

DUEL OR DUAL: AN INTERDISCIPLINARY APPROACH TO PARENTING COORDINATION FOR UBER-CONFLICTED PARENTING RELATIONSHIPS

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Parenting coordination for families struggling with severe conflict can be challenging for both the family and the parenting coordinator (PC). These families can put an inordinate strain on the PC as they lobby their positions and try to bias the PC against the other parent. The interdisciplinary dual-PC model is an innovative approach using aspects of the collaborative practice model to enhance the efficacy of the process while utilizing the strengths of both disciplines. Through a case illustration, the identification of the family dynamics and situations that give rise to use of this approach shall become clear. This article also demonstrates the potential benefits to both the family and the PCs. All aspects synthesize into a cohesive, well-balanced approach to the uber-conflicted parenting relationships.

Key Points for the Family Court Community:

- We provide information that can assist in identifying whether a single-PC or a dual-PC approach (either unidisciplinary or interdisciplinary) is most appropriate for a particular family situation.
- PCs will be able to identify the protocols for an interdisciplinary PC team as a potential model to add to their practice.
- We address the practical, financial, and ethical issues and obligations associated with implementing this model of intervention.

Keywords: *Alternative Dispute Resolution (ADR); Dual-PC Model; High-Conflict Families; Interdisciplinary ADR; and Parenting Coordinators (PC).*

OVERVIEW OF PARENTING COORDINATION

An old proverb states: “Necessity is the mother of invention.” The necessity for an intervention that could address the frequent flyers that were involved in revolving-door postjudgment litigation over relatively minor parenting decisions became clear in the early 1990s (Coates, Deutsch, Starnes, Sullivan, & Sydlik, 2004). These families were unable to make decisions about issues such as vacation planning, telephone access, routine scheduling, schedule changes, and extracurricular activities. To reach closure on these issues, they would use a disproportionate amount of the court’s time and resources (Beck & Sales, 2001; Henry, Fieldstone, & Bohac, 2009; Mitcham-Smith & Henry, 2007). These cases represented a drain on the resources of the courts and were costly to parents as well. Coates et al. (2004, p. 246) described the need for “intensive case management for chronically conflicted child custody situations.” The role of a parenting coordinator (PC) to address specific areas of parental disagreement evolved from this awareness (Beck, Putterman, Sbarra, & Mehl, 2008; Coates et al., 2004; Kirkland & Sullivan, 2008).

Since that time, many states have accepted the role of PC (Coates et al., 2004; Beck et al., 2008; Kirkland & Sullivan, 2008). The courts began to delegate some limited decision making authority to specially trained attorneys and mental health professionals to help postdivorce parents implement their parenting plans and resolve these issues quickly in a nonadversarial manner outside of court (Greenberg, 2010; Parks, Tindall, & Yingling, 2011). Although the number of states with parenting coordination statutes is limited, it has been an accepted practice in many jurisdictions by agreement of the parents (Montiel, 2015). Concurrently, the American Psychological Association (2012) and

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the Association of Family and Conciliation Courts (2006) have issued guidelines for the best practices of parenting coordination.

Entered into by either stipulation or court order, parenting coordination often helps families resolve parenting issues in a timely fashion without having to use the resources of the court (Henry et al., 2009). Many of these parental decisions in polarized, high-conflict relationships can get hijacked by one or both parents who refuse to commit to any one option for problem solving, often leading to renewed or continued litigation. In some cases, the PC has limited tie-breaking or decision making authority that is granted either by stipulation, by statute, or by court order. The PC is also able to provide a multitude of services, including parent education, support, and case management, in addition to helping parents resolve minor conflicts related to scheduling or other disagreements (Henry et al., 2009). Parenting coordination is generally used as a postdivorce intervention, but has also been used with families in the midst of divorce litigation.

It has been noted that there is a paucity of research studying the effects of parenting coordination programs (Henry et al., 2009). Brewster, Beck, Anderson, and Benjamin (2011) reported a study to test their effectiveness using a novel methodology. Their results indicated that there was a reduction in motions filed, documents processed by court personnel, judicial hearings, and judges' orders to modify agreements when PCs were employed in the sample they studied. Additionally, two survey-based research reports are of note. While assessing the statute-based parenting coordination programs in the 11th Judicial Circuit of Florida, Fieldstone, Lee, Baker, and McHale (2012) reported positive feedback of overall efficacy from the perspective of judges, attorneys, and PCs in reducing parental conflict and increasing parental communication. Utilizing a national survey of PCs (PC Network of the Association of Family and Conciliation Courts), Belcher-Timme, Shorey, Belcher-Timme, and Gibbings (2013) reported that the findings and recommendations

have implications for parenting coordination training and point to an interdisciplinary and collaborative model for parenting coordination in general. It seems apparent that both legal and mental professionals report similar effectiveness in specific interventions, yet standard educational instruction for each profession falls short of addressing those components associated with the other (p. 662).

Those key components are addressed herein with the interdisciplinary model of parenting coordination.

THE ROLE OF PCs IN THE DUAL MODEL

As 'necessity was the mother of invention' in creating the role of the PC, so too was necessity involved in the evolution of the dual-PC model. Ultimately, a grafting of the role of divorce coach (who helps a parent effectively manage their emotional response in the negotiations) in the collaborative divorce process model and the role of PC gave rise to the hybrid approach of the dual PC (Behrman, 2016).

COLLABORATIVE DIVORCE COACHING IN THE TWO- COACH MODEL + PC = DUAL PC

Collaborative team practice, evolved from collaborative law, is a divorce process in which both members of a couple are represented by their own collaborative attorneys, who have agreed to settle outside of court and to end their representation if the matter goes to litigation (Nurse & Thompson, 1999; Cameron, 2004; Fairman, 2007; Webb, 2008). When specially trained financial specialists and mental health neutrals were integrated into collaborative teams along with collaborative attorneys, collaborative team practice began (Cameron, 2004). Dr. Behrman, trained both as a collaborative practitioner and a PC, discovered the idea of dual PC through a posting on a collaborative practitioner's listserv in 2012 as an application of collaborative work to high-conflict postlitigation cases.

THE ROLE OF DIVORCE COACHES IN THE TWO-COACH COLLABORATIVE MODEL

In order to effectively help each individual in a highly emotional collaborative divorce case, the two-coach model is often recommended. In this model, each divorcing parent forms a relationship with his/her own divorce coach. Each coach works individually with his/her client/parent, and both coaches work together on the part of the parents to help them contain emotion, identify critical issues and concerns, speak their voice, and support their ability to negotiate effectively on their own behalf. Together, the two coaches help the parents complete a parenting plan and resolve parenting issues (Nurse & Thompson, 1999; Gamache, 2015; Tesler & Thompson, 2007).

DUAL PC: A HYBRID APPROACH

The dual-PC model is a hybrid one, in which the role of divorce coach in collaborative practice is conceptually fused with the PC's role (Behrman, 2016). In this hybrid model, which is applicable to the most contentious high-conflict postdivorce parenting relationships, each parent is assigned to their own PC. That PC seeks to build rapport and understand the interests and concerns of their assigned parent. Each PC works directly with the other PC to help resolve the issues. Developing a trusting working relationship with that one parent, the PC is in a position to intervene, to clean up their toxic communications and facilitate a shifting of that parent's role in the negative conflict dynamic. The two PCs work together to model problem solving and conflict resolution, and in cases where they have decision-making authority, the PCs are better able to keep the parental decisions from being hijacked by one parent or the other.

COLLABORATION VERSUS ADVOCACY

When serving in the role of the PC/coach, the professional is faced with the challenge of building rapport and yet avoiding alignment with that parent. Unlike the single PC, each PC in the dual-PC model is building an active working relationship with one of the parents. When the PCs are vested with decision-making authority, it can create a dynamic where the parents look to each PC as an advocate and in which the PC can unintentionally align with the parent with whom that PC is working. If this occurs for each of the PCs, the PCs can inadvertently replay the parental dynamic in their own working relationship. It is crucial therefore for the PCs to view their working relationship with each other as central to the dual-PC intervention.

Some key features of this collaborative dual-PC relationship are as follows:

Dual PCs Work as a Team

The PCs are working together to intervene with each parent in a way intended to reduce conflict, avoid extended discussions about basic childcare issues, and facilitate efficient, healthy communication and decision making. By using the tools of self-reflection, transparency, and openness to difficult conversations, the professionals can understand their own dynamic and gain insight into the family dynamic. PCs on a dual-PC team need to have a strong, open, and trusting professional relationship to do this work.

The Dual-PC Team is Collaborative (Not Hierarchical)

The PCs should together develop action plans for dealing with each parent's views and objections, so that a systemic intervention can occur. By viewing their working relationship as central, and viewing themselves as a unified team, they (similar to health professionals working on a treatment team) work closely together and advocate for what they collectively believe is the best way to address the needs of the children. This approach is utilized across all aspects of the dual-PC work with the

family: parent behavior, coaching, case management, enforcement, facilitated negotiation, and decision making.

Each Professional Has a Reduction in His/Her Professional Autonomy

The dual-PC team requires that each professional is comfortable working in an interdependent relationship. This can be difficult for professionals who are used to working independently when providing professional services.

An Excellent Working Relationship is Needed

Certainly, the professionals need to have an excellent working relationship to avoid slipping into a dysfunctional working relationship when the demands of their respective clients (i.e., each parent) begin to exert pressure on one or both of the PCs. Such slippage is likely to reduce their effectiveness. The benefit of a strong working relationship can help the PCs coach each parent to decrease their role in the conflict and also shift away from defensive communication when the parent feels threatened by the real, perceived, or potential attacks of the other parent. By working in a collaborative fashion, the PCs can short circuit excessive debate and lobbying as the PCs use the rapport they have with each parent, and with each other, to move past gridlock and help initiate movement toward healthier parenting.

BENEFITS OF THE INTERDISCIPLINARY DUAL-PC APPROACH

In the field of custody litigation and conflict resolution, an interdisciplinary collaborative approach is often utilized effectively to reach resolution. Ranging from professional consultation to formalized arrangements such as collaborative divorce practices, this model has proven effective during the litigation and settlement phase of the divorce process (Cameron, 2004; Webb, 2008). The value added to the resolution process with the collective voices of mental health professionals in concert with legal professionals is well understood.

By inclusively addressing the parties' legal and psychological issues, the ISC (Interdisciplinary Settlement Conference) team is generally able to defuse the parties' hostility and help them shift their focus from blaming each other to attending to the needs of their children in a more objective, open, and dispassionate way (Sulmeyer, Adams, & Wood, 2015, p. 632).

Each discipline adds its own unique background and flavor that melds cohesively from the underpinnings of their training. In general, both interdisciplinary training for PCs and collaboration of professionals across disciplines is inherent and indicated in the PC process (Belcher-Timme et al., 2013). Applying this structure to the dual-PC process is a natural fit to support the overall health of conflict driven parenting relationships and support the well-being of the PCs involved with the family.

The mental health professional must bring forward a deep understanding of the developmental needs of the children, knowledge of normative behaviors of children, special needs of children when they exist, personality issues and behavioral dynamics of the parents (Gamache, 2015). While these dynamics may be recognized by the legal professional, the mental health professional can bring a depth of understanding of these issues to the process (Sulmeyer et al., 2015; Gamache, 2015). Those underpinnings bring into the process the ability to aid in the triage of the family by developing strategies to assist the family in deescalating the conflict. In uber-conflicted parenting relationships giving rise to this protocol, the PCs will most often have the benefit of a custody evaluation, prior psychological testing, and current or former therapists of the parents and the children. This can help them gain valuable insight to synthesize with the legal professional.

The legal member of the PC team should have a wealth of litigation, collaborative, and mediation background in custody matters. That skill set comes with an inherent knowledge of the inner workings of the judicial system and the approach judges may take in resolving the conflicts that may arise postjudgment in these matters. This informs the process from a legal analysis standpoint, a reality test of sorts, both by way of interpretation of the court orders and parenting plans and by way of understanding local court trends (Sulmeyer et al., 2015).

BENEFITS FOR HIGH-CONFLICT PARENTING RELATIONSHIPS

As the interdisciplinary dual-PC team first approaches the family and its intervention, those two worlds converge in identifying and approaching the conflicts. The melding of the disciplines brings a robust analysis to issues presented by the families. Regardless of whether the parents are operating under a parenting plan ordered by the court pursuant to a hearing or by stipulated agreement, there remain pockets of vagueness that the high-conflict parents cannot navigate. For example, a parenting plan with a low-conflict parenting relationship will often not include a provision regarding a right of first refusal as such a provision would be unnecessary given their parenting dynamics. However, a high-conflict parenting relationship's parenting plan will often include such language as their distrust of the other parent and their motivations, parenting ability, and trustworthiness remains high. These provisions are notoriously difficult to navigate and often provide fodder to more conflict, leaving some to conclude that there should be no such provision in circumstances of high-conflict parenting relationships.

The PCs utilize their strengths to assess the parents' actions and ensuing conflicts over this type of provision, through the lens of behavioral motivations of the individual parents in the conflict (e.g., is one parent leveraging the provision in order to gain the access that parent felt slighted by in the order, rather than engendering a spirit of compromise and cooperation). The analysis is conjoined with a full understanding of the legal aspects of the provisions, layering in limits and parameters to the provision's execution, regarding how it is triggered and when it commences and concludes. The PCs collaboratively create a unified message to the parents and then work with their respective parents to inform, coach, and impart that message. That message can be more easily received based on the working relationship between the PC and parent. From our work in the process, we have learned that the approach has produced a lesser reliance on the decision-making aspects of PC work, remaining inside the facilitated negotiation phase of the process of parenting coordination (a hybrid process where facilitated negotiation efforts are utilized first and, if unsuccessful, the decision-making process follows with a joint decision being made by the PCs). In turn, a more positive working relationship and goodwill is fostered between the parents rather than perpetuating the win or lose dynamics of litigation.

BENEFITS FOR THE PROFESSIONALS

The benefits of the interdisciplinary dual-PC process not only relate to the improved health and functioning of the family in question, but also to the ongoing health and efficacy of the PCs themselves. As noted, the role of a single PC is one fraught with pitfalls. Failure in the process can ramp up the already conflicted family dynamic, including, but not limited to, accusations of fault against the other parent for its failure or accusations of fault or bias by the PC. The dual-PC model may assist in sustaining the PC process for the family as an effective tool in conflict reduction and resolution.

Structuring the intervention in this manner assists the PCs in a series of checks and balances to maintain the process. The most obvious area for this is based on their respective disciplines.

Benefits for the Mental Health Professional

There exists a consistent sounding board in the joint analysis and discussion of the issues and potential resolution that serves to curtail the mental health professional from sliding into a diagnostic or therapeutic role. The mental health professional also has easy access to the attorney to double-

check interpretation of court orders and documents in order to reduce the likelihood that there is inadvertent misinterpretation of the court orders. Similarly, the attorney can help make sure the mental health professional is not being persuaded by the parent(s) to function outside the realm of the orders.

Benefits to the Attorney

The mental health professional can help the attorney better understand the pertinent psychological, developmental, and emotional issues that are present for the child(ren). Additionally, the mental health professional can be attentive to the dynamics of the family and at times provide useful suggestions for dealing with one or both parents and even the feelings evoked in the professionals in response to the parents. The mental health professional can also be a safeguard for the legal professional to help him/her avoid becoming judge and jury, adding punitive aspects over actions, akin to judicial contempt. With two voices at all times, any inherent or unconscious bias can be explored and possibly ameliorated through the checks and balances of the collaborative team.

Perhaps most importantly, the work itself is challenging and lends itself to ups and downs with the parents. Having a collaborative partner, with full awareness of the dynamics of the family, is invaluable to the PCs health in the more challenging moments of the work (Izzo & Miller, 2010). Should one PC struggle with his/her respective parent and that working relationship, s/he can reach out to the other PC for strategies to work through those moments, thereby sustaining the process for the family rather than see it falter.

WHEN TO USE THE INTERDISCIPLINARY DUAL-PC MODEL

The interdisciplinary dual-PC approach to parenting coordination is a specific and unique approach to very high-conflict parenting relationships. As such, it is not an approach that is appropriate for all cases. In many instances the model will come as a recommendation based on the failure of previous interventions.

As families wind their way through the family courts, the level of conflict easily increases. Due to the adversarial nature of the court process, increased hostility, positioning, and conflict is expected. For many families, the distrust and hostility will be ameliorated over time postjudgment. Once removed from the fever pitch of advocacy, with a roadmap before them, the pressure subsides and the family can settle into their new life. At this juncture, interventions are frequently structured to bridge the family from the litigation process to one of peace and maintenance. Co-parenting counseling (Thayer & Zimmerman, 2001) promotes the skill-building tools of communication and conflict resolution, allowing a significant number of families to begin to navigate their postjudgment lives absent further intervention. Single PC protocols may also be utilized at this juncture for families with a stronger conflict dynamic, usually with a more complicated parenting plan and identified decision-making problem areas.

It is the families who utilize these protocols without success that may find themselves needing the interdisciplinary dual-PC approach. Think of it as a tiered approach to the intervention. For example, a co-parenting counselor may find that, despite all efforts, the process is not working to reduce the conflict and move that family forward; rather, the conflicts start to mount and multiply with quick references to further litigation. The co-parenting counselor may introduce the idea of parenting coordination as the next tier of intervention. That counselor has the ability to observe the parental dynamics and the individual behaviors of the parents over the course of a period of time and might be in a position to assess whether a single-PC or a dual-PC model, either single discipline or interdisciplinary, may be of greater efficacy to the family.

Likewise, a single PC may find the parental dynamics are such that the weight of the family conflict is too difficult to shoulder alone. Being a single PC in a case with very high-conflict dynamics

can be highly stressful, as either or both parents are endlessly campaigning and manipulating the process to serve their goals. In those circumstances, the pressure on the PC can be overwhelming, as the adversarial process of litigation and hidden attempts to relitigate surface through the process, with constant positioning of the PC (something that does not happen to the judge, given the prohibition of *ex parte* communications). The aforementioned safeguards and benefits of the interdisciplinary dual-PC process are designed to not only protect and improve the process for these families but also the well-being and efficacy of the PCs.

An experienced matrimonial attorney, a child custody evaluator, or a guardian ad litem may recommend or direct the family into an interdisciplinary dual-PC process immediately. The recognition of the level of conflict, often in combination with the formal assessment of the parents, substantial differences in parenting styles, and identified ongoing conflicts that the court may be ill equipped to resolve, may give rise to this level of intervention. Examples include complex parenting schedules with many moving parts due to work schedules or travel schedules, long-distance or relocated parents, families that include children with special needs, never-married parents with infants and preadolescent children, families with one or both parents compromised emotionally or physically, and families where children are reluctant or refusing to see one parent. Recognizing these dynamics, counsel can draft the appropriate language to move directly into the interdisciplinary dual-PC process postjudgment. One benefit of this early identification is that by removing the tiered approach, it can reduce the weariness and helplessness on the part of the families from failed or ineffective multiple interventions. Rather, it fits the intervention to the behavior of the parents, level of conflict, and its impact on the children.

Counsel or the PCs may wish to craft a short consultation period when commencing the interdisciplinary dual-PC intervention (such as 6 months) to determine if progress is being made with this intervention model. The utilization of this consultation period can stabilize the family and preserve joint legal custody and decision making by demonstrating to them that it can, or cannot, be managed. Often the litigation rests on the bid for sole legal custody and/or final decision-making authority. This is especially true among high-conflict parenting relationships where communication is poor or nonexistent or where conflict and recrimination rages and judges may be reluctant to award joint legal custody and assign sole parental decision-making authority to one parent (DiFonzo, 2014). When sole legal custody or final decision making for one parent is ordered, this can have an even further deleterious effect on the parenting dynamic and conflict resolution. Conflict can be increased as the parent who feels disenfranchised can react to day-to-day situations as if they have nothing left to lose. That imbalance, perceived or otherwise, can delay a family from moving forward in the postjudgment realm. Entering into a postjudgment resolution process such as mediation, arbitration, or a hybrid process such as parenting coordination with one parent having final decision-making authority does not allow the parents to enter into that process on equal footing (Ver Steegh & Gould-Saltman, 2014). By incorporating the interdisciplinary dual-PC model, the parents can embark into the process with a set of orders and a means of resolution that provide neither parent with control or decision-making authority over the other with the benefit of both disciplines at their disposal.

CASE ILLUSTRATION

The case below illustrates some of the complexity in working with these high-conflict parenting relationships. The identifying information is changed to protect the confidentiality of the parents and children.

BACKGROUND

Samantha “Sam” and Jessie were married for 18 years. Sam is a physician in a busy metropolitan community hospital emergency room. She is strong, decisive, and self-assured and is described by the forensic evaluator as having narcissistic tendencies. She works long and

irregular hours and often is not available on a consistent basis for after-school and early evening caretaking of the children. Jessie is a schoolteacher. He is very involved in the day-to-day lives of the children. He coaches and attends most of their activities. He is far more passive than Sam and often views himself as a victim to her dominance. Jessie described himself as the “primary parent” (which angered Sam immensely) during the court process. Sam was described as being the “breadwinner.”

Sam and Jessie met while they were both in medical school. Jessie dropped out after 2 years (something that Sam still resents), deciding that he preferred to be a science teacher. They have two children. Roberta (often called “Bobby” by her mother) is 15 years old. She is a good student and is already starting to think about college. She often cares for her younger brother when neither parent is home. Roberta is underweight (like her mother), which is of concern to the pediatrician. However, Sam states that being at the bottom of the weight curve for a child her age is just related to genetics and her own (Sam’s) relatively low body weight. Tim is 9 years old. He was diagnosed as “being on the autism spectrum.” Sam is very concerned about Tim’s diagnosis and is very keyed into the literature and organizations related to children with such diagnoses. Jessie acknowledges some of Tim’s challenges, but has seen many similar children over the years “grow out of it and do just fine if he gets teachers who respond well and don’t stereotype him.” Tim has trouble with transitions and change and often needs a lot of caretaking, especially when he gets agitated. On many days, Roberta provides the early afternoon caretaking, before Jessie gets home from work.

The parents have been separated (now divorced) for approximately 2 years and live in different towns (each approximately 20 minutes from the school and 35 minutes from one another). The children have a shared parenting plan such that they are with Sam overnight on Mondays and Tuesdays and with Jessie on Wednesdays and Thursdays and alternate weekends with each parent. This parenting plan was reached by agreement following protracted litigation and pretrial settlement meetings. The plan is designed to be very “fair” and has many different elements that try to balance which parent is present on the first day of school, takes the children to the first day of camp, celebrates the children’s and parent’s birthdays on the day of the birthday, and so on. It also addresses Sam’s on-call schedule and has built-in variations to the routine schedule to try to balance her parenting time with the demands of her job.

There have been many professional interventions. Both parents and both children are in individual therapy. A child psychiatrist also follows Tim. Sam has had three attorneys. A PC was appointed at the time the initial orders were written. For the first year following the divorce, the PC tried to focus on the schedule and deal with the demands of each parent, including Sam’s persistent concerns about Roberta’s therapist (who voices repeated concerns about Roberta’s weight).

These professional interventions have generally not gone well. Roberta’s therapist has considered resigning from the case and is intimidated by Sam. Roberta’s pediatrician resigned from the case after being lobbied repeatedly by Sam and Jessie. Jessie has pressured the PC to not allow Sam to pull Roberta from her psychotherapy. Likewise, Sam has emphasized the importance of Roberta’s therapy being one that is maximally effective. Additionally, the establishment (by court order) of a schedule protocol that gets defined every 6 months was grueling on the parents, very time and fee intensive for the PC, and reached a point where the PC resigned.

In addition to the conflict above, Sam and Jessie barely communicate directly with one another. Their lawyers are still heavily involved with postjudgment motions being filed on issues such as access and healthcare decision making, as well as finances. The nanny that Sam has in place often communicates about logistical matters with Jessie, so Sam and Jessie do not have to interact with one another.

LEGAL HISTORY

Sam initiated the divorce proceedings and immediately filed for *pendente lite* (temporary orders while the case is pending in court) relief seeking temporary sole custody and exclusive use of the

marital residence. Her initial pleadings were responded to with identical pleadings filed by Jessie. Their litigation stance quickly provoked the court to appoint a guardian ad litem to represent the best interests of the minor children.

Counsel in the matter brokered a temporary bird-nesting situation for Sam and Jessie, wherein the children remained in the marital residence and the parents came and left during their designated parenting times, while referring the case for a full forensic custody evaluation. Sam and Jessie participated fully in the evaluation testing and interviews, while Roberta only participated by way of interviews. The evaluator also utilized the various mental health professionals as significant collaterals during the process.

Despite having the benefit of the completed evaluation, the court case continued to ramp upward with additional motions, threats of reviewing experts, and repeated allegations. The court participated in multiple pretrial settlement conferences that served to remedy immediate situations, rather than resolve the entirety of the matter (e.g., resolution of a new temporary parenting schedule after sale of the marital home and thus the end of the bird nesting). In fact, the litigation continued on for such a period of time that updates were required from the evaluator who noted a sharp increase in the conflict dynamics of Sam and Jessie and recommended the use of a PC in the second report (of note, this recommendation was not included in the first set of recommendations but was justified by the increased conflict demonstrated throughout the course of the litigation). Following a significant last-minute pretrial conference, the case resolved short of trial.

INITIATING THE INTERVENTION

This case was referred by the prior single PC as a straight referral to another psychologist as a subsequent single PC. At the time of referral, consideration was immediately given to the possibility that a dual-PC approach was indicated. The failed work with the first PC, problems this family was having sustaining professional relationships (for both parents and children), the level of lobbying of the PC that was occurring, symptomology and needs of both children, and lack of parental communication (except when in conflict) all seemed to indicate consideration of a dual-PC model.

INITIAL APPROACH

Before accepting the case and after meeting with each parent individually for a consultation, it was decided that this case was suited for an interdisciplinary approach. This seemed particularly pertinent, given the parents' continued litigation and the complexity of the orders as related to the parenting plan. Each parent also had action items that were "imperative" to address. However, the PCs informed them that they would not be addressing any items until the retainer agreements were signed and retainers paid. The retainer agreement outlined the specifics about the working relationship, billing, and potential court involvement. It also addressed the expectations that were placed on the parents (including those around their behavior toward one another going forward). In the agreement, each parent voluntarily authorized the PCs with limited decision-making authority (while preserving their right to seek judicial review of those issues *de novo*) on any pertinent dispute between the parents. The two PCs decided who was going to coach and work with each parent, informed the parents, and had them sign the joint retainer agreement. The PCs also began getting information from the mental health professionals and prior PC (after obtaining releases) and worked at establishing some rapport with the parent each was going to coach. Each PC had to tolerate listening to the parent's story of the "evils" of the other parent as part of getting up to speed on the case.

HOLDING IT TOGETHER

One of the first interventions was for each PC to put together a list of priorities or action items. At the outset, each parent had a list of "emergencies." However, it became apparent that these were not

actual emergencies, even if they were important to each parent. By prioritizing the items the PCs were going to work on, they were able to avoid the stress of being in crisis mode for an extended period of time. This allowed them to attend to the issues that appeared to be most salient, to quiet the conflict, and to concentrate on parenting decisions that were timely and related to the children. The PCs also requested a team meeting with the mental health professionals. Tim's therapist was known to the PCs, but the child psychiatrist and Roberta's therapist were not known to either PC. This meeting was held to get the clinicians' input, to brainstorm next steps, and to try to informally assess the fit of Roberta's therapist in regard to the psychotherapy. The PCs also decided that it was not their responsibility to change the deeper dynamics of the family (e.g., address the persisting anger of Sam toward Jessie for dropping out of medical school, the question of mother/daughter enmeshment around weight, first names, etc.). It is important that PCs keep in mind that the scope of their assignment does not include in-depth family or individual therapy. Where indicated, these issues should be addressed to the appropriate therapeutic professional, and if none is in place, the PCs should be tasked with helping the parents identify appropriate therapeutic professionals and bring them on board. Containing the conflict to support putting a functional therapeutic intervention in place is an important function for a dual-PC team.

DECREASING THE CONFLICT

Each PC worked with the respective parent to reduce the amount of communication traffic and the hostility in the e-mails and other communications between the parents. During this period, part of the reduction of communication traffic occurred by way of it flowing through the PCs. Concurrently, each parent was coached on both their outreach and responses to the other parent, modeling effective communication skills. The PCs also worked to be balanced in response to requests around the schedule and to follow the court orders as closely as possible.

When meeting with Roberta's therapist it became clear that the therapist found Sam to be off-putting and consequently had avoided interaction with her. This provoked more unrest. The PCs decided that the mental health clinician on their team would speak with the therapist (colleague to colleague) about how to possibly build some bridges with Sam, while at the same time the PC spoke with Sam about Roberta's comfort in treatment and the potential benefits of not interfering with it, even if Sam was not confident in the treatment.

LOGISTICAL PLANNING

The PCs worked on both the implementation of the parenting plan and preparing the parents for times when there would be family experiences. The PCs also worked to set expectations regarding the PCs' behavior (e.g., response time to e-mails, getting first drafts of the schedule to parents) and also that of the parents (e.g., decreasing the myriad of complaints about the other parent and helping each parent understand that their complaints were not going to change the other but rather would foster more retaliation and conflict).

OUTCOME/PROGNOSIS

As the conflict began to diminish, the frequency and intensity of parental contacts decreased. Scheduling issues became far less intense and the parents were able to actually work together to plan to be supportive of the children at some key moments (e.g., Tim going to camp and Roberta going to college). However, this was not a Cinderella story. The parents continued to have very limited contact with one another, would flare at times, and have had far from an ideal co-parenting working relationship. Yet, the conflict significantly diminished and subsequent instances of setting the next parenting plan schedule (for months at a time) generally have gone without major incident.

CASE FORMULATION

As one may note from the above legal history, this family was certainly tormented by conflict. There were many factors that seemed to interact to create an environment that was ripe for conflict or, said another way, created the perfect storm. For example, the power differential in the marital relationship was amplified during the divorce process. Litigation widened the gap, as each parent likely felt threatened by the other's assertions and the impact that such assertions could have on the court's view of them and ultimately on their position and standing with the children. The first PC, despite massive effort, was not able to get out of the position of being what could be viewed as a surrogate judge. The parents' relentless lobbying of the PCs with their positions complicated even the most straightforward decision making, with each issue being a battle in the greater war of the divorce that did not have an armistice at the time of judgment. Yet, the ability of the PCs to serve as a container for the conflict and move to resolution on the issues that arose helped quiet the conflict and decrease its impact on the children.

ETHICAL AND RISK MANAGEMENT CHALLENGES

Working with parents who have a long history of conflict brings with it a greater need for clarity about the role of the PCs. Parents requiring this intervention often had multiple failed experiences with attorneys and mental health professionals. They may still be in litigation (postjudgment) and may have failed once or more with a prior single PC. They may be accustomed to being in the war of divorce and have a long history of feeling victimized by the other parent and the "system." This can lead to each parent engaging in what they perceive to be justifiable retribution as they carry on the conflict. While often this justifiable retribution is directed toward the other parent, it can also be directed toward the PC with complaints of bias, unprofessionalism, and lack of competence being made in an attempt to unseat the PC. Unfortunately, the notion of justifiable retribution held by one or both parents often contributes to escalation of the conflict, as can be seen when observing countries or children in conflict.

Managing the ethical issues and related risks is first addressed with a comprehensive retainer or informed consent agreement, as should be standard for all forms of services and interventions for high-conflict parenting situations. The following issues should be attended to in the agreement and throughout the course of the work on each case:

ESTABLISHING THE INTERDISCIPLINARY DUAL-PC PARENT/PROFESSIONAL RELATIONSHIP

It is essential for there to be complete clarity and disclosure about the role of the PCs, including its breadth and limits. If possible, it is advisable to have this clarified and spelled out in the orders of the court. A single comprehensive retainer agreement for the PCs should be executed by both the parents and the PCs. The orders and retainer agreement should include language about scope of authority (e.g., it should be clear as to whether the PCs have decision-making authority pursuant to their agreement, court order, or statutes and rules of their jurisdiction and whether or not those decisions are binding subject to appeal or judicial review and that the PCs are indemnified from unintended consequences of the decisions they make). However, at times parents have orders written at the time of divorce and long before the PCs are contacted. If the above factors are not addressed in orders, the parents still can agree to them voluntarily in the retainer agreement, if allowed under the rules of their jurisdiction.

CONFIDENTIALITY

Providing clarity about both the extent and limitations of confidentiality is imperative at the very start of the process. Parents need to be completely informed by the professionals about the need for

releases to speak with other professionals (attorneys, guardians ad litem, therapists, forensic evaluators, schools, physicians, etc.). There also needs to be language in the retainer agreement that speaks to the possibility of testimony by one or both PCs. Clients should not be assured that testimony will not be required by the court, even if they both object. The provision regarding testimony should clearly identify whether both PCs are subject to be called to testify or if, by contract, one PC shall be the testimonial voice of the PC team. Additionally, the cost and payment associated with said testimony should be specifically addressed. Furthermore, to have truly informed consent (Barnett, Zimmerman, & Walfish, 2014) and not just an agreement that is signed, the professionals should review all limits of confidentiality with the clients at the start of the process.

MULTIPLE RELATIONSHIPS

Complete transparency should be in place around the PCs' other working (and personal) relationships. The concept of no surprises is best to consider here, as the credibility of the professionals can be seriously damaged if the relationship of the PCs to one another and to the attorneys representing the parents and children are not disclosed.

At no time should either PC accept a role in this process if they have functioned in another capacity with the family. At times, it may be requested that a prior co-parenting counselor or the guardian ad litem be utilized as a PC in this model as they have such history and knowledge of the family. This should be avoided in its entirety as it may well violate respective ethical codes. It also perverts the core essence of the PCs as a neutral team working with the family absent preconceived notions and experiences with one or more members of the family.

FEES

Billing needs to be clarified from the start. Retainers should be collected in advance of providing services (despite parents often having an imperative need to begin work prior to the retainer process being complete given their view of the pressing issues). Copious records should be kept of both billable and nonbillable services provided on the account, including the contacts the PCs have with one another. Similarly, it should be made clear that the services rendered (by the mental health professional) are not going to be submitted to insurance by the mental health professional, as the diagnosis and treatment of a mental disorder is not being performed by the mental health professional when serving in the role of a PC. While there may be therapeutic benefits, parenting coordination is not therapy and accordingly is not likely to be covered under insurance plans.

In the dual-PC model each parent pays the fees associated with their assigned PC, unless otherwise ordered by the court, regardless of whether the work is directly with the assigned parent, the other PC, a collateral contact, and so on. We acknowledge that in the parenting coordination process, one of the parents may be utilizing the services more actively on their own accord or in reaction to the other parent's actions. We have found that by the PCs working in concert, the weight of the billing indeed can shift, weighing more heavily on the parent giving rise to the need of service. For example, if one parent requires a higher degree of coaching and modeling of behavior, that parent is responsible for those increased fees without cost to the other parent. As well, Additionally, should one parent's actions be giving rise to intervention of the PCs, despite being brought to the fore by the aggrieved parent, the PC assigned to the other parent would be working with him/her more actively to create compliance and rectify the behavior.

When structuring the contract following the intake, careful consideration should be given to any order relative to the payment of fees. The parents themselves may be coming into this process with differing degrees of financial capabilities and responsibilities. The professionals should remain fluid in their thinking to address these issues in regard to the billing model. However, the billing procedure, assignment of responsibility, and any necessary fee negotiation must be identified and resolved prior to the commencement of the work.

As the interdisciplinary dual-PC model is emerging, we make no claims as to whether this process is more or less cost effective than single-PC work. That would be subject to further research and analysis. We can add that the professional team can be efficient in their contacts with each other, with less back and forth that can come from the repeatedly alternating discussions with one parent and the other.

DECISION MAKING

When all efforts of resolution have failed the PCs and a decision under the scope of authority is to be rendered, a decision will be jointly rendered by the PCs.¹ This unique aspect of the PC process is not assigned to either the mental health PC or legal PC but rather must be jointly rendered. As each PC is working with one of the parents, they each have information and perspective from their assigned parent to bring forward in addition to their own skill set. In the hybrid process of parenting coordination, a single PC, whether mental health or legal, will utilize a variety of forms of conflict resolution based on their training and profession of origin in the facilitated negotiation phase prior to the necessity of rendering a decision (Hayes, 2010). Here, the PCs collaborate, discuss, and determine the best course of action on the given issue, utilizing their combined skill sets to resolve those conflicts short of the decision-making phase. Once necessary, both PCs should jointly offer their decision, the importance of which is to express to the parents that they were both heard and the PCs themselves agree with the decision. It is noted that the decision-making phase in PC cases tends to be less formal in nature than traditional arbitration models without the formal protocols of a proceeding in the nature of a hearing (Barsky, 2013). On any given issue, unlike a formal arbitrator or judge, the PCs have a continuum of information and understanding that informs their decision-making process. Therefore, each PC will be able to shade and color the written decision to create a proper balance. Should the decision-making process be left to one or the other PC, an imbalance may well be perceived by the parent not working with that PC.

This aspect of the process may create difficulties with one of the parents. The established rapport the assigned PC has with that parent can assist in processing the decision with a greater depth of understanding. The risks of decision making include termination of the PC by either or both parents at the high end to discouragement and disenchantment of the process at the low end, and at all times decision making can lead to perceptions of the parent that the process is not impartial (Hayes, 2010). The same is true whether that is a single-or dual-PC process. However, in the dual-PC process this may be mitigated by virtue of the rapport that the PC can establish with the particular parent with whom they are working.

OTHER ISSUES

Beyond having a well-thought-out informed consent or retainer agreement, professionals who work as PCs also need to be attentive to the following:

Professional Development and Training

The role of a PC is complex. Even if one is trained and experienced in matrimonial law or one of the mental health professions, this does not mean the professional is immediately qualified to serve in the role of a PC. One should obtain basic training in mediation, child development, and parenting coordination. It is strongly recommended that the PC obtain regular continuing education and mentorship with other seasoned professionals. This work is not simply a new application of previously acquired skills. Rather, it is quite challenging and requires the refinement of new skills for the divorce professional. The PC should also be aware of, and conform to, regulatory requirements of their jurisdiction regarding basic training and continuing professional education.

However, Barnett, Zimmerman, and Walfish (2014) pointed out the importance of ongoing clinical consultation when pursuing additional training, not simply taking a course on one occasion. Serving as a PC is not the same as the traditional practice of law or psychotherapy. It is not the same as being a

forensic evaluator. If one is expanding one's practice to encompass parenting coordination, ongoing professional development is essential. While course work is important, we believe that utilizing professional mentors for continued professional development and to help implement the basic training that is obtained is essential, given that the practice and ethical demands and challenges of this work are many.

Professional Boundaries

It is easy when serving as a PC to slip into the unauthorized practice of another profession. Zimmerman et al. (2009) highlighted the importance of the psychologist avoiding the unauthorized practice of law. This can easily happen when the mental health professional begins to offer opinions about court orders, contempt, or options that one parent can take to deal with the other parent's apparent noncompliance with court orders. Similarly, the attorney can begin slipping into the practice of psychology when offering comments about a parent's personality diagnosis, a child's developmental needs, or the quality of mental health treatment that is being rendered to the parents or children. While experienced professionals should have a strong knowledge of each other's work, they need to be careful to avoid rendering opinions or recommendations as if they were experts in that field. Maintaining professional boundaries for PCs is paramount.

It is common for the mental health professional who is serving as a PC to be asked by one or both parents to comment on the clinical status of one or both parents. Statements such as "That parent has a _____ personality disorder, don't they?" are common for the mental health professional to hear. However, providing an opinion about a parent's mental health diagnosis would be outside the scope of the mental health professional's role as a PC, given that an opinion would be rendered without the commensurate full evaluation of the parent's mental status and personality functioning.

For the legal PC, advocacy has no place in this process, as maintaining neutrality is key. Based on the training as an attorney, the slippery slope of advocacy comes into play very easily. Proper training in mediation and parenting coordination is essential in shifting that mindset. The checks and balances of the dual process align to keep everyone in check.

As noted herein, an experienced family attorney is likely to have a reasonably good understanding of child development and psychological principles. While that knowledge base is helpful and informative to the work, reliance on the mental health professional as the informed expert in that discipline must be maintained at all times.

When working directly with the parent through this process, the legal PC must also refrain from offering legal advice. Throughout this process, a parent will invariably ask for confirmation of their position by way of "she is in contempt of court orders, right?" As a PC, the legal PC is not in a position to render that type of opinion, nor is it helpful to the process. The judge is the only person who can make that finding, not the PC. One must be mindful not to get caught in the efforts of the parent to obtain a legal opinion even though it may seem evident based on the PC's training and expertise. By providing legal advice and consultation, the attorney may be opening him/herself up to an attorney-client relationship subject to the disciplinary code in their jurisdiction.

Challenges of Different Professional Ethical Standards

It is crucial that the two PCs work in a collaborative fashion and have a clear set of operational policies pertinent to the parents with whom they are working, which are spelled out (as mentioned above) in the informed consent process at the outset of the professional engagement. It is crucial that the PCs openly discuss ethical binds or dilemmas each may face and how to best address them, respecting each of the PC's professional responsibilities. These issues, when clarified in advance between the PCs (e.g., around confidentiality, representation, fees, and relationship to court), can be addressed in the retainer/informed consent agreement that the clients sign at the commencement of the engagement.

In short, as Amundson and Lux (2016) recommend, PCs must function in a way that is consistent with their professional ethics and standards. These ethical issues and advisements remain true for all PCs regardless if acting in a single or dual capacity.

FUTURE DIRECTIONS

Because the interdisciplinary dual-PC model is new, considerable research is needed to better test its efficacy and assess its costs. Ideally, research should examine the utility of this model as compared to no intervention, the single-PC model, and the dual-PC model (without an interdisciplinary professional team). Such studies should examine the impact of the intervention(s) on parental conflict, extent of postjudgment legal action (and costs), and the well-being of the child(ren). Similarly, the costs of these different interventions should be compared. Additionally, we also see the need for studying the use of this model as an intervention for those sets of parents that are not successful with a single PC. Future research should also look closely at the working relationship of the PCs and study the risk of the PCs mirroring the relational dynamics of the parents such that they, in their professional relationship, align with each parent replaying the parental conflict.

CONCLUSION

Identifying and crafting the right intervention to support uber-conflicted parenting relationships is often difficult. The interdisciplinary dual-PC approach was conceived from the needs of these families to properly support and guide the family in conflict reduction and problem solving. Through the utilization of the hybrid approach, merging aspects from the collaborative model into the PC protocols, these families may ultimately find relief. The intention is for the parents to benefit from having a working relationship with their assigned PC. The combined strengths of both the legal and mental health professionals are brought to the parenting coordination process to help parents bring forth their issues and perspectives and to provide them with feedback, coaching, and direction. For the PCs, they may benefit from the team approach through the identified checks and balances, allowing them to remain focused on the parenting tasks at hand and helping them avoid being pulled into the high-conflict dynamics of the family. The interdisciplinary dual-PC approach provides another resource to try to help contain and possibly reduce conflict in uber-conflicted parenting relationships.

NOTE

1. We practice in Connecticut and New York, neither of which has parenting coordination statutes. Decision-making authority is created by contract with the parents based on the scope of authority as set forth in the contract. As such the use of the word “decision” is avoided as it relates heavily to a judicial function and one, absent a statute to the contrary, cannot be abdicated. It is imperative that the court have the final decision-making authority over the issue should a parent chose to do so (Monteil, 2015). Any decision made is reflected in the contract as a “recommendation” that is binding on the parent unless and until either parent brings the issue to the court, de novo, for a disposition from the court. This protocol is followed by others and noted by Demby (2016).

REFERENCES

- American Psychological Association. (2012). Guidelines for the practice of parent coordination. *American Psychologist*, *67*, 63–71.
- Amundson, J. K., & Lux, G. M. (2016). The issue of ethics and authority for licensed mental health professionals involved in parenting coordination. *Family Court Review*, *54*, 446–456.
- Association of Family and Conciliation Courts, Task Force on Parenting Coordination. (2006). Guidelines for parenting coordination. *Family Court Review*, *44*, 164–181.
- Barnett, J. E., Zimmerman, J., & Walfish, S. (2014). *The ethics of private practice: A practical guide for mental health clinicians*. New York: Oxford University Press.
- Barsky, A. (2013). “Med-Arb”: Behind the closed doors of a hybrid process. *Family Court Review*, *51*, 637–650.

- Beck, C. J. A., Putterman, M. D., Sbarra, D. A., & Mehl, M. R. (2008). Parenting coordinator roles, program goals and services provided: Insights from the Pima County, Arizona program. *Journal of Child Custody*, 5, 122–139.
- Beck, C. J. A., & Sales, B. D. (2001). *An introduction to divorce mediation*. Washington, DC: American Psychological Association.
- Behrman, L. (2016). It takes a village—taming high conflict with the “2 PC model.” *Journal of Clinical Psychology*, 72, 469–483.
- Belcher-Timme, R. O., Shorey, H. S., Belcher-Timme, Z., & Gibbings, E. N. (2013). Exploring best practices in parenting coordination: A national survey of current practices and practitioners. *Family Court Review*, 51, 651–665.
- Brewster, K. O. H., Beck, C. J. A., Anderson, E. R., & Benjamin, G. A. H. (2011). Evaluating parenting coordination programs: Encouraging results from pilot testing a research methodology. *Journal of Child Custody*, 8, 247–267.
- Cameron, N. J. (2004). *Collaborative practice: Deepening the dialogue*. Vancouver, Canada: Continuing Legal Education Society of British Columbia.
- Coates, C. A., Deutsch, R., Starnes, H., Sullivan, M. J., & Sydlik, B. (2004). Parenting coordination for high-conflict families. *Family Court Review*, 42, 246–262.
- Demby, S. (2016). Parenting coordination: Applying critical thinking to the management and resolution of post-divorce conflict. *Journal of Clinical Psychology: In Session*, 72, 458–468.
- DiFonzo, J. H. (2014). From the rule of one to shared parenting: Custody presumptions in law and policy. *Family Court Review*, 52, 213–239.
- Fairman, C. M. (2007). Growing pains: Changes in collaborative law and the challenge of legal ethics. *Campbell Law Review*, 30, 237.
- Fieldstone, L., Lee, M. C., Baker, J. K., & McHale, J. P. (2012). Perspectives on parenting coordination: Views of parenting coordinators, attorneys, and judiciary members. *Family Court Review*, 50, 441–454.
- Gamache, S. J. (2015). Family peacemaking with an interdisciplinary team: A therapist’s perspective. *Family Court Review*, 53, 378–387.
- Greenberg, E. (2010). Fine tuning the branding of parenting coordination: “. . . You may get what you need.” *Family Court Review*, 48, 206–211.
- Hayes, S. W. (2010). “More of a street cop than a detective”: An analysis of the roles and functions of parenting coordinators in North Carolina. *Family Court Review*, 48, 698–709.
- Henry, W. J., Fieldstone, L., & Bohac, K. (2009). Parenting coordination and court relitigation: A case study. *Family Court Review*, 47, 682–697.
- Izzo, E., & Miller, V. C. (2010). *Second-hand shock: Surviving & overcoming vicarious trauma*. Scottsdale, AZ: High Conflict Institute Press.
- Kirkland, K., & Sullivan, M. (2008). Parenting coordination (PC) practice: A survey of experienced professionals. *Family Court Review*, 46, 622–636.
- Mitcham-Smith, M., & Henry, W. (2007). High-conflict divorce solutions: Parenting coordination as an innovative co-parenting intervention. *The Family Journal: Counseling and Therapy for Couples and Families*, 15, 368–373.
- Monteil, J. T. (2015). Out on a limb: Appointing a parenting coordinator with decision-making authority in the absence of a statute or rule. *Family Court Review*, 53, 578–588.
- Nurse, A. R., & Thompson, P. (1999). Collaborative divorce: A new, interdisciplinary approach. *American Journal of Family Law*, 13, 226–234.
- Parks, L., Tindall, H., & Yingling, L. (2011). Defining parenting coordination with state laws. *Family Court Review*, 49, 629–641.
- Sulmeyer, S. H., Adams, V. A., & Wood, B. (2015). The interdisciplinary settlement conference: A grassroots alternative for resolving high-conflict parenting disputes in lean times. *Family Court Review*, 53, 632–649.
- Tesler, P. H., & Thompson, P. (2006). *Collaborative divorce: The revolutionary way to restructure your family, resolve legal issues, and move on with your life*. New York: HarperCollins.
- Thayer, E. S., & Zimmerman, J. (2001). *The co-parenting survival guide: Letting go of conflict after a difficult divorce*. Oakland, CA: New Harbinger.
- Ver Steegh, N., & Gould-Saltman, D. (2014). Joint legal custody presumptions: A troubling legal shortcut. *Family Court Review*, 52, 263–270.
- Webb, S. (2008). Collaborative law: A practitioner’s perspective on its history and current practice. *Journal of the American Academy of Matrimonial Lawyers*, 21, 155–170.
- Zimmerman, J., Hess, A. K., McGarrah, N. A., Benjamin, G. A. H., Ally, G. A., Gollan, J. K., et al. (2009). Ethical and professional considerations in divorce and child custody cases. *Professional Psychology: Research and Practice*, 40, 539–549.

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