The effects of divorce on children have been greatly disputed among therapists. Since the perceived harmfulness of divorce may affect how marital counseling is done, this study examined how therapists' beliefs about divorce consequences are related to their intervention preferences. A two-part questionnaire was devised to be administered to marital therapists from 26 counseling sites. Of 75 questionnaires distributed, 37 were returned. The first part of the questionnaire referred to as the Marital Therapist Intervention Scale assessed marital therapy intervention preferences using 19 Likert-scale items, and the second part, referred to as the Divorce Knowledge Questionnaire assessed the therapists' knowledge about the effects of divorce on children using 12 Likert format items. Marital therapists with higher knowledge of the effects of divorce on children made greater use of intervention items from the pro-divorce category on the questionnaire than those with less knowledge. One explanation for these results could be that therapists with more accurate knowledge have less negative attitudes and a more realistic view towards divorce. These therapists might believe that divorce does not necessarily have to have devastating effects on children and that parents have the means to bring about more favorable outcomes for their children. Contains nine references. (JBJ)
Relationship between Therapists' Knowledge about Divorce Effects and Marital Therapy Intervention Preferences

Jan Levengood, Kathleen Ottaviano, & Catherine Chambliss, Ph.D.

1995
The effects of divorce on children have been greatly disputed among therapists. Since the perceived harmfulness of divorce may affect how marital counseling is done, this study will examine how therapists’ beliefs about divorce consequences are related to their intervention preferences. Those who believe divorce has more highly adverse effects on children are expected to make greater use of statements discouraging divorce and less use of those favoring separation during marital counseling. Those with more positive beliefs about divorce effects are expected to do the opposite.

The general goal of the therapist is to facilitate a constructive resolution to the marital problem that is best for all parties involved. Whether or not that resolution results in preserving the marriage or entails divorce may depend on the therapist's influence on the decision making process of those they counsel. The extent to which therapists actively and persistently encourage a couple to stay together may in part be determined by the therapist's perception of how divorce affects children.

Some studies show that conjoint therapies that focus on interactive factors, rather than individually oriented therapies, were more effective in improving a dysfunctional marital relationship (Gurman & Kniskern 1978). However, many therapists feel they have a commitment to encourage each person to first choose and then implement the option that is the most life-enhancing for that person (Walen & Bass, 1986).

Research has shown that the effects of divorce on children depends greatly on the parent-child relationship and not on the interparental relationship. The custodial parent's adjustment is the best predictor of children's adjustment to divorce (Kalter, 1989). Furthermore, a study comparing children from divorced parents to children from parents who stay married, and were in a hostile relationship, showed more delinquent behavior for the latter group, and superior mother-child relations for the children of the divorced parents (Nye as cited by Hess & Camara, 1979). In such cases where conflict between parent is reduced and an improved parent-child relationship results, divorce can be said to have positive effects on children.

Child outcomes also depend on factors such as age and sex of child, length of time in a single parent family, family finances, and parental conflict before and after the divorce (Barber & Eccles, 1992). Since these different factors interact, it is unwise to base conclusions on evidence of the effects of only one of these factors rather than the integration of all the factors. Therapists who are more aware of the proven divorce effects on children involved might have a broader intervention approach that is less focused on
preserving the marriage knowing that individuals respond differently to divorce, and that the adversity commonly attributed to divorce is not inevitable (Emery, 1988; Furstenberg & Cherlin, 1991; Kalter, 1987).
A 2-part questionnaire was devised to be administered to marital therapists from 26 counseling sites. Of the 75 questionnaires distributed, 37 were returned.

The first part of the questionnaire, referred to as the Marital Therapist Intervention Scale (MTIS), assesses marital therapy intervention preferences using 19 Likert-scale items. The items were developed by the authors to reflect statements therapists make that might influence client’s attitudes towards divorce. Nine items are worded in ways to emphasize both the value of remaining married and the costs of getting divorces; together these comprise the pro-marriage subscale. Six items describe therapist statements that highlight the potential advantages of divorce and reduce social inhibitions against divorce; collectively these comprise the pro-divorce subscale. The measure also includes 4 statements that are neutral with respect to divorce and marriage, worded in ways to avoid persuasion of either type.

The second part, referred to as the DKQ (Divorce Knowledge Questionnaire), consists of 12 Likert format items and assesses therapist’s knowledge about the effects of divorce on children. These items were based on replicated finding from empirical research in the area.
RESULTS

Scores on pro-divorce and pro-marriage intervention items were totaled to create a pro-divorce and a pro-marriage summary score for each participant. A summary score on the DKQ was similarly calculated by adding all directionally adjusted items. A median split was performed on the DKQ scores yielding high and low knowledge groups.

Between group t-tests revealed significant differences between the high and low knowledge groups on several of the intervention measures. Those with high knowledge endorsed significantly more pro-divorce intervention items and consequently received higher scores on the pro-divorce summary scale. (high: x=23.21, s.d.=4.63, n=14 versus low: x=18.94, s.d.=5.54, n=16; t=2.30, d.f.=28, p < .03).

Therapists with high knowledge showed significantly greater use of three specific intervention items, one from each category: 1) "If you become a single parent now, how do you see your life 10 years from now?" (neutral) (high: x=4.86, s.d.=1.23, n=14 versus low: x=3.31, s.d.=1.62, n=16; t=2.96, d.f.=28, p < .006). 2) "What do you think would be the hardest part of getting divorced?" (pro-marriage) (high: x=5.57, s.d.=.514, n=14, versus low: x=4.69, s.d.=.149, n=16; t=2.28, d.f.=28, p < .034). 3) "If you delayed divorce for the next 5 years, what would happen?" (pro-marriage) (high: x=4.29, s.d.=1.20, n=14, versus low: x=3.25, s.d.=1.53, n=16; t=2.07, d.f.=28, p < .048).

Although not significant, results from t-tests for 2 intervention items revealed a trend towards the high knowledge group being more likely to ask clients two pro-divorce items, 1) "Is concern about what others think influencing your decision?" (high: x=4.14, s.d.=1.17, n=14, versus low: x=3.25, s.d.=1.65, n=16; t=1.72, d.f.=28, p > .096), and 2) "How do you feel when you think that if you stay in the marriage you may never find true love?" (high: x=3.07, s.d.=1.44, n=14, versus low: x=2.19, s.d.=1.33, n=16; t=1.74, d.f.=28, p > .093).
DISCUSSION

Marital therapists with higher knowledge of the effects of divorce on children made greater use of intervention items from the pro-divorce category than those with less knowledge. One explanation for these results could be that therapists with more accurate knowledge, possibly based on more experience have less negative attitudes towards divorce. Their perspective on the dynamics of divorce may place greater responsibility for a favorable outcome (in regards to the children) on the divorcing couple, rather than simply on the fact of divorce. These therapists might believe that divorce does not necessarily have to have devastating effects on children and that parents have the means to bring about more favorable outcomes for their children.

It could be that the more knowledgeable therapists hold a more realistic view of the effects of divorce that strongly emphasizes the quality of the parent-child relationship. Their therapeutic approach might encourage clients to focus more on their needs in order to achieve a healthy adjustment, so that they may better support their children through the divorce process. Knowledgeable therapists might make greater use of questions targeting possible over-concern for what other’s think and those encouraging clients to find a deeply fulfilling relationship “true love”, because they believe the relationship between the custodial parent and child is reflective of the parent’s well-being.

Given the small sample size of the present investigation, replication of these findings should be sought. Future studies could investigate the possible mediating influence of the therapist’s own experience of divorce on the relationship between knowledge and intervention preferences.
REFERENCES


