

# It Takes a Village—Taming High Conflict With the “2 PC Model”

Lauren Behrman

*Independent Practice, White Plains, Katonah, and New York, New York*

Prolonged litigation frequently leaves once-married and functional parents unable to communicate effectively and coparent with each other. The damage can be even more profound for never-married parents without a history of ever functioning as life partners or parenting partners. High-conflict parents often enter into parenting coordination following litigation through stipulation or court order. For some parents, this modality fails to provide enough support and containment of conflict, and postjudgment litigation continues long after the initial divorce. A clinical case study illustrates the use of an experimental, alternative dispute-resolution intervention we call “the 2 Parenting Coordinator (PC) model.” The 2 PC model evolved by applying the collaborative divorce 2-coach intervention to parenting coordination for a family in which traditional parenting coordination had twice failed. The case presented involved never-married parents, whose tenuous and mistrustful connection was threatening to contaminate the child’s ability to have an emotionally secure relationship with her father. © 2016 Wiley Periodicals, Inc. *J. Clin. Psychol.* 00:1–15, 2016.

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The therapeutic approach, the subject of this article, is an alternative dispute-resolution intervention that was created out of grafting the two-coach model of collaborative divorce practice onto the process of parenting coordination. Like any purposeful grafting of two species, we are looking to create a hardier specimen that encompasses the best features of both “parent” species. Like much of the cutting edge, alternative dispute-resolution approaches to the problems families face in divorce and postdivorce parenting, this intervention represents an evolution of practice based on our experience in applying these strategies.

I initially came across the description of *two-Parenting Coordinators (PCs)*—the 2 PC model of intervention—on a Collaborative Divorce listserv posting by Kate Scharff (2012), which reads as follows:

In DC my colleague (Lisa Herrick) and I have been experimenting with a new model of parenting coordination based on the success we’ve had with the two coach Collaborative model. We’ve started offering ourselves to higher conflict couples as a two-PC team—with one of us working primarily with one member of the couple. We’ve worked out a protocol—each member of the couple gets the kind of one-on-one emotional attention that they need, but decisions are made in joint meetings. Just as in Collaborative, the process between the professionals is transparent, and while (Lisa and I) are each “assigned” a client, our shared client is the family. In other words, together we create a shared psychological space that allows for simultaneous containment of both the individuals and the couple. Together, the two of us can manage splitting more effectively than either of us could alone—our capacity to work and think together, even in the most fraught moments, seems to communicate the possibility of a new, third position in which the needs of everyone can be met—something that is often terribly difficult in solo PC work. So, that’s not an answer to the question about folding PCs into Collaborative (it’s the other way around), but it is an example of an application of the lessons from Collaborative in cases that don’t choose the Collaborative route.

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Please address correspondence to: Lauren Behrman, 60 East 42 Street, Suite 1535, New York, NY 10165.  
E-mail: laurenbehrman@gmail.com

The idea of integrating (or grafting) these two interventions made a great deal of sense to me, particularly in these seemingly intractable high-conflict postdivorce cases that have been struggling in litigation for years filing one motion after another. Shortly after reading this posting, the opportunity to employ this method presented itself when I was referred a highly litigious parenting coordination case that had previously twice failed parenting coordination with two different PCs. I suggested to the referring children's law guardian that we try the 2 PC model. She was eager to hear more about this and her willingness to employ this method also speaks to a shift in some circles of the "family law culture" in New York State away from an adversarial model toward embracing alternative dispute-resolution techniques.

Let's first look at the two interventions used for the "grafting" of this new intervention. Because they are more fully described in the Alba-Fisch and Demby articles (this issue), they are only briefly described herein.

### *Description of Collaborative Practice*

The International Academy of Collaborative Professionals introduced the term *collaborative practice* as a way of describing all approaches to solving legal problems without court intervention in a transparent process that is based on trust and focused on interests, rather than mistrust, positions, and an adversarial win or lose mindset. In other words, it is a dispute-resolution process that is voluntary in nature in which a divorcing couple settles their differences regarding their children and their finances without resorting to litigation (Cameron, 2004).

This approach was a hybrid legal-therapeutic process that developed out of two separate *evolutionary streams*. One of these was created by an attorney, Stu Webb, in Minneapolis, Minnesota, who unilaterally decided he would no longer go to court when handling divorce cases, and the other was created by Peggy Thompson, PhD, and Nancy Ross, LCSW, in California in the mid-1990s, who were creating different types of professional teams to work more effectively with separating families. These two approaches were presented together for the first time at an Association for Family and Conciliation Courts (AFCC) conference in Vancouver, Canada, in 1999. Since that time, there has been a growing community of like-minded legal, financial, and mental health professionals nationwide and in at least 17 other countries who are working to develop, broaden, and deepen the required skills that work most effectively in this form of alternative dispute resolution (see <https://www.collaborativepractice.com/public/about/resources-for-the-public/collaborative-practice-groups-around-the-world.aspx>).

### *Description of Parenting Coordination*

Parenting coordination is an alternative dispute-resolution intervention that has become more widely accepted in many states. The role of PC evolved independently during the same time frame as collaborative practice. In the early 1990s, in some jurisdictions this role evolved as an intervention that provided "intensive case management for chronically conflicted child custody situations" (Coates, Deutsch, Starnes, Sullivan, & Sydlik, 2004, p. 246). These cases were frequently relitigating and using a disproportionate amount of the court's time and resources. Most of the issues that were being relitigated were relatively minor, focused on making decisions about such things as vacation planning, telephone access, afterschool activities, and routine schedules. Courts in some jurisdictions that were frustrated by these "revolving door cases" began to delegate limited areas of authority over these issues to experienced mental health professionals and attorneys with the consent of the parents. This provided an immediate nonadversarial, court-sanctioned forum in which these parental disputes could be settled quickly (Coates et al., 2004).

Often used primarily as a postdivorce intervention, parenting coordination may be entered into by stipulation or a court order. The PC often works as a tiebreaker when parental decision-making is paralyzed by conflict. The role is one of helping parents focus on troubleshooting and problem-solving challenges that arise in raising their children. Guidelines for parenting coordination have been established by both the American Psychological Association (APA; 2012) and the Association for Family and Conciliation Courts (2005).

*The Role of the PC in the 2 PC Model*

The “job description” of the PC in the 2 PC model is heavily borrowed from that of the collaborative divorce coach (aka neutral mental health professional). In collaborative divorce, the coach is present to function as a “Sherpa” or therapeutic companion and guide from the beginning of the divorce to the intended successful end of the process. In the 2 PC model, each PC is usually employed after the divorce for an unspecified length of time but can function as a resource at key times throughout the life of the postdivorce family.

In collaborative practice, the designation “coach” is somewhat misleading with its attendant associations to sports teams and/or noncredentialed life coaches. Quite the contrary, coaches in collaborative practice are highly trained mental health professionals with terminal degrees in their field, years of postdegree experience in family-, systems-, and child-related work (for collaborative divorce child specialists), and collaborative divorce and mediation training. Many people undergoing the divorce experience find the term coach more palatable because it differentiates the collaborative divorce work from therapy and counteracts the stigma of needing treatment for a mental health “disorder.” The ultimate goal of divorce coaching in collaborative practice is the restructuring of the family and family life with emotional safety and sustainability of a functional postdivorce parenting relationship. In parenting coordination, the goal is to help guide the parent to successfully traverse the decisions and disputes that arise in a way that minimizes parental conflict and allows for timely resolution of issues regarding the child(ren).

Although this is not a traditional therapy, it is a therapeutic approach in which the coach will use “any and all therapeutic options that are focused, relevant, that contribute to the resolution of the tasks of the separation/divorce and that encourage the best possible outcomes post-separation for all family members, especially the children” (Gamache, 2013, p. 26). When working with collaborative divorce content and the process, the divorce coach uses his or her entire toolbox of skills to create an intervention that best meets the unique needs of each family member. The mental health practitioner continues to learn and develop multiple skill sets over the course of a long career of working with both individuals and families. Working with divorcing and divorced parents and families provides the divorce coach with the opportunity to choose the right tool for the job at hand and creatively integrate these multiple skill sets, which are as follows:

- Use of knowledge of working therapeutically with adults, children, adolescents, couples, and families
- Collaboratively work on an interdisciplinary team with attorneys and financial professionals
- Apply mediation skills
- Apply knowledge of crisis theory, which provides psychoeducation around the crisis of divorce
- Teach both parents and children about the effects of divorce on all family members
- Be familiar with the research literature on children, couples, and families going through the divorce process and be able to help parents creatively develop appropriate narratives for their children
- Develop tools to educate parents about how to strengthen parent–child relationships and parenting while going through this transition
- Have and use life coaching skills to help divorcing individuals envision their lives going forward in this transition, including shifts in identity and the development of career possibilities

Additionally, the mental health professional functioning as a coach in collaborative practice or working as a PC is most effective having studied the following bodies of literature and practice:

Family Systems, Couple Communication, Child Development, Family of Origin, Attachment theory, Solution-Oriented Approaches, Narrative Approaches, Problem-focused and Problem-solving Approaches, Power Imbalance and Family Violence, Non-voluntary clients and client resistance, Addictions, Abuse, Grief Counseling, Relaxation techniques and self-regulatory approaches, life review, spiritual counseling, bibliotherapy and videotherapy, and stepfamily consultation. (Gamache, 2013, p. 26)

The collaborative coach and PC are knowledgeable about and prepared to make referrals to appropriate professionals for issues beyond their roles. The collaborative divorce coach carefully integrates all aspects of any related knowledge base that will best serve the family's forward movement through their separation and divorce, with a goal of identifying and striving for the long-term best outcomes for all family members.

In the 2 PC model of parenting coordination, as in the two-coach model of collaborative practice, each client works with his or her own individual PC to help navigate the emotional terrain of the process. In this work, the PC and the client meet individually (as frequently as needed) to address the areas of dispute. Each PC focuses on identifying the parent's most important concerns and goals. The two PCs work together to understand the couple dynamic, work through emotional roadblocks that are stalling the capacity to effectively communicate and make decisions, and help the parents create action plans related to parenting.

### Case Illustration

#### *Presenting Problem and Client Description*

Carmella, age 48, and Miki, age 51, both computer programmers, met in their 30s at a Club Med in the Caribbean. Aside from their common professional interests, they were an unlikely romantic match. They had been brought up in very different cultures. Carmella was born and raised in Italy, while Miki was from Japan. Both had been good students and were quite successful in their chosen profession. Neither had ever married, and neither had a history of long-term, stable, satisfying love relationships. They had a brief intense relationship lasting about 4 months, which led to an engagement. Soon after committing to each other, they realized that they were not meant for each other and broke their engagement. Carmella described the relationship as never having been close or deep and stated that no emotional bond had been formed.

Two weeks after breaking up, Carmella discovered that she was pregnant. Miki encouraged her to terminate the pregnancy, but Carmella, at age 37, wanted to give birth to the baby. She told Miki that he need not be involved in the baby's life. While he initially chose not to participate in the life of the baby, after reconsidering he expressed a desire to be involved and was there when Carmella gave birth to Antonia. In the months after Antonia's birth, Miki had free access to his daughter and could come to visit at any time. Carmella described him as being unreliable, often asking to visit at the last minute or not showing up when he had planned. She became increasingly uncomfortable and wanted to establish clarity in the custody of Antonia. Miki opposed this, and their 14 years of litigation began.

The first round of litigation ended with court orders in which Carmella was given sole custody and child support, and a visitation schedule was established for Miki. For several years, they were able to arrange their schedule by themselves, until Miki wanted to take Antonia overnight when she was 4 years old. Carmella did not agree that Antonia was ready for overnight visits, which prompted further litigation and a PC was put into place to help them navigate their parental disputes. Miki was living in another state at the time and had a girlfriend, and Carmella often did not know exactly where Antonia was staying on her weekends with dad. On more than one occasion, she discovered that Miki and Antonia were not where Miki initially said he would be staying. Additionally, she learned that Miki's girlfriend was involved with Antonia and often present during their weekends together. Huge conflict erupted over this issue. From Miki's perspective, he was as capable of parenting his daughter as Carmella, and he dearly wanted the opportunity to be involved in his daughter's life. In fact, having a relationship with Antonia was so important to him that he traveled great distances at great personal expense for this parenting time, even after he had to relocate to Seattle, Washington, for his work. The legal battle continued for the next 14 years up until the point at which the 2 PC intervention began.

When this case was referred, Antonia was 14 years old and completely disregarding of her father. The father-daughter relationship and communication was quite broken down, and Antonia was resisting visitation with Miki. Miki and Carmella were locked in battle and their communication was primarily through their attorneys or contentious e-mails to each other.

### *Brief Legal History of the Case*

There was an incomplete forensic evaluation and involvement of a PC when Antonia was 2 years old, and a brief course of therapy began when she was 4 years old. A PC was actively involved with Antonio between the ages of 4 and 11 years, and at the age of 8, there was a psychotherapeutic evaluation of Antonia. At the time Dr. Jeffrey Zimmerman and I became involved, the second PC had not been actively involved for 3 years. One therapist had fired the parents because they were so contentious.

Before our involvement in this case, there had been a second court-ordered forensic evaluation of Antonia and both of her parents. Even before it was finished, the evaluator recommended that therapy begin for both Antonia and her dad to work on their relationship, and for Miki and Carmella to work on the parenting communication and relationship that had never developed between them.

Of note in the forensic report was the common complaint that the hardest thing about being a parent for each of them was “coparenting with the other.” Antonia was securely attached to her mother, who was her primary attachment figure. When visiting with her dad, she often missed her mom. Additionally, she was hurt by the conflict between her parents, and to keep herself from being triangulated between them, she had chosen her mother’s side. These parents came from different cultures and had different parenting styles, which clashed. There was an inability to bridge the gap.

There were a number of factors in Antonia’s experience with her dad that further fractured the relationship, including her father’s stricter and more rule-oriented parenting style. Antonia felt intruded upon by her dad and was distressed by what she experienced as a lack of privacy at his house. She also had a feeling that her younger half-siblings were favored, and she experienced distress at the breakup of her dad’s relationship with the mother of her half-brother and sister with whom she had felt a closeness. With respect to the parents’ perspectives, Miki felt that Carmella interfered with and did not support his relationship with Antonia. Carmella felt that Miki neglected to consider Antonia’s perspective and was dogmatic in his parenting style.

Both parents disagreed about their experience with the most recent PC: One felt that the PC was effective, while the other did not. The court order was being modified to require another PC. Given that there had been two prior PCs over the 10 years preceding this evaluation, and the conflict addiction continued to the point where the child was becoming more and more disconnected from her dad, I suggested that we try a different model in this case and use the 2 PC model. For our first experiment with this model, I recommended that Dr. Jeff Zimmerman and myself attempt to work together as PCs in the 2 PC model with this family.

### *Case Formulation*

From the perspective of parenting coordination, in which it is not our role to diagnose and/or treat a mental disorder, we formulated this case to be illustrative of conflict addiction between Miki and Carmella. This intense conflict appeared to be making it difficult for Antonia to safely connect with her father. During Antonia’s stage of identity formation and in the context of long-term, contentious relationship between her parents, she had chosen to side with her mother, who was her primary attachment figure, to avoid feeling triangulated and pulled apart by the conflict. In addition, there were aspects of the quality of time and relationship with her father that needed to be addressed in therapy. Miki’s parenting style was quite authoritarian, and given the amount of time that Antonia spent with him, there was not enough of a secure attachment between them to withstand what Antonia perceived as harsh discipline. Additionally, Antonia did not feel that Miki empathized enough with her about her experience of feeling intruded upon and the lack of boundaries while at her father’s home. She also did not experience Miki as empathic toward her feeling of loss when his longstanding romantic relationship broke up, creating the loss of an attachment figure for Antonia.

*Course of Treatment: It Takes a Village—Getting the 2 PC Intervention Off the Ground*

*Laying the groundwork.* At the outset of this intervention, there were significant legal issues and delays. Because court orders needed to be drafted and redrafted, 6 months had passed between our first contact and the beginning of the 2 PC intervention. The court orders clearly outlined the boundaries of the roles of the two PCs and the limitations around testifying and exposure regarding unintended consequences of future binding recommendations the PCs might make. The court orders also specified the other professionals who were going to be appointed (i.e., the “village”).

The contentious nature of this case was reflected in the extreme amount of time and effort it took to get our work off the ground. Although our first contact with these parents was in the summer and a legal agreement that laid out the ground rules of our work was first drafted in early fall, it was not until winter that we were fully cleared to begin our 2 PC work. Miki was begging for us to get started because he had a host of pressing parenting issues. We immediately saw a problem with the first iteration of the stipulation, as it suggested that we as PCs would testify in court. We were quite clear that we wanted both of them to feel free to be honest with each of us and without fear that what they said could be used as evidence against either of them and without needing to try and prejudice us against the other parent. We also wanted to be indemnified and held harmless from any unintended consequences of decisions that we made.

Below, I excerpted and summarized the relevant court orders as a model for professionals who want to engage in this work. The court orders regarding our appointment clearly spelled out what we could weigh in on and those issues that we were not given authority to address:

- The parties shall promptly recommence the use of Parenting Coordinators to assist them in resolving non-custodial parenting issues related to the subject child.
- One coordinator shall work individually with one parent and the other coordinator shall work individually with the other parent and both coordinators shall work together with each other to assist the parents in resolving non-custodial parenting issues. The Parenting Coordinators shall determine which parent shall work individually with which coordinator. Each parent shall be solely responsible for the fees associated with his/her parent coordinator.
- The Parent Coordinators shall act as arbitrators if the parties fail to reach agreement regarding non-custodial parenting issues such as logistical arrangements and communications. The parents shall exercise good faith and due diligence to resolve all such issues.
- The parties shall be bound by all determinations of the arbitrators on any non-custodial parenting issues.
- The Parenting Coordinators may assist the parties and make recommendations but cannot make any binding determination on any issue of legal or physical custody or the amount of access time currently exercised by the Respondent/Father. Both parties shall have the right to seek judicial intervention regarding legal or physical custody, or the amount of access time for the Respondent/Father.
- The parent coordinators shall assist the parties in selecting a family therapist for the parties and the child and an individual therapist for the child. The therapists shall be selected as soon as possible but in no event beyond thirty days from execution of this order.
- The parties shall duly execute all releases required to allow the Parenting Coordinators, the family therapist, and the child’s individual therapist to communicate freely with each other and/or to speak with the prior parent coordinator and the prior child therapist.
- The parties shall share the cost of the individual therapist for the child in accordance with the Order of Support regarding payment of statutory add on expenses. The cost of the family therapist shall be shared as follows: the Petitioner/Mother shall pay one third of the total expense the Respondent/Father shall pay one third of the total expense and the parties shall share one third of the total expense in accordance with the Order of Support regarding payment of statutory add-on expenses. To the extent possible, the parties shall endeavor to use in-network providers.
- The Petitioner/Mother, as the sole custodial parent, shall determine whether or not the child should continue with individual therapy subject to the right of the Respondent/Father to see

judicial intervention to contravene the petitioner/mother that the petitioner/mother agrees that she shall not terminate individual therapy for the child until at least six months from the date of this order.

- The forensic report of Dr. X shall be released to the parent coordinators, family therapist, and the child’s therapist.

By the time we began in January, Miki was anxious to get the child’s therapist and the family therapist in place and begin addressing pressing issues, including the schedule for the upcoming summer and the problems he had connecting with Antonia when she was with her mom. Each PC met with both clients individually. We conferenced and decided which clients to work with. In this case, we worked with opposite gender clients. The decision was made in part for logistical reasons. Once we established who we were each working with, we had several meetings to develop a working relationship with each of our clients and fully understand the issues from each client’s perspective.

Rather than one coherent judgment or stipulation of settlement, what we had to work with was a set of orders from a number of different rulings and different motions, which proved to be a maze and quite confusing to deal with. These different sets of court orders from motions at different time periods were like a jigsaw puzzle, and piecing them together was like putting together a complex jigsaw puzzle blindfolded! We knew we needed to undertake two important early tasks in this case: to assemble the professional team and create an easy-to-follow document that incorporated the spirit of the orders, with recommendations for each parent to avoid additional conflict, by which they would agree to abide.

*Putting the team in place.* Because the court order required treatment for Antonia and her father, our first order of business was choosing the right practitioner for that work. We chose Dr. M, a very experienced child psychologist with a history of working with children of high-conflict divorced parents. We asked her to suggest a family therapist to work with both parents from her professional network, to insure that the two therapists would be able to coordinate their work with this family. Dr. M. recommended a highly trained family therapist who was quite well known in his field. Right from the outset, however, difficulty in setting up the appointments became a major problem. Despite almost a month lead time prior to the first scheduled 2-hour appointment, Carmella could not fully commit to the appointment as a result of her work schedule. When the day of the appointment arrived, Antonia was home sick, and Carmella stated that there was no one to watch her. Miki arranged with another family to provide childcare for Antonia during the appointment but Carmella did not agree. In the end, they did not appear for their appointment, and the family therapist subsequently refused to treat them.

We then had to find another family therapist to begin working with Miki and Carmella. We chose Dr. Rotter, a therapist who had been trained and experienced in “high-conflict coparent counseling.” We decided that this was the “family therapy” that was most appropriate in that Dr. Rotter would work with the two parents as part of the family system while the father–daughter relationship was being addressed with Dr. M. With proper releases executed, we were able to begin the work with this family. A detailed description of how the family therapy proceeded, with some description of the child therapy incorporated, is found in Dr. Rotter’s article in this journal.

*Strengthening the container and holding the treatment in place.* Our next task was to hold the case in place while the treatment took hold and handle the tough and pressing issues before us.

During this phase, we often received communications from the parents that highlighted ongoing problems and complaints. There were requests to change things that were set out clearly in the orders. For example, we tackled logistical issues, like creating a parenting schedule for the summer in accordance with prior court orders (in spite of parental requests to the contrary). We then proceeded to develop our second intervention. As described above, this was to create a simpler document that would make the maze of court orders from different periods of time more integrated and easier to follow. We created what we termed “The Rules of the Road.”

This document included the prior orders clearly stated using lay language and contained specific behavioral requirements for each parent to reduce conflict.

When we first proposed the Rules of the Road, both parents were slow to respond to them and then subsequently raised multiple objections. We then reworded some aspects of the document in response to what we felt were reasonable concerns and sent out a revised document, with clear instructions that these agreements constituted our understanding of best practices for them and were to be considered a formal decision or recommendation, and that we were not open to negotiating further any of the points. We emphasized that each parent needed to pay attention to his or her own behavior (rather than blaming the other parent) that escalated conflict and take individual steps to decrease the conflict and to focus on keeping Antonia “out of the middle of their parental conflicts.” We recommended that each parent contact his or her own PC for ideas on how to approach issues in a way that would not further the conflict.

I present our recommendations in the next section.

### *Decreasing Parental Conflict and Its Effect on Antonia*

These points you have already agreed to in the retainer agreements that you signed when we began our work together.

#### Rules of the Road

- Every effort will be made to absolutely avoid communicating evidence of conflict in front of your child/children.
- You will speak to each other with respect and not use condescending or derogatory terms in any exchanges with each other, especially in front of the child/children.
- Contact between parents should be scheduled and generally limited to exchanges of information about the children, their behavior, their schedules, school information, etc., and to solving problems faced by your child/children.
- You agree to make your child/children’s needs more important than your own territorial needs or needs for independence.
- You agree to respect the other parent’s time with your child/children and not interfere with the scheduled agreement. This also means following the parenting plan schedule by routinely being on time for the child/children when you pick them up from or bring them to the other parent. Along these lines, any changes, which need to be made to the schedule, need to be discussed and agreed to with the other parent first, prior to informing or discussing the change with the child/children.
- You agree to respect the other parent’s parenting style and discuss any concerns at agreed upon communication times and not in front of or in earshot of the child.
- You agree that it is in your child’s best interests to have two parents who love and care for her involved in her life on a regular basis.
- You agree not to place your child in loyalty conflicts between the two of you, or to try to have her take sides to support one parent vs. the other.
- You agree to work to give your child a family at peace, not war.

#### Logistical Planning

- Planning should be done well in advance so that confusion can be sorted out and appropriate logistics can be put in place.
- When a parent is traveling with Antonia, that parent will routinely provide his/her itinerary to the other parent at least two weeks in advance of the trip (e.g., flight times and airports, dates, people transporting Antonia, location, housing, if school has been notified if a non-parent is picking Antonia up, etc.). If the trip is canceled that parent (except in an emergency) should notify the other parent with at least two week’s notice.



### Parent to Child Phone Calls

- The parent who is not with Antonia will call her on her mobile phone. If Antonia is not available, the parent she is with will make sure Antonia returns the call in a timely way (later that evening or the next day at the latest) and that she demonstrates good phone etiquette for a child her age.
- Antonia’s phone should be programmed to accept phone messages. She should have her phone with her, turned on and the battery charged.
- The parent with Antonia will also provide the other parent with windows of times that Antonia is most likely available each day (i.e., not in school or activities), being sure to clarify the time zone as well. While the call may come in at other times (as long as it is not in conflict with Court orders) these windows of time are offered to try to facilitate a successful completion of a call. The parent calling Antonia should not make multiple calls to multiple phone numbers but simply leave one message (no more than once a day).
- Antonia’s calls with the parent she is not with should take place in a private setting, without the other parent present and not on speakerphone or Bluetooth. Antonia should be able to both speak and listen in private.
- The calls should generally not exceed 20 minutes as they are intended to be a check-in call and not to substantially interfere with the parenting time of Antonia with the parent she is with at the time.
- The parent who is present with Antonia should not interfere with the natural progression of the call and not ask or pressure Antonia to hang up.
- Antonia should not be pressured by the calling parent to stay on a call.
- It is our reading of the Court’s order that Antonia is not prohibited from returning a call after 7pm. She should be encouraged to do so when needed.

### Summer Vacation Recommendation

- In order for this logistical issue to not be a repeating conflict year after year, we are recommending that beginning in 2014 you follow the format below for scheduling the summer (July and August vacations):
  - Odd Calendar Years: Carmella has precedence over scheduling her vacation time with Antonia if she schedules her vacation time by March 1st of that year.
  - Even Calendar Years: Miki has precedence over scheduling his vacation time with Antonia if he schedules the vacation time by March 1<sup>st</sup> of that year.
- It should be noted that the March 1<sup>st</sup> notification date is the last date by which the parent who has precedence on a given year can reserve their vacation dates. The two of you certainly can make your arrangements much sooner as you see fit. So, for example, if on an odd calendar year Carmella schedules her vacation by January 1<sup>st</sup>, Miki can then make his vacation time.
- If the parent who has precedence on a given year does not schedule their vacation time and notify the other parent and the parent coordinators in writing by March 1st of that year, then the parent who does not have precedence will be free beginning on March 2nd of that year to schedule their vacation and should notify the other parent and parent coordinators immediately of the vacation dates once made. At that point, the parent who makes such notification of their vacation plans first will have precedence for that upcoming summer.
- Regardless of which parent has precedence on a given year, each parent will schedule the summer vacation time following the format of the most recent Court orders (i.e., Antonia will have two 16 day blocks of access with Miki, one in July and the other in August, separated by 15 days with Carmella, and Carmella will return from her vacations at least 2 days before Antonia’s vacation time commences with Miki) unless you mutually agree otherwise.
- The parent who has the last vacation time with Antonia should also make sure she returns home at least 2 days before the start of school.

- It should also be noted that these recommendations should not be interpreted as an evaluation or comment on the Court's order regarding access. As parent coordinators, we are not in the position to comment in such regard. It would be inappropriate for you, your attorneys or the Court to view these recommendations as a comment about the Court's orders (past or future) about access. We are retained to help you reduce conflict and implement the orders as they stand at present.

#### Additional Recommendations

- You will not speak in a demeaning or critical way to anyone (and especially Antonia) about the other parent.
- You will be extremely careful (except in an emergency) about providing information about the other parent and his/her plans, relationships, behaviors, etc. to anyone else who is not functioning in an assigned professional role (e.g., therapist, attorney, parent coordinator) for Antonia. Instead, you will advise the person seeking information to speak directly to the other parent.
- You will not ask Antonia to hold "secrets" about her time with you and also will not ask her specifics about her time with the other parent. It should be clear to Antonia that she can say what she chooses to (or not) to either of you.
- You will not question the other parent's parenting decisions made on their time or criticize or blame the other parent. This does not yield a positive outcome or the other parent changing their behavior for the better because of your direct or implied criticism. Rather, in all likelihood it simply leads to more conflict between you, which as stated earlier, is likely to be worse for Antonia than the dispute in question.

Additionally, please note that it is our intention to support the orders of the Court and if there is a recommendation above that inadvertently is in conflict with a prior order of the Court, the Court's order should have precedence.

#### *Forward Progress*

We believe the specificity detailed here was central scaffolding needed to support forward progress and clarify the orders of the court so that the work done by the parents and professionals would be less likely to unravel by episodes of unnecessary conflict. Because both parents agreed to the Rules of the Road, the family therapy was supported and began to take hold. Although Miki and Carmella were quite tentative at first, with the facilitation of the family therapist they did engage in a dialogue with each other that they had never had. Dr. Rotter's article (this issue) details the excellent work that they did with her, so I will not repeat it here. Despite the tenuousness of their bond with each other, they both aligned around the love of their daughter, and the iceberg that had typified their contact began to melt. Releases were executed, and periodic conference calls took place to keep the treatment team on the same page. When issues of scheduling or logistics or phone communication arose in the family therapy, these issues were always referred back to the PCs, who handled these issues, leaving the family therapist to focus exclusively on healing and fostering the parental relationship and building healthy communication.

Within 3 months of beginning the family therapy, the tone of the parental e-mails reflected much more cooperation and compromise between Carmella and Miki, and they had begun to work their scheduling issues out between themselves. As PCs, we stood by on the sidelines and cheered them on, acknowledging their progress as well as our understanding that there remained a great deal of work to be done. In fact, for the first time in many years, and with the help of their PCs behind the scenes, they were able to plan their summer break without going to court and with a minimum of conflict.

During the first summer of we worked together, there continued to be conflict between the parents about Miki's telephone access when Antonia was with Carmella. Many of Miki's complaints that had been festering at the outset of our work were revived that summer, including lack of communication with his daughter, concern that he did not have input into a choice of

extracurricular activities for the fall, and concern that Carmella’s family was badmouthing him to Antonia. We were able to address these issues by refocusing on the Rules of the Road. The quality of the parental communication was continually addressed in the family therapy sessions.

Within 9 months of beginning the 2 PC intervention, our involvement was greatly diminished, with most of the work taking place in monthly coparenting sessions with Dr. R, and in therapy sessions with Dr. M and Antonia and/or Miki. Currently, the PCs have not been contacted in almost 2 years, and this family has not been back to court at all. There was a moment when Carmella wanted to file a motion for a cost of living increase in child support, but decided against it. As can be seen in reading Dr. Rotter’s detailed discussion of this case, this family is now very stable, with significantly improved parental communication between Carmella and Miki and new rituals for spending time together at the outset or conclusion of Miki’s parenting time with Antonia.

### Outcome and Prognosis

The outcome of this case has exceeded our expectations. Through the coordinated work of the entire team, the conflict in this family was contained. This allowed for a healthy father–daughter relationship to develop and functional parental communication between mother and father. Utilization of our services shifted over time, and there were no court appearances. Miki and Carmella have created multiple vacation schedules and have worked out many parenting and scheduling issues without our intervention. Antonia is thriving and doing well, and she is no longer in weekly treatment with Dr. M, though she has used this resource well when an issue has arisen. Miki and Carmella have integrated Antonia’s lives with each parent by creating a ritual of spending time together at the outset or conclusion of each parental visit with Miki.

Recent progress has also gone way beyond our expectations for this case. Miki and Carmella were able to resolve a longstanding issue regarding Antonia traveling by herself on a plane for visits to her dad, and both parents worked together when recognizing an area of academic weakness for Antonia. Carmella recognized that Antonia has an important relationship with her father and father’s family of origin, and that she has shared intimate and important secrets with her father. From Dr. M’s initial impression that this father–daughter relationship might never heal to the present state of their relationship, a great deal of territory has been covered. This family is no longer a family at risk and this child has parents who, while not the best of friends, can now work together on behalf of their daughter and without putting her in the middle of their conflict.

### Ethical Challenges

The ethical challenges in taking on a 2 PC case are numerous, including (a) establishing a level of competence in this work, which is difficult and requires additional training above and beyond graduate work and preparing for licensure, (b) guarding against functioning in multiple roles, (c) clarifying roles and relationships when working with different members of a family, and (d) safeguarding confidentiality.

#### *Level of Competence*

It is important that the PC establishes and maintains a level of competence by engaging in specialized training, mentoring, and/or peer consultation, as well as continuing professional education, which is consistent with the APA Ethical Principles of Psychologists and Code of Conduct, Standards 2.01e, Boundaries of Competence (2002).

In addition to obtaining a terminal degree and licensure in one’s field of practice, PCs may receive additional training in parenting coordination, offered through a number of sources. The AFCC offers such training on introductory and advanced levels, with expert trainers such as Joan Kelly, PhD, and trainings are both didactic and experiential. The AFCC and other training providers periodically offer trainings in special aspects of Parenting Coordinator. There is no formal certification program in parenting coordination available at this time.

When working as a Parenting Coordination divorce professional, there is also a significant training requirement above and beyond one's terminal degree and licensure. Many practice groups have their own professional standards, such as 5 years of postlicensure practice in the area of divorce. Collaborative mental health professionals functioning as coaches can receive multiday basic interdisciplinary collaborative divorce practice training as well as advanced trainings on specific issues and topics, including coaching and child specialist roles. There is also a required 40-hour mediation training, a course in divorce law, and a specified number of continuing education trainings each year. To work in the 2 PC model, training in both parenting coordination and collaborative divorce practice is essential.

After receiving training in parenting coordination and/or the roles available to mental health professionals in the collaborative divorce process, it is critical for the clinician to engage in mentoring and peer consultation, particularly as one begins this work. Even if one is a highly experienced clinician, this work requires a different skill set and practice in roles that require neutrality. Working with the clients and their attorneys, the systemic dynamics of the couple, and the legal system can be quite a challenge. As demonstrated in this case, one of the early challenges in 2 PC work is clearly separating and differentiating our work (documented in a written agreement) from the court process. It takes a great deal of experience to avoid the many pitfalls here, and instead hold out for complete clarity from the court regarding the scope of the work. This is why it is highly recommended that when starting out in this work, new PCs engage professional mentors who have experience with these systems and engage in peer consultation with a small, trusted group of professional colleagues who are experienced in and also working actively in the field. They can help identify response options for the many challenges that will emerge along the way.

### *Confidentiality and Informed Consent*

Issues of confidentiality and informed consent are critically important to consider when working with a 2 PC case. Particularly in PC cases in which attorneys and courts are involved, there are circumstances in which confidentiality is not maintained (e.g., if you have been ordered by a judge to testify and/or when a responsible party has signed a release). It is mandatory that the PC explains the limits of confidentiality to the clients and obtains "informed consent" (Barnett, Zimmerman, & Walfish, 2014). The PCs cannot have a dialogue about the clients unless they have gotten properly executed releases subsequent to informed consent. When consulting with colleagues (as in peer consultation and mentoring situations), psychologists functioning in this role must adhere to Standard 4.01, Maintaining Confidentiality (APA, 2002), which states:

When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (p. 7)

To fulfill this ethical standard, it is essential the PCs and treating therapists completely protect the anonymity of cases, even in peer support groups and professional mentoring relationships.

### *Avoid Multiple Relationships*

In a 2 PC case, there is always a danger of "wearing more than one hat" in the case or of functioning in multiple roles or multiple relationships. One is frequently asked to provide therapy to family members, work individually with one of the parents, provide marital counseling (e.g., if the couple decides to reconcile), work with one of the parents and his or her significant other, or become involved in the case in some other way. It is critical to maintain a clear definition of one's professional role and resist the pull to function in more than one role. This is consistent with APA Ethical Standard 3.05, Multiple Relationships (APA, 2002). These cases are often

quite complex, and it is critical to hold onto one’s professional boundary and the boundaries around the scope of the work, especially to avoid the risk of the potential for the multiple roles to negatively affect the client. This might occur if you obtained information in one role and were now in the other role being called to testify, or if your position of neutrality was compromised by your former role in the case.

### *Clarify Professional Roles and Boundaries*

In addition, it is important to consider Standard 10.02, Therapy Involving Couples or Families (APA, 2002), which states:

- (a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist’s role and the probable uses of the services provided or the information obtained.
- (b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (p. 13)

Here, our careful work on the suggested wording for the court orders and our informed consent/retainer agreement at the outset of this case clarified that we would not testify in court. Our informed consent/retainer agreement states the following:

In performing their duties we understand that both Dr. Behrman and Dr. Zimmerman use a mix of skills, including those of a consultant/coach, therapist, mediator and parent educator. Neither Dr. Behrman nor Dr. Zimmerman will undertake treatment with family members, but depending on his or her role, may meet with the children and important family members or caretakers from time to time. At no time will a doctor/patient relationship be formed as neither Dr. Behrman nor Dr. Zimmerman will be treating either party for a psychiatric condition.

By clearly stating that we are not entering into a doctor–patient relationship and not providing treatment, we have clarified who our clients are and what relationship we will have with those clients.

### *Necessity for Professionals to Practice Self-Care*

This work is extremely challenging and requires that individual clinicians remain mindful of the need to practice self-care. PCs are often exposed to highly contentious parents whose extreme emotions and oftentimes litigious approach to conflict can be threatening and difficult to deal with. It is critical for the clinician to have a balanced caseload that includes cases that are less extreme. It is also critical for PCs to set limits on their availability, protecting time they have scheduled to be off-duty.

In addition, the traumatic stories that one is exposed to in this work can have the effect of “second-hand shock” on the practitioner (Izzo & Carpel Miller, 2010). In this scenario, the professional has experienced arousal of the sympathetic subsystem of the autonomic nervous system that would generally create the need for a “fight, flight or freeze” response. However, in our roles as empathic listeners, it is not appropriate to mobilize any of these responses. It has been posited that despite the vicarious nature of exposure to trauma, our neurotransmitters are activated for danger, and the suppression of the normal response can lead to fatigue and burnout on the part of the professional. I would suggest that the 2 PC model has some protective value

for each of the PCs in such a contentious case. The ability to work and think together with a similarly trained colleague can reduce the experience of second-hand trauma for each individual PC.

### Clinical Practices and Summary

This case illustrates the successful containment of parental conflict using the 2 PC model of clinical intervention in a high-conflict case of never-married parents with a 14-year-old daughter. The careful structuring of the legal and clinical agreement and boundaries provided for this couple allowed them to make use of their individual PCs and the decision-making and conflict-resolution functions of the 2 PCs. As stated in the initial listserv post that described this intervention, we found that we were able to give Miki and Carmella one-on-one emotional attention while critical decisions were made jointly. The process between the two PCs was a transparent one, and we perceived our shared client to be the family and especially the child. We found that we were able to hold the frame that allowed these parents to engage in productive coparenting and individual therapy for the child and reunification therapy for the child and her father, such that the mistrust, anxiety and hostility that had built up over the years was contained long enough for the treatment to take hold.

Cases like this can easily pull for each clinician to become aligned with his or her client, with the subsequent risk of minimizing or losing the perspective of the other parent and the dynamic between them. As a team of 2 PCs, we were able to manage the potential for splitting and work and think together, which clearly supported the healing and growth in these parents.

This dispute-resolution intervention has indeed taken a village. By providing a container for the conflict, with the support of the court, the parents' attorneys, and the attorney for the child, we as PCs were able to create the team that allowed these parents to move beyond the stuck positions they were in. As a result, Antonia now has a relationship with her father and two parents who are on the same page and working together on her behalf. We are very heartened by this approach and see it as a viable approach to cases in which intense conflict has made it difficult for parents to succeed in using one PC.

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