological children (Hetherington and Kelly 2002), and protracted and adversarial legal proceedings (Baum 2003). Some of the strongest predictors, however, are interpersonal or psychological. For example, a good co-parenting alliance (Sobolewski and King 2005), whether findings are based on responses from mothers (Sobolewski and King 2005), fathers (Madden-Derdich and Leonard 2000), or children (Fortin et al. 2012). Studies of small samples of non-resident fathers indicate that their satisfaction with involvement with their children is correlated with their perceptions of support from, and effective communication with, the children's mothers (Hoffman 1995; Madden-Derdich and Leonard 2000; Rettig et al. 1999; Sobolewski and King 1999).

Following a divorce, some parents describe feeling a loss of control over their children's lives (Feldman 1990), non-resident fathers having been relegated to the status of a visiting parent, and excluded from decisions about the children (Nichols and Schwartz 1998), while for mothers it may be the first time that they cannot oversee fathers' parenting behaviours (Shapiro and Lambert 1999). the importance of perceived control fits with the well-established evidence on psychological responses to stressful life events, and the moderating influence of control over aversive stimuli (Averill 1973; Miller 1979).

While Fortin and colleagues state that "There is no blueprint for successful contact" (Fortin et al. 2012, p.xvi), certain positive factors do emerge from the literature. First, patterns of contact should reflect the age and developmental stage of children, and the diversity in parental interest and competence (Kelly 2006). Second, where possible, the preferences of resident and non-resident parents, and children, all need to be included in decisions regarding contact. Third, experiences of contact are coloured by the quality of parenting, and by the quality of relationships between co-parents and between non-resident parents and children. However, existing research in this area is dogged by a number of methodological flaws. First and foremost, most studies include responses from mothers only. Mothers' and fathers' reports often disagree on the amount of contact between non-resident fathers and children, with mothers tending to underreport contact and fathers tending to over-report (Braver et al.1991). They also often disagree on the quality of the co-parenting relationship (King and Heard 1999; Parkinson and Smyth 2004; Smyth and Weston 2004). Reporter bias must be considered a major limitation of studies eliciting only the

mother's perspective. Second, while studies based on panel surveys benefit from large sample sizes, measures of dimensions such as father involvement, parent-child relationships, and control, often consist of a handful of items from non-validated questionnaires. By including first-hand, in-depth accounts from both mothers and fathers, this paper addresses some of these shortcomings and builds up a richer picture of high-conflict divorced parents' experiences of contact arrangements, hoping to shed light on the intractableness of these situations.

Method

Setting for the Study

The present paper describes a qualitative examination of parents' experiences of contact arrangements post-separation, taken from a larger, mixed methods random allocation feasibility study: "The *Parents in Conflict* – *Putting Children First* study", that was conducted at Tavistock Relationships (TR)'s central London centre. The study compared therapeutic interventions with separated parents who were in chronic entrenched and intense conflict over their children, having spent an average of almost 4 years making repeat returns to the family courts in order to address their disputes and deal with allegations regarding issues such as poor parenting, neglect, harm caused to the child and flouting of court orders regarding contact arrangements. As part of the study, parents were randomly allocated to either:

(a) Mentalization-based therapy (MBT) for parental conflict—Parenting Together. Mentalizing refers to the capacity to understand one's own and others' mental states—found to be a central component in BPD and mood disorders (Bateman and Fonagy, 2015). While MBT (Bateman and Fonagy, 2006) was originally developed for patients with borderline personality disorder (BPD), it has also been effectively adapted for clinical use with a range of difficulties, including high-conflict couples who are not separated (Hertzmann and Abse 2008; Nyberg & Hertzmann, 2014). Specifically, for the purpose of this study, MBT has been developed for parents in post-separation conflict (MBT for parental conflict—Parenting Together; MBT-PT: Hertzmann et al., submitted). Given that mentalizing has an important role in affect regulation and interpersonal relationships (Bateman and Fonagy, 2015), we hypothesized that implementing MBT into an intervention for parents in entrenched conflict might prove highly beneficial.

(b) Parents' Group, a psycho-educational intervention for separated parents based on elements of the Separated Parents Information Program—part of the U.K. Family Justice System and approximating to treatment as usual.

We aimed to explore whether parents could be helped to collaborate better around parenting, and therefore lessen the harmful effects of their conflicts on their children. Results comparing the two interventions on pre-and post-interventions outcomes (incorporating both quantitative and qualitative outcomes) are reported elsewhere (Hertzmann et al., 2016). In the current paper we describe a qualitative element designed to gain an understanding of parents' perceptions of the difficulties they were having, prior to the therapeutic intervention. Two semi-structured interviews were carried out alongside a battery of questionnaires reviewer 2 asks us to at enrolment into the study, and again six months later, by which point all parents had completed their intervention. The present paper uses qualitative data collected at enrolment only, in order to examine parents' experiences of contact arrangements before treatment.

The research team

The research was led by the second author (LH), who also leads the therapeutic services for parents and couples in conflict at TR. External scrutiny of the project was provided by academics from UCL, who shared with the research team a clinical and psychoanalytic orientation. The study uses psychoanalytic couple theory (Clulow 2002; Grier 2001; Ludlam and Nyberg 2007; Ruszczynski 1993; Ruszczynski and Fisher 1995), further developed to encompass the theory of mentalization (Fonagy et al., 2002; Hertzmann and Abse 2008). In conducting a thematic analysis, no explicit use was made of theoretical constructs; however, it is inevitable that the analysis was informed by the researchers' conceptual framework, and as were the reflections on the findings in the discussion section.

Ethical Considerations

Ethical approval was obtained from University College London Ethics Committee (UCL Ethics Project ID number 3411/001). The study reported to a Steering Group which included experts in the field and service users of TR's Parenting Together Service (its usual clinical service for this population of parents). Informed consent was obtained from all parents, including for the use of selected material from their interviews in the writing up of the

study and that any extracts used would be fully anonymised. No incentives to participate were offered. For the purpose of this report, all participants' names were changed.

Sample

15 pairs of co-parents (30 parents) were recruited via the Children and Family Court Advisory and Support Service (CAFCASS), lawyers, mediators, family court judges, child and adolescent mental health services (CAMHS), contact centres, and self-referral. Parents were assessed by a clinician for the presence of sustained, poorly resolved, child-focused and intense conflict, previously addressed legally rather than therapeutically, where parents expressed some willingness to work on their difficulties together. Exclusion criteria included signs of increased risk to children should co-parents participate in the study; immediate threat of violence; poorly controlled bi-polar diagnosis; severe psychosis; active substance dependence; and one parent having had no contact with the children in over a year. The sample included fourteen pairs of heterosexual co-parents and one pair of lesbian parents of adopted children; all co-parents had previously been married to one another apart from two pairs who were unmarried but had been in a relationship. The mean age of mothers was 44.8 years (SD= 4.8) and the mean age of fathers was 47.2 years (SD= 5.9). Of those who provided a response to this question (26/30 parents), the sample was predominantly White/British or White/other (19/30 parents). Other ethnicities included Black Caribbean (2/30), Indian (2/30), and mixed White and Black African (1/30). Co-parents had an average of 1.8 children together (SD= .81), most parents had one (13 co-parents) or two children (10 co-parents), the remaining parents had three children (7 co-parents).

The mean age of identified children was 8.7 years (SD= 3.3), five girls and ten boys. On average, coparents had been separated or divorced for 4.7 years (SD= 1.9), and only small number of them (2/30 parents) had subsequently remarried. In the majority (12/14) of heterosexual sets of co-parents, children resided with their mothers; in one case the father was the primary carer, and in the other case the parents had a shared residence arrangement. In the case of the same-sex couple, the children resided predominantly with one parent (i.e. not a shared residency agreement). Most (11/14) of non-resident parents had regular contact with their child(ren).

Data Collection

Parents were interviewed separately at their study enrolment appointment. They completed a number of questionnaires followed by two audio-recorded interviews. Out of the 30 parents, 22 had semi-structured interviews

as these were introduced partway through. The questionnaires and semi-structured interviews took about two and a half hours in total, and were carried out by a postdoctoral researcher, or experienced clinicians who were not part of the therapy team. All were trained in the interview techniques used. The quantitative measures covered general wellbeing, mental health, stress and depression, levels of anger, feelings towards their ex-partner, parents' perceptions of their children's functioning and reactions to the relationship between their parents. The semi-structured interviews were undertaken following the quantitative questionnaire measures, so parents were probably already primed to be thinking about the relationship with their ex-partner and their child's wellbeing. Where parents had more than one child, as was the case with 17 parents, they were asked to agree on which child presented the most difficulties and relate the measures to that identified child. This was done because one of the measures used (see below) was designed specifically to assess the quality of relationship between a parent and one specific child. It is possible that by limiting the data in this way, however, important phenomena were not elucidated.

Transcribed responses to the Parent Development Interview (PDI; Slade et al. 2004) and the Expectations of Therapy Interview - Parents in Conflict Version (Midgley et al. 2013), were analysed as a combined body of data. The PDI is a semi-structured clinical interview which was modified for use in this study with separated parents, with the authors' permission. The PDI is designed to assess the parent's capacity to represent and think about one specific child, including his or her emotional experience, themselves as parents, and their relationship with that child. Parents are asked to provide real life examples of interpersonal moments e.g. 'I'd like you to think of a time when you and your child were separated. Can you describe that to me?... How do you think it affected your child? ... What kind of effect did it have on you?' PDI transcripts were scored for Reflective Functioning in relation to their child, their own parents, and the self. As described earlier, the quantitative scores are presented elsewhere (Hertzmann et al., 2016). In the present paper we qualitatively analysed the content themes of parents' responses. The Expectations of Therapy Interview - Parents in Conflict Version is a semi-structured interview designed to explore parents' ways of thinking about their experiences of co-parenting following divorce, and how they make sense of them. In addition, the interview asks parents for their views on the kind of help that they may be offered, and what they hope to get from this.

Data Analysis

All of the interviews were audio-recorded and transcribed verbatim and the authors undertook thematic analysis of the interviews. Braun and Clarke (2006) cite six phases in conducting thematic analysis: familiarization with the data, generating initial codes, searching for themes, reviewing themes, defining and naming themes, and collating themes into a report. To gain familiarity with the data and generate the preliminary coding, three of the authors read and listened to the interviews several times and generated a long list of codes. The list was reviewed and during this process, several potential themes emerged which were relevant and worthy of further exploration. The next phase involved reviewing the emergent themes which had been identified, and going back to the original data to ensure that the themes were coherent, consistent and reflected the source data adequately. All the interviews were re-read with these questions in mind, and text relevant to the themes was highlighted. Each highlighted piece of text was checked for relevance to the particular theme, as well as to establish if there was enough data to support each theme. The themes were also reviewed to reduce overlap. In the final phase of the analysis, each of the themes was further defined and refined (Braun and Clarke 2006, p.92), through a process of going back to collated data extracts, and organizing them into a coherent account, which was then written up in narrative form. In doing this, we followed established guidelines on conducting qualitative research to help establish the credibility and trustworthiness of the analysis (e.g. Elliott et al. 1999; Yardley 2000).

Although these interviews were not specifically about contact with the child, in both semi-structured interviews it was an issue which came up repeatedly for parents in their responses to questions. For parents in entrenched post separation conflict, difficulties around contact can persist for many years after the actual separation has occurred (Hetherington and Kelly 2002; Kelly 2006) and the population of parents in this study had been separated for an average of 4 years. In the multiple re-reading of the data set, the authors established that issues related to on-going contact arrangements were frequently spoken of as a source of great difficulty and it seemed fruitful to look at the themes surrounding this problematic context across the sample.

Results

Findings from Thematic Analysis

The parents' interviews conveyed a particular atmosphere of intense emotion including blame, anger, fear, and loss. The qualitative analysis produced the following three superordinate themes, also presented in **Table 1**.

1. Dealing with contact evokes extreme states of mind

In many (29) of the interviews, parents in this study found that managing post separation contact arrangements can be an extremely stressful experience. This theme consists of the following subordinate themes: A matter of life and death, and Winning and losing, as will be illustrated below.

2. When speaking of contact, the child is 'everywhere and nowhere'.

In most (40) of the interviews, parents conveyed that despite the child being the focus of parents' disputes, and therefore 'everywhere' in terms of the amount of time taken up trying to resolve contact disputes, parents' intense preoccupation with their ex-partner and the on-going conflict compromised their capacity to picture the child's experience and what would be appropriate for their age – so the real child was at times unintentionally 'nowhere' in their minds. The subordinate themes comprising this theme are: Preoccupation, and Child made to manage conflict.

3. The hardest thing about child contact is dealing with my ex-partner.

In most (42) of the interviews, parents found the need to maintain regular and on-going arrangements with their expartner to be very challenging. This theme includes the following subordinate themes: Sense of threat, Contact dependent on the climate between parents, and Difficulty in ordinary parenting.

Although not all the features identified were present in each interview, these themes were the most prevalent across the group as a whole. We describe below where these are concordant or divergent across the group. We give an indication of frequency (i.e. how many of the interviews the themes came up in) in Table 1.

1. Extreme states of mind.

"I was just like a dead person walking, it was just the doing of me, that was it. It was horrific, I hit rock bottom...."

This theme describes how when parents were asked about their experiences of contact and about their children, many parents spoke of how painful it was to miss out on seeing their child grow up every day.

A matter of life and death.

It was striking how vividly many parents (even those with whom the child was normally resident) described themselves as being in extreme states of mind as a result of this, for example: feeling unable to get out of bed, feeling at a complete loose end, life not worth living, inability to stop crying, physical symptoms accompanying emotional stress and anguish, and thinking it would be preferable not to be alive. "You know, it's a bit like... it's a bit like...- it might- it might be easier to kill yourself. You know what I mean? It might be easier to do that, or put your

head in a gas oven or something. 'Cause this is no... I wouldn't recommend this to anybody." Mr B. However despite parents describing extreme states of mind, with one exception they had not sought psychological treatment to help with these powerful and at times disabling feelings. Instead these parents had pursued a change in contact or residency arrangements in the hope that this might provide relief.

Parents reported experiencing these extreme states of mind most frequently when the child was spending time with the other parent. Despite most parents recognizing the need for the child to have an on-going relationship with the other parent, they found it hard to be positive about it. 'I've learned to accommodate to it; I think I've hardened myself to it. I used to get very upset when I used to drop her off on Sundays, and I think I'm just used to that but.... it makes me feel sad.' Mr C, daughter aged 6. Another parent described it as follows: 'Although [Father] and I don't fight very much in front of her, we have had a few, kind of, you know altercations at door step where she's seen it or a row but you know that's across 7 years, it's not that many, that much. But what we have ...we have a sort of a cold professionalism to our interaction, which is just as bad in my books because you know, she's not stupid and you pick it up and I just think that um. . . that's not gonna be good for her.' Ms M, daughter aged 9.

However, extreme states of mind seemed to be particularly acute when parents had been expecting to spend time with their child and contact had been postponed, stopped or actually interrupted by the other parent: 'and I've had physical symptoms, I can't explain them, I've had to have investigations for, which is for me quite shocking, you know, and which are all bodily manifestations I think of stressors, particularly around N [daughter]'s birthday. I mean I was essentially prevented from going to her birthday 'cause of what happened. It was nasty, it was really nasty, horrible' Ms H, daughter aged 8.

Parents' descriptions of these situations often included accounts of the children themselves refusing to spend time with one parent. The parent at whom the refusal was directed found it particularly distressing and hard to understand. 'He was in my car, he didn't want to come to my house, his mother was telling him he had to go. He got into my car, sulking, in a very bad mood and he started kicking the dashboard in my car and getting mad. And then he started punching me in the arm, I have a big bruise in my arm from it, about ten times. And screaming and shouting about, losing it basically. As I said before, I had to try really hard not to lose it then, I had to try it and sort of say, "ok he'll be over it in a minute." And to be told you know, that you don't- "I don't like your house, I don't want to come there, I don't want to be with you, I don't-" you know, and you just think -this is just his stuff. This is just his stuff. I have to keep reminding myself all the time of it, that it will pass.' Mr B, son aged 15

Refusal to spend time with one parent was frequently cited as a highly provocative issue which triggered more conflict, returns to court, or in some cases violence resulting in police being called: 'And then she started using W (son) in our conflicts. I was telling her "Keep W out of our problems, that will.. have a big consequences, stop it." And she, like, hid his phone.... restricting my visits.. uhm.. accusations...allegations. I've been arrested sometimes...Uhm, I've been arrested twice in front of W. The first time it was in front of him and the second time it was at his school.' Mr A son aged 11.

Winning and losing.

When asked about the on-going conflict with their ex-partner, many parents described it as feeling like a competition in which one parent triumphs over the other. Some parents described how the goal of the competition was to be the favoured and most important parent to the child: "I kind of want to say to her, "look, it's 10 nil to you, you're the winner, you've won, okay? You're the number one parent. R (daughter) wants to be with you." Mr L, daughter aged 8. "...You know the whole case and everything it's definitely felt like um...real war.

Um...(pauses)...it's, it's felt like Iraq." Ms C. Several parents described how they felt their ex-partner was using the child: "...One thing is...conflict between two people, and another thing is using a child as a weapon to- to control somebody's behaviour. I find that very disturbing." Ms M, daughter aged 9.

Another feature of winning and losing was the degree to which parents, both mothers and fathers, felt their ex-partner won or gained control over contact and residency, and for some this mirrored aspects of their couple relationship prior to separation. Many parents were frustrated that winning, losing and control were still difficult issues between them even several years after separating. Parents described how they experienced contact with their child as being largely at their ex-partner's behest; this was most frequent among non-resident parents who felt that they had to acquiesce to demands, or agree to change plans they had made for contact visits at short notice. Many parents felt that their ex-partner did not encourage contact and either deliberately limited contact, or influenced the child not to wish to see the other parent: "I'm sure the tap will get turned off, I can predict it. That she will use (our) child in that, it's very sad. But I think, I can almost certainly predict that that's what's going to continue (to) happen." Mr K, daughter aged 9.

Some non-resident parents had experienced long periods without contact with their child, i.e. weeks or even months, and these parents expressed a preoccupying fear of completely losing touch with their child. They wished that their child was old enough to make the decisions about contact for themselves: ... 'I can't wait until he's older

and so he can make communication choices himself, so he can phone me if he wants to phone me I don't know how much, I'm not aware of how much he thinks of me or wants to contact me when I'm not there, and the extent to which he's encouraged or dissuaded from doing so.' Mr R, son aged 10. It was striking how certain some parents seemed to be about completely losing contact with their child, and a few non-resident parents even spoke of anticipating a reunion with their child in adult life: "...Because there was this danger (of losing contact)...people get reacquainted with their kids when they're 18 as adults, or maybe not at all....I feel like I'm in training for that to happen, to lose him." Mr S, son aged 8.

Parents' extreme states of mind and high entrenched conflict were largely the reasons why parents approached the service for help, often having been told by the family courts to seek professional help for their ongoing disputes. It appears that contact arrangements could take on a very particular meaning. Non-resident parents conveyed a determination to succeed in their battle to win more contact time with their child and appeared to go to great lengths to achieve this; and in speaking of this, the 'life or death' significance of this 'battle' was striking.

2. The child as everywhere and nowhere.

This theme describes how despite the child being at the centre of parents' ongoing disputes, and therefore 'everywhere' in their minds, parents' intense preoccupation with this meant that the actual child was at times 'nowhere' in parents' minds.

Preoccupation.

Parents in the study had spent an average of almost 4 years presenting their disputes to the family courts. Indeed, some children had lived in the shadow of the court for the majority of their childhoods, and had experienced their parents' interacting only through entrenched conflict and court appearances. Almost all parents described the continued conflict with their ex-partner as dominating their lives. Responses to interview questions specifically about the child often contained a mixture of: lengthy descriptions of the difficulties with their ex-partner; starting to describe the child's experience but then veering into descriptions of their own feelings towards their ex-partner; or descriptions of their own experience which then became conflated with the child's experiences such that it was not entirely clear whether they were describing their own or their child's experiences. This was especially noticeable when parents described their own feelings and then a little later in the interview, described the child's experience in the same terms.

Often, anger with the other parent would be expressed to the child rather than, or in addition to, the other parent. Parents expressed guilt and regret at being unable to contain their anger more effectively: "...and I said a few things that I shouldn't have said to her...like - if you don't have a good relationship with your dad you'll be a very confused girl. That's not appropriate for me to say — I said it out of anger and frustration. I also said - next time you come, you're coming for the weekend... and can we sort out now whether we are going to have the same performance (tantrum) or not? Because I don't want to waste my time or your time.....I shouldn't have said that, it wasn't appropriate." Mr E, daughter aged 6. The dominating nature of these conflicts made it harder for parents to focus on what was in their child's minds. Contrary to their conscious intention to fight for the best for their child through the family courts, the majority of their thinking in their interviews was embroiled in the emotional toll of their entrenched conflicts.

Child made to manage conflict.

Most parents were aware that their child was caught in the middle trying to manage the conflicts between them. There were frequent reports of attempts by the child to keep both parents happy: "I think it's been difficult for him... I think sometimes he sympathizes with him (ex-partner), sometimes he sympathizes with me....His dad asked him- his dad said to him "Well why... won't your mum... allow me to see you?".. and he (the child) said "I know why mum, it's because he shouts and swears at you in front of me, and you're fed up with it...I don't tell him that.. because it will make him angry". But then when he's with his dad... he'll say something different. So I think he tries to keep both of us happy." Ms A son aged 10. Both parents of an 8-year-old girl reported how she said: '(1) feel like pass the parcel between you both.' Many parents reported that children closely monitored the relationship between the parents, and tried to manage situations where conflict was likely to happen: "And um...behaving in ways I've not see before.....reporting back to her Mum and she often feels to me like a puppet on a string, so even when I say "Oh I'm gonna book the summer holidays"...something she looks forward to, she says – "have you spoken to Mummy about this?" Mr P, daughter aged 11. Some children tried to keep their parents apart to avoid provoking them, not talking about what they did with the other parent during contact, not wanting to talk on the phone when with other parent, or displaying no affection for one parent in the presence of the other. For example: "She's very much black and white, there is no mummy and daddy, it's very much I'm with Daddy and I don't want to talk to you or I'm with Mummy and I don't like... she just ignores his phone calls during the week......" Ms P, daughter aged 5.

Children's efforts to adopt a premature adult role to manage conflict and maintain security, as reported in the literature (Davies and Cummings 1998; Davies et al. 2002), seemed to be reflected here in some parents themselves ascribing to their child a function more like that of a partner or parent. Parents reported their child as going to great lengths to manage conflict including taking adult matters into their own hands. For example one parent reported that their son, aged 9, called a family meeting to try to resolve the conflicts between his parents. Another parent reported how their child decided he would move house to live with the other parent in an attempt to control the conflict between his parents, something which both parents endorsed at the time: ... "I think he did this in a way to try and fix the conflict between me and his dad. He thought, we all thought, it would fix things, unfortunately it didn't fix things. It just created a new problem because the underlying problem was never fixed. So we find ourselves back, unfortunately, with conflict." Ms T, son aged 11.

The child was everywhere – central to the parents' battles and also over-involved in them, yet at times seemed to disappear as a separate person. For instance, the child might be present in a parentified way. "So I went back to court to request for that to be enforced. And my son.. started threatening.. me. Telling me, sending me threatening text messages, "If you take my dad back to court-" I- I hadn't told my son we were going back to court, "If you take my dad back to court, I'll never see you again." ." Ms C, son aged 10.

Another example evident in many (27) interviews was when parents noticed a feeling the child expressed, but rather than pay attention to what it might turn out to mean, they would seem to assume it matched into their own adult agenda: "It would have been over a week since he'd seen me. Ten days. So from the Wednesday to the- he just, absolutely couldn't wait to get away from his mother [laughs]. You know, out like a shot, he was absolutely delighted to see me. He had a list of things he wanted to do. Which is part of the reason we didn't go out, we just felt like- he really just wanted to spend time with me, which is what we did." Mr B, son aged 8.

3. The hardest thing about contact is dealing with my ex-partner.

"Probably the most difficult thing of being a parent is to have a relationship with my ex-husband still, so that is still very hard."

This theme describes the difficulty in forming a co-parent relationship, dealing with an ex-partner with whom they had been in an intimate relationship and trying to find within themselves a more 'co-parental state of mind' whilst not being in a couple relationship any longer.

Sense of threat.

When parents had to stick to agreed contact arrangements including those which were court ordered, many described feeling a sense of threat or being bullied in relation to their ex-partner: ... 'I also had to contend with this bully.... constantly he would use the access that he had to B (daughter) as a way of arguing with me, fighting with me, and just basically making my life unbearable.' Ms R, daughter aged 6. Parents viewed their ex-partner as a two-fold danger - to themselves and to the child. Danger tended to be focused on the ex-partner being unpredictable and cruel, treating the child in the same way as they were being treated, or that conflict would become violent which for some had been the case. For some it extended to a fear that the child would be taken away by the other parent without warning: "I'm scared that he's gonna...in the middle of the night come and kick off my door, take my child and run." Ms D, son aged 10. Parents frequently suggested that their ex-partner was acting with deliberate ill intent towards them, including manipulating or poisoning the child's thoughts against them: ..." I think P (child) has built in her head this version of me and I've got an opinion where that comes from, that is you know..... I'm no good and not to be liked, and all those kinds of things, and in my mind that's clear that it's come from absorbing it from the environment at her Mum's..." Mr G, daughter aged 9. Parents who felt a heightened sense of threat and mistrust in relation to the other parent tended to feel extremely protective towards their child. This made ordinary contact arrangements more fraught. Some parents reported their child as actively managing situations to reduce their parents' anxiety: ... '(there was) one occasion when I phoned him (son). He was staying over at his father's place. And I had a feeling that night that I wanted to talk to S (child) for, I don't know, I had a feeling, I can't explain. But I needed to talk to him. And when I phoned him, he was um not happy. Uh and he asked me if I could pick him up, he said 'mum I want to stay with you, please pick me up'... but then after that it was a disaster because B (father) he didn't like it and we argued and he has involved S in this disagreement. So S at one point, stopped his father and said Mum don't worry, 'I'm ok to stay here, I'll be fine.'' Ms A, son aged 10.

The sense of threat and fear about what the other parent would do dominated many of the accounts of interactions between parents, infusing contact arrangements for the child with parents' anxiety.

Contact dependent on the climate between parents.

Many parents described how contact with their child was dependent on the climate of the relationship between them and particularly whether they had been in conflict lately. Parents reported that if there had been an argument, a recent court hearing or solicitor's letter, contact could be changed or denied: ... 'When we've had arguments in the past, at least twice in the last six months, S (ex-wife) has been like 'Ok, because we've argued, I'm

not gonna see A (child) for the next month.' Mr H, daughter aged 8. Many non-resident parents reported that the effect of not seeing their child meant that they were missing out on their child's development: 'And when it goes months on end (without contact) it feels horrible. And you feel like you're missing out on so much of him growing up and his personality and his little personality changes. You're missing all those quality moments...' Mr S, son aged 7. In addition to voicing concerns about missing out on crucial periods of their lives, parents also worried about not being a full influence in their child's life and in particular, how difficult it was to regain the relationship with the child after periods of time without contact. Some parents even wondered if their child might forget them: ... 'I remember that time when I came back after I felt this was a long time, and I'm sort of feeling like - oh, you know, he probably doesn't even remember me, long time being 2 or 3 weeks. Um that I would just sit next to him in the garden and um he'd be doing something and I'd go, hi, and he wouldn't acknowledge me much, and then I'd take a stone and throw it somewhere and he'd go -uh - and imitate it and then we play that game and he warmed to me after a while...Mr R. son aged 5. A few parents wondered whether their child might become alienated by these times apart, due to the conflict between the parents: 'It's an incredibly long week from Wednesday to Wednesday. And I find that really difficult and I think T (child) has learned to cut off from me during that period, I don't think it's healthy. I think it means I'm a bit part-player in her life. I think that's how Mother wants it.' Mr L, daughter aged 8. Many parents described their child's reluctance or refusal to see one parent. All the parents who had experienced their child's refusal or reluctance found it extremely difficult:'there was a period there recently when I didn't see him for about five weeks. He didn't want to come...It was four or five weeks, and I was pretty devastated by it.' Mr B, son aged 15. Both resident and non-resident parents were inclined to take their child's refusal or protests about contact at face value. This would then be used as evidence, including in court, to justify amounts of contact and where the child resided. Non-resident parents, predominantly fathers in this sample, were most likely to interpret the child's refusal to see them as something to do with the other parent's influence, including that it was evidence of the mother turning the child against the father.

Difficulty in ordinary parenting.

Difficulty with contact arrangements were felt to thwart parents' ability to undertake ordinary parenting particularly when parents felt they were being deprived of contact with their child, or where they believed it was causing the child harm to spend time with the other parent. Many parents reported how difficult it was to exert appropriate parental authority as they had before, or as would be best for their child. They felt that time with the

child was so precious that they did not want to risk spoiling it in any way. For some, the fear of losing their child got in the way: "I feel like I am losing my relationship with B (child). I can try and be a little less shouty and a little less - eat your greens and do your homework, that's fine, that'd be great then we can have some more fun. But I don't want to do that, I want to be a parent in a normal parenting kind of way." Mr D, daughter 8. Some parents made links between their own relationship with their parents and the wish not to repeat history with their own children. One non-resident father described a distant, authoritarian relationship with his father following his own parents' divorce and how this made him want to forge a close relationship with his own son: 'It is quite (a) difficult one. I don't – I want to say stuff which is uh, sensible rather than just kind of glib. I mean in terms, um...we have um...I try and engender a sort of relationship of kind of, companionship, rather than strict authority...' Mr M, son aged 11. The wish not to repeat their own childhood unhappiness with their children seemed to contribute to a strong need to feel close to their child for some parents: 'And he, you know I feel it's close, it's natural it's just we're close - you know we say, we say 'No secrets from Mummy' and you know he knows that he can trust me, he knows that I am the thing, the thing there, the constant.' Ms L, son aged 6. Almost all parents reported a change in their parenting quality and felt less effective as a parent as a result of the separation from their ex-partner and the challenges around contact. Many parents regretted that parenting 'normally' was more difficult as a result of having less time with their child than before.

Discussion

The study reported here is a qualitative analysis of 22 pairs of semi-structured interviews conducted with 22 parents in entrenched conflict with their co-parent over matters to do with their child. Interviews were conducted as part of a larger pilot RCT study in a specialist clinical setting, prior to random allocation to a therapeutic intervention. This paper provides a picture of the experiences of contact arrangements for these co-parents, whose chronic conflicts have previously been addressed legally rather than therapeutically.

Our study incorporated two semi-structured interviews in the RCT design. The first interview was designed to gain an understanding of parents' perceptions and experience of the difficulties they were having with their coparent (Midgley et al. 2013), as well as their views on treatment. The second interview (PDI; Aber et al, 1985; Slade et al. 2004) was focused on parents' representations of their child and his or her emotional experience, of themselves as parents, and of their relationship with their child. Thematic analysis was carried out using material from these two interviews as a data set and three superordinate themes emerged concerning contact arrangements for children:

- 1. Dealing with contact evokes extreme states of mind
- 2. When speaking of contact, the Child is 'everywhere and nowhere'
- 3. The hardest thing about contact is dealing with my ex-partner.

The first main theme, 'dealing with contact evokes extreme states of mind,' demonstrates that managing post separation contact arrangements can be extremely stressful for parents. Although it is widely acknowledged that divorce and separation are challenging life events, it was surprising that parents reported such extreme states of mind, for instance: collapsing in bed and being unable to get up; physiological symptoms of stress which could be disabling; feeling there was no meaning in life; wishing they were dead and thoughts of suicide. Thematic analysis showed many parents to be in extreme states of mind. This emerged despite this population of parents being eager to portray themselves as psychologically well and fit to parent. Frequently, ex-partners raise concerns about the other parent's capacity or safety as a parent including their poor mental state, and evidence is needed to support or disprove these claims in the court process. Many parents have been assessed at length particularly if there have been allegations of abuse as there had been for several parents in our study. In addition, our research team regularly reported that whilst filling in the questionnaires, parents expressed concern about where the information on the forms would go, worried it may end up as evidence in court. This fantasy persisted in some parents despite staff reassurance and very careful consent procedures clearly laying out matters of confidentiality. Compiling evidence against the other can exacerbate the anxiety of being judged and the need to take care about what information is revealed to whom. The manner in which they approached therapeutic help was as if in court, presenting their case, proving legal points. The very experience of receiving therapy then in their minds became part of the case building. Many parents reported they had expected research staff and clinicians to support their case against the other parent and were both surprised and angered by the neutral and even-handed approach they received in the course of undertaking these assessments. However, it was clear from the interviews that these parents were struggling to maintain their emotional stability and put the needs of their child first, particularly in relation to contact arrangements. The interviews were intended to explore emotion through open-ended questions relevant to the parents' situations, and may have enabled parents to talk more candidly about their feelings despite their anxieties. Another way of understanding this apparent disparity between the non-clinical presentation on written self-report measures, and parents conveying their extreme states of mind about co-parenting, is that these parents may indeed function fairly effectively in many areas of their lives. However, in the specific context of close attachment

relationships with their ex-partner, they find themselves behaving in ways driven by high levels of anger, jealousy, hurt and despair. From our experience, the impact of repeated visits to court, rather than helping settle disputes between parents, had instead encouraged them in highly adversarial states of mind and exacerbated these feelings.

Where parents get into extreme states of mind when separated from their child (in the case of resident parents, this might be for a day or two, for non-resident parents much longer), this raises an important question about what the child represents. Why, for these parents, does the adjustment to not seeing their child every day cause such immense difficulty? In some interviews it seemed that they experienced the child as part of themselves, almost concretely: to have the child separated from them and 'handed over' to the ex-partner might feel as if part of them had been stolen or amputated by the other parent. This is supported by clinicians' experience of finding that parents are often very identified with the child's difficulties and can ascribe the same feelings they are having to their child. In the clinical sessions parents did refer in this way to their co-parent's contact time, using words such as 'stealing' or 'extracting' their child. Some of their well-worn accusations about the other parent being unfit to look after the child, or the child's need to be with one parent rather than the other, may be driven not by their actual knowledge of the other parent or the child at that moment, but rather by their own emotional need for what the child represents and the child's role in terms of maintaining their sense of coherence and purpose. This dynamic means that a parent's capacity to cope is very much dependent on close proximity to their child. Resident parents will often have invested a huge amount of their life in being a parent to that child, so much so that being on their own without this purpose could feel as though life has lost its meaning. Equally handing the child back may remove the sense of precious and too limited purpose in one's life for the non-resident parent, and it becomes understandable why parents can be driven to act and think in the ways they do.

The second theme, when speaking of contact, the child is 'everywhere and nowhere,' conveyed that while being highly preoccupied with matters to do with their child (i.e., the child is everywhere), parents simultaneously showed a marked difficulty in really holding the child in their minds as an actual person with feelings and experiences which were separate from their own (i.e., the child is nowhere). From our clinical experience of working with parents in this situation using a psychoanalytically informed model of treatment, we hypothesise that the child represents a living link to the couple and specifically their previous relationship and as such is a continuing symbol of their union, both physically and psychologically. Furthermore, the quality of the relationship, as it was when the parents were together as a couple, can get enacted in the contact arrangements, serving as a persistent reminder of

the relationship itself. While replaying traumatic scenarios, perhaps less consciously parents are looking for a different outcome. Contact becomes not just contact for the child, but is like microcosm of the former relationship, which can trigger the activation of old wounds. Indeed when talking of events which occur around contact, clinicians in this study often found it difficult to know whether parents were referring to a recent occurrence, or something which occurred years before. These experiences can be so overwhelming that despite the wish for it be otherwise, parents' preoccupation with their ex-partner obscures the child in their minds.

Another aspect of the child being everywhere and nowhere is that the parents' perceptions of the same child may be drastically different. In the course of the therapy it can often become apparent that the child may be a different kind of child with each parent. For instance in the therapy sessions as well as in the interviews, parents reported that the child will employ several strategies in order to maintain security such as: trying to respond to the way in which they think the parent wants them to be; or to behave in a way which avoids one parent 'bad-mouthing' the other; or they may try to behave in a way which will ensure there is no conflict between the parents by avoiding particular hobbies or foods that they think are associated with the other parent. What is particularly problematic is the potential for this to confirm the version of the child that the parent already has in their mind, and refute the other parent's perceptions of the child. Each parent then thinks they are seeing 'the real child,' which is not the child described by their ex-partner. However, both perceptions of the child are crucial in order to help parents understand more fully the child's experience and the split being reinforced, and to put at the centre of their co-parenting relationship the child as an actual separate person, and helping her/him to become more integrated over time.

Some parents, identifying their child very much with their own experience, might be invested in having a suffering child, whereas the other parent may be invested in having a child who is fine and doing really well, perhaps to deal with their guilt. This may put pressure on the children to fit in with the mental images the parents have of them— either to be fine or to be suffering. The child then has their own internal conflict, how can they be a child who is enjoying things, and simultaneously be the child who is troubled or depressed, and attuned to their parents' struggles and conflicts? It may cause them to unconsciously prime or set up the parents to argue so their conflict is enacted between the parents, rather than inside themselves. This would also serve the purpose of helping the child feel in control of the conflict between the parents rather than feel at its mercy and not knowing when it might occur. For those children who manifest behavioural problems, this could also have the added benefit of bringing their parents together again, something many children secretly wish for. Children can also end up in the

position of refusing or limiting contact with a parent despite the fact there is no evidence or risk surrounding contact. It seems that the child's refusal to see the other parent can be an attempt by them to control the conflict between the parents by keeping them apart, or as an attempt to keep the peace between parents, comforting whomever they perceive as the more vulnerable parent, or to create a sense of security for themselves and their siblings. These descriptions of children's concerted attempts to manage conflict between parents point to their taking on adult concerns, while their own are too easily side-lined.

The third main theme, 'the hardest thing about contact is dealing with my ex-partner' is something which almost all (42) the interviews with parents in the study conveyed. Whilst the previous theme describes the struggle parents experience in trying to keep their child's experience in mind whilst being flooded with many challenging feelings, this theme specifically refers to the parents' challenge of forming a co-parent relationship. It is striking that although many parents had been separated usually for several years, the inability of parents to relinquish their attachment to their ex-partner in such a way that would enable them to inhabit a more co-parental state of mind, was extremely challenging. Some parents seemed to feel as if the child themselves was an agent of destruction: in trying to meet their child's needs for contact and keep the relationship alive, they had to come into contact with their expartner and which felt unbearable. It has been striking to our research team that these parents seemed to experience feelings on a continuum with parents in high profile custody cases, where parents can resort to abducting, or harming children and/or themselves rather than deal with the issues surrounding residency and contact. Indeed, in some of these stories reported in the press, these tragic events happened when returning the child at the end of contact. The states of mind described by some of the parents in our study indicate that they experience a feeling of there being no way to stop these intense emotions. Parting from the children, whilst still having contact with one's ex-partner was described by several parents as so intolerable that only death could be a solution e.g., "You know, it's a bit like... it's a bit like...- it might- it might be easier to kill yourself. You know what I mean? It might be easier to do that, or put your head in a gas oven or something. 'Cause this is no ... I wouldn't recommend this to anybody." Mr B. We have found that such thoughts and emotions can be particularly acute if one partner forms a new couple relationship or where there is a blended family with previous acrimonious relationships which become a source of intense provocation to former partners and children.

Limitations

The study has several limitations, which need to be kept in mind when considering the implications of this study:

- 1. As a qualitative research study, the sample size was relatively small, and we have to be cautious about generalizing the findings from these participants to parents from other backgrounds or in other settings. These parents had all been referred to a therapeutic service, in most cases because of court orders, indicating the entrenched and severe conflicts with which they were struggling. There was a higher proportion of parents of white British origin, as well as higher mean ages of mothers and fathers, than in the overall population approaching our organisation for therapy. The parents might have been a slightly more privileged group (although there were higher rates of unemployment in this population of parents in the study (16.7%) than in the general population who use TCCR's therapeutic services (8.9%)). The sample is therefore not entirely representative even of parents seeking help with entrenched high levels of conflict, and is significantly different from the many parents who do manage collaborative contact arrangements post-separation well enough to avoid returning to court (Blackwell and Dawe 2003; Kelly 2007). Clearly further studies would need to examine the relevance of these themes for other parents post-separation, where the level of conflict is not as entrenched or severe. However, the value of using small samples in a qualitative study such as this is that it allows an in-depth exploration of personal experience which would not usually be possible in studies that have larger sample sizes (Baker and Edwards 2012). As an exploratory study, our main aim was to identify themes for further research, and to inform those working in the clinical and legal fields.
- 2. The children's own perspectives were not included in this design. In the quantitative findings, and initial findings of the follow up interviews after parents had finished treatment, parents reported that their children were less angry or aggressive (Hertzmann et al., 2016). Further research should be undertaken as a matter of priority to explore the children's experiences of the situations described in this study. This should explore the effect of parents' extreme states of mind, as well as how repeated returns to court impact on children. We would expect that this would add very considerably to the understanding of the situations the children were in and the immense burdens they carry.

Implications of the study

Despite the limitations outlined above, we suggest that the findings and implications are important in extending the understanding of this population of parents, and with due caution, to a wider group with some

experiences in common. We followed the mixed methods model of Midgley and colleagues (Midgley et al. 2014) which proposes a sophisticated way of understanding the impact of therapeutic interventions in complex clinical settings. Including parents' perspectives in a mixed methods RCT design makes it possible to understand how they themselves make sense of their difficulties, as well as the meaning they make of receiving treatment. This may be crucial in understanding why some people do not seek help, refuse or drop out of treatment, or for the parents described here, return to court.

Paragraph moved down: Parents in entrenched conflict are resource heavy and their children are known to be damaged by these on-going disputes. However, there is a paucity of therapeutic services available, especially those which treat both parents together. Parents generally come to the attention of services via their children's symptoms, or because there have been high levels of risk and safeguarding concerns including violence, which may lead to police and social services initiating a referral. Commonly these parents do not present themselves for help, perhaps in part for fear of weakening their case in the court battles for child contact or residency. Instead, parents tend to be very preoccupied with compiling facts and evidence and in this adversarial state of mind believe that they need legal representation, not psychological help. It is a challenge to carry out research where parents are required to undertake assessments and attend therapy sessions, particularly if these are to be attended together. For one thing, the adversarial state of mind required to present evidence in court is very different from the state of mind required for therapy where the focus is on openness to different points of view, possibly on understanding the other, and even eventually to forgive. Perhaps at a deeper level, resolving a grievance may feel like final loss of the old relationship, kept alive through fighting through the child; a relieving but lonely step, especially if the fantasy of the child as substitute partner has to be relinquished as part of the same process.

It can be extremely challenging for clinicians and other professionals who work with these parents and children, thus, we believe that gaining a better understanding of the parents' experience, might further enhance professionals' ability to make sense of parents'— at times—extreme behaviour, Firstly, the issues described here can make it feel as if it is impossible to help parents. This might be in part because the mental presence of the expartner is experienced as toxic or persecutory, and this can exacerbate the difficulty of managing the actual presence of the other parent in the room, leading to professionals taking sides or feeling at a loss as to how to intervene.

Consequently, they can experience a powerful reaction to the work that may hinder their ability to remain steady and thoughtful in the face of the hostility, even hatred, between the parents. This may in turn affect their professional

judgement, making them wish to retaliate, or to withdraw from working with those parents. This kind of countertransference is part of the dynamic being experienced by and between the parents, and an indication of its overwhelming intensity. Failure to recognise this can lead to problems in engagement and the breakdown of professional working relationships. These challenges may contribute to the paucity of specialist therapeutic - as opposed to legal - services for this population of parents.

We have found that having a strong theoretical model is crucial in helping professionals to understand the parents' experiences as this can enable them to work with the intensity and texture of feelings, including the depth of grievance that is still very much alive. In trying to manage such feelings, parents can easily make professionals feel swamped or pulled to one side, rather than enabling the parent to change. It may also be that the fear of change for these parents is connected unconsciously with the pain of giving up one's grievances and facing the loss—of the family, relationships, home and so on, which for many remains very painful. When engaging with therapeutic services, parents may then also have to face squarely the damage their conflicts have caused to their children. The therapeutic model needs to be able to withstand the intensity of these kinds of feelings and support the professional's capacity to keep thinking, so that they can help the parent reflect on their experience with more curiosity and less rigidity, thereby addressing the high levels of anger, hostility and guilt.

A common reaction of professionals working with this population of parents is to find them intolerable. If trained professionals, with a theoretical model, technical skills and support, feel so negatively, then one needs to imagine the magnitude of stress on the children of these parents, caught for years in the cross fire. This study supports the clinical view that on-going conflicts between the parents can often obscure the child's experience, and whilst our service works directly with the parents only, children are very much at the heart of the model of intervention. However this also presents a problem for clinicians as sometimes they find that they have the child more in their minds than the parents and can feel very helpless about the situation the child is in. Finding a way to help parents think about the experience of the 'absent' child - absent from the rooms and from their minds - can need very delicate handling. Parents can easily assume they are being criticised or that the clinician is accusing them of being neglectful. This can seriously hinder the therapeutic alliance between the parents and the clinician as parents are likely to use these moments as proof one parent is neglectful, or if one of the parents gets angry as a result of this being touched upon by the clinician, this can lead to greater levels of emotional dysregulation in the session. In

addition where one parent becomes very angry, then the other can quickly use this as evidence that they are unstable and unfit to parent.

Conclusion

Our study contributes to the literature on parents who end up in entrenched conflict over their children, and provides professionals with a vivid description of the particular nature of the predicaments parents are struggling with, and why they might be so angry, depressed or even feel that they being driven mad by the process. This may elucidate more about these parents - that they are not 'crazy' in general, but are suffering from losing close, vital attachment relationships, both with a partner, and also crucially with their child as well as often a home and social network. With this degree of intense, uncontrollable stress, it is very difficult for them to remain calm and rational in this area of their lives, although many of them may appear to be well functioning in other areas. This study was in part prompted by requests from policy makers who are keen to address the issue of entrenched conflict between parents and in particular, to further the understanding of what maintains destructive patterns between parents post separation, which are known to be damaging to children. This is a costly matter also for society, as many of its deleterious effects both on children and adults can result in significantly greater use of statutory services such as health, social care, police, the courts and time out of work to attend court, or manage stress and children's distress caused by such conflicts. The qualitative data here may therefore also be helpful in influencing policy developments. Bringing damaging experiences to life and to an extent making sense of them, can promote a better understanding of the personal and interpersonal dynamics these parents are exhibiting, as well as understanding more about why a destructive and expensive problem persists, whether a program will work, how it can be targeted to achieve larger effects, and what it will cost. We believe material like this shows the need for effective therapeutic interventions for this population of parents, particularly because they do not generally seek clinical help, instead pursuing their former partner in court. This qualitative study allows us to see the need for specialist therapeutic help for both parents together and perhaps for their children, although helping the parents reduce their conflicts and grievances might be the best way to relieve their children. The fact that many of these parents engage in protracted court battles where they can appear plausible, may obscure the desperate and irrational states of mind they may be in and furthermore, as this study illustrates, the extent to which the child is enlisted as a solution to intolerable feelings

in the parents which may not at root be about the child. This then is a situation of high risk for everyone involved, although it may be rationalised as a quest to protect or rescue the child.

We hope that the findings in this paper may help shape therapeutic efforts for these parents and children, as well as providing background for other professionals with responsibilities to intervene when these damaging battles emerge from behind closed doors.

In terms of further studies, these findings also point to a need for studies which includes children since an important limitation of our study was its focus on the parents' perspectives and perceptions of the child. There would be much to be gained from exploring the children's perspectives simultaneously. In addition, we suggest that there would be value in a similar study with parents who do in fact manage post separation arrangements for their children in order to understand more about what it is that makes a positive co-parenting alliance achievable and how parents work together to create and maintain this.

Nevertheless, as our study included a sample of divorced parents in entrenched conflict, that have also expressed some willingness to work together, further exploration of parents' experiences among a wider population of parents might be expedient. Thus, examining parents' experiences of contact arrangements among parents in a less chronic and intense conflict, as well as among parents that are undergoing even severer conflict, but are *unwilling* to work on their difficulties together— might enable to both test the validity of the findings discussed herein, as well as to examine the scope of this study in a much larger scale of divorced parents; hence, presumably allowing our findings to be generalized to a much larger population of divorced parents.

Conflict of interest The authors declare that they have no conflict of interest.

Ethical standard All procedures performed involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed consent Informed consent was obtained from all individual participants (Adults > 18 years) included in the study

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Table 1: Superordinate and subordinate themes

Superordinate themes	Frequency i.e. how many of the	Subordinate themes
	interviews the themes came up	
	in	
1. Extreme states of mind	Many*	A. A matter of life and death
		B. Winning and losing
2. The child as everywhere	Most**	A. Preoccupation
and nowhere		B. Child made to manage
		conflict
3. The hardest thing about	Most**	A. Sense of threat
contact is dealing with my ex-		B. Contact dependent on the
partner		climate between parents
		C. Difficulty in ordinary
		parenting

^{* = &}gt;20/44

^{**=&}gt;30/44