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Taking Stock of Parent Education in the Family Courts: Envisioning a Public Health Model

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Abstract

The paper reviewed the development and current status of the parent education movement in the Family Courts. Parent education programs are now being implemented in courts throughout the United States and have a high level of public acceptance; however, a stronger research methodology to evaluate the effects and continued work to align the goals with the content and teaching strategies of these programs are needed. A new conceptual framework is proposed for parent education, which views divorce as a public health problem for children as well as a legal issue. The three-level framework uses concepts from public health to align the goals, content and format of parent education programs and to enable rigorous evaluations of the outcomes achieved by these programs.

Introduction

Parent education programs emerged in the 1980s and 1990s as a part of what Singer (2009) has labeled the “velvet revolution” in which the law-oriented, judge-focused adversary model in family law was replaced with more collaborative, interdisciplinary and future-focused dispute resolution processes. The last three decades have seen a widespread and sustained proliferation of a diverse set of parent education programs that possess a range of goals, teaching strategies, institutional affiliations and authority. Parent education, in particular, represents a departure from previous family court practice because many courts, through mandatory attendance policies, engage most separated and divorcing parents¹ in services designed to prevent or mitigate divorce-related risk (Schepard, 2004). This approach mirrors a public health model and contrasts with the traditional family court practice of referring to services (e.g., mediation, child custody evaluation, parenting coordination) only in response to a legal conflict that may require adjudication, rather than to prevent future family conflicts or to promote children’s adjustment.

Parent education programs are widespread and popular (Pollet & Lombreglia, 2008; Thoennes & Pearson, 1999) with many programs delivering important information to separated and divorcing parents. This is a promising beginning, however the field as a whole continues to lack a cohesive approach to service delivery, a uniform set of priorities, an agreed-upon set of practice guidelines and sufficient rigorous program evaluation necessary

The order of authorship is alphabetical and does not reflect the equal contributions of the authors.

¹In this article we use the term “separated and divorcing parents” to refer to both parents who were married and those who were never married and may never have lived together.

to claim that parent education programs have a positive effect on those who participate or their children (Blaisure & Geasler, 2000; Kierstead, 2011, Sigal, Sandler, Wolchik, & Braver, 2011).

We believe that if parent education programs are to thrive in the future they must continue to work toward a better understanding of what is effective and toward widespread implementation of effective programs. Better understanding of what is effective can then lead to the development of evidence-based priorities and practice guidelines for parent education programs. Considering increasingly limited resources along with critiques of parent education programs stating (we believe erroneously) that they do not meet their stated goals (Schaefer, 2010), a lack of progress and failure to produce solid evidence of effectiveness may leave parent education programs vulnerable to the continuous stream of court budget cuts.

Our call for evidence-based parent education programs in the courts parallels a broader movement toward implementation of evidence-based practice across medical services (e.g., Affordable Care Act), mental health and substance abuse treatment and prevention services (National Registry of Effective Programs, SAMHSA), education (What Works Clearinghouse, National Institute of Education) and social policies (Center for Evidence Based Policy). The movement for evidence-based programs and practices is based on the recognition that while many social programs are very effective (NRC/IOM, 2009), many practices and policies implemented by well-meaning professionals do not work, or even have unintended negative effects. In order to maintain the public's trust and the taxpayers' support, social institutions must evaluate the effectiveness of the programs they deliver. Although there are many challenges to developing evidence-based services, particularly in family courts that are already under-resourced, services that are demonstrated to reduce family risk for the problems that often follow divorce and separation (e.g., mental health and substance abuse problems of children) should be able to compete successfully for federal, state and local funding designated to prevent such problems.

The purpose of this paper is to take stock of the history, current status and potential future directions for parent education programs in the family court. Part I examines the growth and development of parent education programs. Part II integrates concepts from public health with those from the legal system into a broad framework for future development of parent education in the family court. We believe this framework has the potential to enable family courts to evaluate the kinds of parent education programs they wish to adopt and to evaluate the success of those programs to accomplish their intended goals.

I. History of Parent Education in the Courts

The first documented parent education programs were based in neighboring counties in Kansas and evolved from divorce adjustment programs for parents that began in the late 1970s and early 1980s. Wyandotte County's "Sensible Approach to Divorce" (SAD) and Johnson County's "General Responsibilities as Separating Parents" (GRASP) were mandated in 1986 but began several years earlier as voluntary programs. They are believed to have been the first court-mandated parent education programs in the United States (James & Roeder-Esser, 1994). During the late 1980s, the number of educational programs increased, spurred in part by pre-mediation orientation sessions that were developed as part of a growing number of court-connected mediation programs (Lehner, 1994; Salem, 1995). In the late 1980s and early 1990s, private providers began to market packaged programs that included a curriculum, workbooks and videos² resulting in implementation of similar program content and materials in multiple jurisdictions (Geasler & Blaisure, 1998).

Parent education programs proliferated rapidly in the 1990s, with the number of programs tripling between 1994 and 1998 (Geasler & Blaisure, 1999), accompanied by multiple efforts to develop legislation that supported court affiliated programs (see, e.g., Lee, 1997). A 1998 national survey found that 44 states had state or local laws authorizing courts to require attendance at a program – 25 by state statute and 19 through local court or administrative rules – quadrupling the number of states that statutorily authorized or mandated attendance at such programs over a four-year period (Clement, 1999). This growth paralleled a significant increase in the number of unrepresented litigants in family courts during the 1990s (Schepard, 2004). Thus, parent education programs, especially those providing information about the court system and legal process, had important potential to provide information to those without legal representation to which they might not otherwise have access.

Program growth was buoyed by a range of related activities. In 1994, nearly 400 participants attended the First Congress on Parent Education Programs, sponsored by the Association of Family and Conciliation Courts (AFCC). Subsequent AFCC conferences and programs helped establish networks for program providers, administrators and researchers that offered support for developing legislative initiatives and program guidelines and helped develop a competitive market for program dissemination and training. These activities were accompanied by national media coverage that led to increased public awareness of parent education programs for divorcing families (Salem, Schepard & Schlissel, 1996). Program growth was also promoted by the U.S. Federal Office of Child Support Enforcement, which provided modest financial support for parent education programs through its Access/Visitation Grant Program, a program designed to support services that facilitate noncustodial parents' access to their children (U.S. Dept. of Health and Human Services http://www.acf.hhs.gov/programs/cse/access_visitation/). The growth of these programs was accompanied by modifications of program design in response to concerns raised by various stakeholders. For example, concerns about programs' focus on co-parenting were expressed by advocates for battered women, leading many program developers to revise their curriculum to address this concern (see, e.g., Frazee, 2005; Fuhrmann, McGill & O'Connell, 1999; Lutz & Grady, 2004).

By the turn of the century programs were widely disseminated and firmly established. However, although no national surveys that systematically examined the number of programs and their characteristics have been published since those conducted by Geasler and Blaisure (1996; 1999), there are indications that the surge of enthusiasm, innovation and activity of the parent education movement have diminished over the past decade. For example, there was a steady decline of attendance at AFCC's Congress on Parent Education Programs (AFCC, 2007), and these Congresses were subsequently cancelled. Also, the pace of evaluation of parent education programs has slowed, with more than 70% of studies reviewed in two recent reviews (Fackrall, Hawkins, & Kay, 2011; Sigal et al. 2011) published prior to 2003.

This is not to say that activity related to parent education programs has come to a standstill. Programs are operating in 46 states, they continue to be popular with the courts and users (Pollet & Lombreglia, 2008) and providers are developing and evaluating online and web-based programs (Bowers, Mitchell, Hardesty & Hughes, 2011). However, the rapid growth and enthusiasm of what Schepard (1994) referred to as a "grass roots parent education movement" has clearly subsided.

²Examples include Michigan's SMILE (Start Making it Livable for Everyone) Program, Families First's Transparenting Program and in the Center for Divorce Education's Children in the Middle Program.

This loss of momentum is not surprising. When an innovation, such as a court-affiliated parent education program, is in the process of development and initial implementation, as was the case during the 1990s, it commands time, energy and resources from judges, administrators and providers, to make certain that it is functioning well and that stakeholders' needs are adequately addressed. But these innovations are typically one small piece of a larger agenda of the court or agency; therefore, once a program is established, it is natural for the additional attention and resources to be redirected toward other court or agency needs.

It is also not surprising that there has been a loss of momentum in the evaluation of parent education programs. Although evaluations of parent education programs, which typically use satisfaction surveys, have been overwhelmingly positive (see, e.g., Thoennes & Pearson, 1999) once a program is well established and popular with stakeholders, providers and administrators may not wish to rock the boat by calling attention to the program by requesting funds for conducting additional research on its effects. Once positive evaluations are in hand, the wise course of action may be to continue to operate the program quietly and under the radar rather than bringing attention to a program that may represent a potential budget savings to a court administrator or elected official. However, we believe it is healthy for organizations to periodically take stock of their practices, even ones as well accepted as parent education. Taking stock provides an opportunity to assess what is actually being done in the program and whether the program goals are being accomplished and to identify ways to improve the service.

Variation in Parent Education Programs

The parent education programs that emerged over the last quarter-century vary on nearly every dimension including their goals, length, content, instructional staff, institutional base, court affiliation, statutory authority, attendance policies, funding sources and the existence of an evaluation component (and its methodological rigor). Surveys of parent education programs conducted by Blaisure and Geasler (1996), Geasler and Blaisure (1998, 1999) and Braver, Salem, Pearson and DeLuse (1996) chronicle the variability in program characteristics. Programs range from single session court-connected mediation orientation programs (typically evaluated, if at all, with client exit surveys) (Lehner, 1994; Salem, 1995), to the New Beginnings Program at the Arizona State University Prevention Research Center, a ten-session program that has been subjected to rigorous (and costly) scientific evaluation with funding from the National Institute of Mental Health and National Institute of Drug Abuse (Wolchik, Sandler, Weiss, & Winslow, 2007). Program length ranges from one to 36 hours (Geasler and Blaisure, 1999). The number of participants ranges from fewer than ten (Wolchik et al., 1993; 2000) to more than 150 (Petersen & Steinman, 1994). Providers include staff in family court service offices; public, private and non-profit mental health agencies; universities and extension programs; and independent, solo practitioners. Although most programs are designed for parents, some target both children and parents or include separate but coordinated components for parents and children (Salem, 1995). In this paper, we adopt a broad conceptualization of parent education to include the full a range of educational programs.

In the 1990s, there were efforts to conceptualize parent education programs as a distinct field of practice (Salem et al., 1996) to help develop greater coherence across programs. For example, Salem et al. (1996) recommended the development of national program guidelines. Also, Geasler and Blaisure (1998) called for a clearer articulation of programs' conceptual foundations to ensure continuity between theory and practice and to better assist potential users determine whether a program would be a good fit for their setting. Through a series of conferences, committees and publications, AFCC attempted to develop an organizational home to enable the professional community to share information and research concerning

parent education programs to facilitate a more consistent approach to developing and implementing programs. Despite these efforts, today there is no uniform set of priorities on which parent education programs are based (Kierstead, 2011) and there is little evidence, anecdotal or otherwise, to suggest that the field is any more cohesive than it was in its early stages of development.

The lack of coherence in the goals, priorities, practices and evaluation of parent education programs is consistent with the experiences of other family court-related practices, such as mediation and collaborative law (see, e.g., Folberg, Milne & Salem, 2004; Webb & Ousky, 2011). It can be argued that diversity is desirable because it helps to create an innovative, creative and energetic professional community, raises the level of professional discourse, and offers multiple choices for courts and other agencies interested in implementing programs that meet the specific needs of their community. However, program diversity also creates challenges in understanding what reasonable goals for these programs are, and identifying the approaches that are effective in achieving these goals. These, too, are important considerations if individual programs and the field are to progress.

Goals of Parent Education Programs Vary

Program goals can be viewed as the lynchpin for parent education programs for several reasons. The goals articulated for a program send an important message to judges, legislators, administrators, providers and users about a program's priorities and about what outcomes the sponsoring court or agency hopes to achieve by implementing the programs. A clear articulation of program goals also makes it possible to align program content and teaching strategies with the intended outcomes. Further, program goals provide a basis on which to evaluate whether the program is successful in achieving its intended outcomes.

We define goals as the intended outcomes of a parent's participation in a particular parent education program. Goals can range from learning specific information (e.g., the impact of parental conflict on children's adjustment) to the development of skills (e.g., conflict resolution or parenting). In some instances, program goals go beyond changing immediate (or proximal) outcomes, such as change in parents' knowledge about the effects of parental conflict on children's adjustment, to accomplishing more distal objectives, such as improving children's post-separation or divorce adjustment or reducing relitigation.

Not surprisingly, research shows that program goals vary widely. In separate reviews, Sigal, Sandler, Wolchik and Braver (2011) and Geasler and Blaisure (1995) identified more than thirty distinct goals and noted that many programs reported having multiple and overlapping goals. Geasler and Blaisure (1995) categorized program goals as child-, parent- and court-focused and found that programs placed most emphasis on child-related information and least on issues related to the courts and legal processes. Lehner (1994) found that many California programs focused on how educational programs impacted the mediation process with an overarching goal to "...make the [mediation] process more effective for clients and to provide some "normalizing" data on how divorce affects parents and children" (Lehner, 1994, p.51). The focus on mediation in these programs is not unexpected given that (1) California is historically regarded as first and foremost in court-connected family mediation; and (2) Lehner surveyed court-connected agencies that also provide mandatory mediation services. These data on programs in California demonstrate how program goals are influenced by community and stakeholder priorities and highlight the challenges of establishing consistency across jurisdictions.

Some program goals focus on imparting information, such as educating parents about the impact of divorce on children's adjustment (Pedro-Carroll, Nakhnikian & Montes, 2001) or informing parents about more positive ways to interact with ex-spouses (Shifflett &

Cummings, 1999). Other programs seek to impact participants' feelings or skills, such as facilitating a parent's adjustment to custody and visitation arrangements (McKenry, Clark & Stone, 1999), reducing children's exposure to inter-parental conflict (Arbuthnot, Kramer & Gordon, 1997) and increasing inter-parental communication, co-parenting and conflict resolution (Homrich, Glover & White, 2004). Goals in some programs are longer-term in nature, such as improving children's post-divorce adjustment (Wolchik et al., 2002). Also, some program goals extend beyond changes in interactions in the family to include interactions with the legal system, such as reducing relitigation (Kramer & Kowal, 1998). Although all of these goals fall under the parent education umbrella, it is clear that different content, teaching strategies and resources, including program length, are necessary to achieve them.

The wide variation in program goals may be a natural byproduct of the roots from which parent education programs have grown. Parent education programs have been developed by a variety of institutions and disciplines and have been rapidly disseminated throughout family courts. Professionals from multiple disciplines, including lawyers, judges, social workers, counselors, psychologists, mediators, and social science researchers, have all been involved in program development. These professionals come from very different cultures and function in different organizational contexts with different stakeholders, rewards systems, areas of expertise and priorities, and different capacities and support for program evaluation. It is therefore not surprising that such a range of program goals have emerged. Although this is understandable, the wide range of goals can create confusion and may lead to a misalignment between the intended outcomes of the programs and their content, strategies and the resources that are given to them.

Aligning Goals, Content, Teaching Strategies and Resources

Aligning content, teaching strategies and resources with program goals is critical to achieving desired outcomes. Concerns over the potential misalignment between program goals and the content and format of parent education programs have been articulated since the early stages of the parent education movement. Geasler and Blaisure wrote: "Whereas initial stages of program development require establishment of concise, measurable goals, attainable in a given time frame, expecting behavioral changes in parents and a major impact on the workload of court systems as a result of a 2-hour program may be unreasonable" (1995, p. 489). Salem et al. (1996) agreed: "Challenging goals are laudable, but overpromising places in jeopardy the long-term credibility and viability of the field... It is inadvisable to suggest that parent education will create long-term behavior change, heal the emotional scars of divorce, clear crowded dockets or settle custody disputes without solid empirical evidence to support these claims" (1996, p. 14). The concern about overpromising is highlighted when a composite description of a hypothetical typical program is juxtaposed with an ambitious goal. The "typical" parent education program has been described by some as a two to four hour program with a goal or focus on improving the well-being of children (see, e.g., Pollet & Lombreglia, 2008; Schaefer 2010). We believe that it is highly unlikely that such short programs can accomplish the challenging goal of improving children's adjustment and that creating such expectations is problematic.

Surveys conducted in the 1990s found a pattern among parent education programs that was consistent with Geasler and Blaisure's (1995) child-, parent- and court- focused framework with the greatest emphasis on information about the impact of separation and divorce on children, followed by information tailored to parents, then court, legal and dispute resolution processes. Braver et al.'s (1996) survey of program representatives at AFCC's First Congress on Parent Education Programs found most intensive coverage dedicated to the benefits of parental cooperation vs. conflict, typical post-divorce reactions of children, impact of "badmouthing" or "brainwashing" children, and different reactions and needs of

children at different ages. Adult reactions to divorce, conflict management skills, additional divorce-related resources and parenting plans received moderate coverage. Content areas receiving the least intensive coverage were legal and financial issues and the “nuts and bolts” of how to navigate the court system. Geasler and Blaisure’s (1998) review of program materials and national survey of programs (Geasler & Blaisure, 1999) found almost identical patterns. These studies were also consistent in their findings related to teaching strategies. All reported greater use of strategies such as lecture, videos, discussion and handouts and less frequent use of self-assessment tools, role plays and skill practice (Braver et al, 1996; Geasler & Blaisure, 1998). These surveys however, did not systematically assess whether the content and strategies used in individual programs were aligned with their described goals.

Blaisure’s and Geasler’s Divorce Education Intervention Model (2000) provides a conceptual framework of three levels of programs that appropriately align their goals, content, teaching strategies and resources, and cite examples of programs at each level. This model is an important attempt to systematically describe how different goals require different content, teaching strategies and resources. A Level 1 program (what we have referred to as a “typical” program) has the goal of providing information and perhaps motivating parents to seek additional resources. These programs usually involve a large number of parents, are brief and largely didactic, with limited parental involvement. A Level 1 program might be a single session, two-hour program combining video, lecture and handouts which focus on providing information on children’s divorce adjustment, co-parenting and court processes. A Level 2 program aims to develop or enhance skills such as co-parental communication and conflict resolution. These programs include multiple sessions and experiential learning activities. Given the experiential nature of these programs, they often serve fewer parents than Level 1 programs. Whereas Level 2 programs are targeted to most separated and divorcing parents, Level 3 programs are designed for subgroups, such as high-conflict parents, and might aim to reduce interparental conflict. Level 3 programs are primarily experiential and multiple sessions in length.

Evaluations of the Effects of Parent Education

As noted above, in the absence of a coherent framework for describing the goals, content and strategies used in parent education it is difficult to evaluate the effectiveness of these programs. It should be noted that there is broad evidence across evaluations that there is a high level of parent satisfaction with parent education programs (Sigal et al., 2011). The information they provide is seen as very helpful both by parents who voluntarily attend and those who are mandated to attend (Kierstadt, 2011). This outcome is important in that it likely increases their respect for the legal system; however, it is also important to learn whether these programs are achieving their broader goals. As noted below, methodological weaknesses in the studies used to evaluate these programs limits our ability to have confidence that they are accomplishing their intended goals. We believe the logical next step is more methodologically rigorous and systematic evaluation to identify whether participants are learning the information that is presented, whether they are putting the information to use and whether it is impacting their own or their children’s behavior in a meaningful way. Such evaluations should enable more widespread implementation of programs that are effective, promote continuous improvement in those programs and solidify court and public support for parent education programs in the court system.

There have been several qualitative reviews that address the question of whether parent education works (Cookston, Braver, Sandler, & Genalo, 2002; Goodman, Bonds, Sandler, & Braver, 2004; Sigal et al. 2011). Based on their critical evaluations of the research methodology in most studies, these reviews have concluded that there is *not yet* convincing evidence that parent education programs reduce inter-parental conflict, enhance parent-child

relationships or improve children's post-divorce adjustment. Some view such conclusions as evidence that parent education does not work and that it should be drastically curtailed (e.g., Schaefer, 2010). However this is an erroneous interpretation of these reviews. It is more appropriate to conclude that "It is too soon to draw clear conclusions concerning the efficacy of such programs" (Cookston et al, 2002, p. 190). Indeed, there is some reason to be optimistic that continued development of parent education programs will yield programs with benefits that are clearly demonstrated in rigorous evaluations.

Recently, Fackrell, Hawkins and Kay (2011) conducted a meta-analysis of 19 studies that evaluated parent education programs. A meta-analysis provides a statistical summary of program effects across studies rather than relying on the judgments of the reviewers. This meta-analysis showed that those who participated in a parent education program were significantly better off than those who did not on several outcomes including co-parenting conflict, parent-child relationships, child well-being and parent well-being. Similar to the qualitative reviews described above (e.g., Sigal et al., 2011), these authors note that many of the studies in this analysis have serious methodological weaknesses. Thus, although the findings from the meta-analysis are encouraging, the consensus across the qualitative and meta-analytic reviews is that there is a need for rigorous evaluation to more definitively assess the effects of parent education.

This conclusion about the current state of evidence points to several important directions for the development of the field. First, given that there is limited research in this area, additional evaluations are needed. Second, given that there are methodological weaknesses in most of the existing studies, future evaluations should use rigorous methodology, including the use of randomized experimental designs. Third, achieving goals such as reducing inter-parental conflict, enhancing parent-child relationships or improving child post-divorce adjustment may require more extensive programs in terms of content, teaching strategies and length than those in Level 1 programs.

For future research to contribute to the development of more effective parent education programs, we believe there is a need for a coherent conceptual framework that describes the multiple goals of these programs and aligns these goals with the content of the programs, strategies used to teach this content and resources necessary to accomplish the goals. Part II of this paper proposes such a framework.

II. A comprehensive framework for parent education: Integrating a public health model within the family court system

We propose that integrating a public health model into the family court system can provide a comprehensive conceptual framework for the delivery of parent education programs in the courts and for the evaluation of their effects. From a public health perspective, the goals of parent education programs can be viewed as promoting processes that reduce the risk of negative outcomes for children and their parents following separation or divorce. We believe that the goals of promoting children's and parents' adjustment are complementary to outcomes that are highly valued by the court, such as reducing inter-parental conflict, promoting positive co-parenting following the divorce and parents agreeing on parenting plans that are in the best interest of the child (Edwards, 2007). These public health goals are very similar to those that have been identified in nationwide surveys of court parent education programs (e.g., Braver et al., 1996; Geasler & Blaisure, 1999). Legal scholars (e.g., Schepard, 1998; 2004) as well as social science researchers (e.g. Braver, Hipke, Ellman, & Sandler, 2004; Pedro-Carroll, 2005) have argued that a public health role is built into the very nature of the work of the family court. Legal issues that are generally resolved with family court practitioners such as legal custody, parenting time and relocation are

greatly influenced by psychological issues and their resolution may have significant effects on children's health and well-being (Bauserman, 2002; Fabricius, Diaz & Braver, 2012). Indeed, a critical criterion used in court decisions concerning issues such as parenting time and custody is their impact on children's well-being, (i.e., the best interests of the child, a term included in every state's statutory scheme) (Salem & Dunford-Jackson, 2008).

Below, we describe four key elements of a public health model of divorce, including a multi-level conceptual model of parent education in which different levels of intervention are delivered to families with different levels of need.

Divorce as a public health issue

The four key components of conceptualizing divorce as a public health issue include: (1) Divorce is viewed as a risk factor for negative outcomes of children; (2) Children's post-divorce adjustment problems are associated with protective factors and risk factors that are potentially malleable by interventions; (3) There is solid empirical evidence of the effectiveness of programs for divorced families; and (4) Different levels of parent education are appropriate for families with different levels of need.

1. Divorce as a risk factor for children—Divorce is a highly prevalent risk factor in most industrialized nations, and particularly in the United States. Although the rate of divorce has stabilized or decreased somewhat since the 1970s (Bramlett & Mosher, 2002; U.S. Census Bureau, 2005), it is estimated that 30 to 50% of youth in the United States will experience divorce in childhood or adolescence (Kennedy & Bumpass, 2008; National Center for Health Statistics, 2008). The public health concept of risk refers to a factor that is associated with a higher likelihood of a negative outcome. Compelling evidence demonstrates that divorce confers increased risk for multiple problems in childhood and adolescence, including substance use and abuse and cigarette smoking (e.g., Barrett & Turner, 2006), mental health problems and increased use of mental health services (e.g., Amato, 2001; Amato & Keith, 1991), high risk sexual behavior (Hetherington, 1999; McLanahan, 1999) and physical health problems (Troxel & Matthews, 2004). Further, the negative impact of divorce can continue into adulthood. Increased levels of substance abuse and mental disorder (Kessler, Davis, & Kendle, 1997); poorer educational, occupational and marital adjustment (e.g., Biblarz & Gottainer, 2000); and increased health problems (Sachs-Ericsson, Blazer, Plant, & Arnow, 2005) occur more often for those from divorced families versus those who grew up in non-divorced families. Illustratively, McLanahan's (1999) analysis of ten national probability samples showed school dropout rates of 31% and teen birth rates of 33% for adolescents in divorced families vs. 13% and 11%, respectively, for adolescents in non-divorced families.

The high prevalence of divorce and its effects on multiple problem outcomes means that reducing the risk associated with divorce can have a substantial impact to improve the public health. The concept of population attributable risk (PAR), which is often used in public health research, can be applied to illustrate the potential effects of reducing problem outcomes for children from divorced families. PAR refers to the proportion of a problem in the overall population that could be prevented by removing a risk factor *or its consequences*. Using estimates of risk derived from studies with nationally representative samples (i.e., Furstenberg & Teitler, 1994; Kessler et al., 1997; Zill, Morrison, & Coiro, 1993) it is estimated that 20% of substance abuse problems, 30% of mental health problems and 23% of school dropouts could be prevented by reducing the risks associated with divorce.

The increased "risk" associated with divorce does *not* mean that all children from divorced families will experience problem outcomes. To the contrary, most children adjust well following divorce. Kelly (2012) estimates that approximately 25% of children whose parents

divorce experience adjustment problems, which is about twice the rate for youth whose parents do not divorce. Amato (2010) points out that the doubling of risk experienced by children from divorced families is comparable to the increased risk of having a heart attack that is conferred by elevated cholesterol (i.e., 7% of those with high cholesterol will experience a heart attack as compared to 4% of those who do not have high cholesterol). Most of the individuals in both of these “at-risk” groups (i.e., children who experience parental divorce and individuals with high cholesterol) will *not* experience serious problems, but the rate of serious problems is about twice as great in the group that has the risk factor than in the group without it.

2. Factors associated with child problems following divorce—The keys to developing effective interventions for divorcing families are (1) identifying factors that contribute to elevations in risk for negative outcomes and protective factors that reduce risk; and (2) developing strategies for changing the risk and protective factors in a positive direction. The factors that are most consistently associated with the elevation in risks conferred by parental divorce are now well-established. In a comprehensive review of the literature, Kelly (2012) identified the following factors as having the greatest impact: (1) high levels of conflict between the parents, (2) domestic violence, (3) poor quality of parenting provided by the mother and father, (4) a poor co-parenting relationship, (5) low economic resources, and (6) loss of a relationship with one of the parents. Research indicates that it is the relative presence of these factors rather than the divorce per se that leads children to either experience problems or to adapt well following divorce of their parents (e.g. Kelly, 2012; Kelly & Emery, 2003; Sandler, Wolchik, MacKinnon, Ayers, & Roosa., 1997; Wolchik, Sandler, Braver, & Fogas, 1986). From a public health perspective, the question is this: Are there interventions that have been shown to affect these factors and that can be delivered within the court system?

3. Parent-focused programs to reduce risk—A recent report of the National Research Council and Institute of Medicine (NRC/IOM, 2009) presents impressive evidence of the effectiveness of many parent- focused preventive interventions that might be adapted for parent education to improve outcomes for separated and divorcing families. For example Sandler, Schoenfelder, Wolchik & MacKinnon (2011) reviewed 47 randomized experimental trials of parenting-focused interventions that have demonstrated that teaching effective parenting skills led to reductions in a wide range of child problems including substance use, mental health problems and juvenile arrests and to improvements in educational outcomes several years following program delivery. Further, research with both divorced and non-divorced families demonstrates that children benefit when either the father or the mothers participate in parenting skills training programs (Sandler et al., 2011). Some of the strongest evidence of the effectiveness of parenting interventions has been found for separated and divorced families (Wolchik et al., 2002; Forgatch, Patterson, Degarmo, & Beldavs, 2009). For example, the New Beginnings Program has been demonstrated to improve parental warmth and effective discipline and that these changes in parenting led to reductions in rates of children’s mental health and substance use disorders, frequency of substance use and abuse, and high risk sexual behavior; and to improvements in grades and self-esteem six (Wolchik et al., 2002) and fifteen years (Wolchik et al., 2011) following program participation. There is also evidence that parenting programs can decrease interparental conflict following divorce (Fackrell, et al., 2011). For example, a randomized experimental trial of Dads for Life, an eight-session program for non-custodial divorced fathers, reduced interparental conflict as well as child behavior problems one year following the program (Braver, Griffin & Cookston, 2005; Cookston, Braver, Griffin, De Luse, & Miles, 2007). Although these effective programs are significantly longer than a brief two to four hour parent education program and thus could not be delivered to all divorcing families,

they demonstrate a significant principle – some of the most important risk and protective factors for children from divorced families can be changed by parent education programs.

4. Levels of parent education—A public health model includes multiple levels of interventions, which are differentiated by whether the program is provided to the entire population or a segment of the population that differ in terms of their level of need for services. Need for services can be defined in terms of the likelihood of parental behaviors leading to harm to the children's adjustment problems. Similar concepts for differentiated levels of parent education services have been developed in the family courts and in the field of public health. As noted above, Blaisure and Geasler's (2000) Divorce Education Intervention Model (2000) conceptualized three levels of service that vary by the level of presenter, nature of parent involvement, resources required and goals of the programs. Notably, this model aligns the goals, personnel and resources within each level of parent education.

Kierstadt (2011) argues that it is justifiable for courts and legislatures to mandate universal attendance to what Blaisure and Geasler (2000) refer to as Level 1 programs that are *informational* in nature and promote better parental decision making regarding legal and dispute resolution processes that may impact children's well-being. We agree but would extend the scope of these programs to include information about risk and protective factors that influence children's post-divorce adjustment and discussion of actions parents may take to make the transition easier for their children, including voluntarily using more intensive programs that have been shown to improve children's post-divorce adjustment. Providing such information enables parents to be informed consumers of court services as well as other services offered to separating and divorcing parents. However, Kierstead suggests, the court is only justified in requiring participation in programs that focus on changing parents' behaviors in cases where these behaviors put the child at risk of harm. We believe that beyond an informational program to enable voluntary decisions about use of more intensive services, there should be judicial findings of fact based on legal standards and that due process considerations must be addressed before mandating participation in these programs. We would add that those programs be evaluated to ensure that they are accomplishing their intended outcomes.

The field of public health uses the concepts of universal, selective and indicated to describe differentiated levels of prevention services as a function of the potential benefit and the level of intrusiveness or burden placed on the public (Mrazek & Haggerty, 1994; NRC/IOM, 2009). Universal programs and policies are those with demonstrated benefit that place no or minimal burden on the individual. Fluoridation of the water is an example of a universal public health intervention. Providing information on the risks of using some products (e.g., cigarettes) and the benefits of other products (e.g., nutrition labels on packaged food or calories listed on restaurant menus) is another example of a universal public health approach to provide information for the public to make decisions concerning engaging in behaviors that impacts their health. Selective interventions place somewhat greater burden on individuals and although they may be recommended, should only be offered on a voluntarily basis. Individuals who decide to participate have decided that the benefits offset the burden of participation. For example, the decision to voluntarily undergo an intrusive screening (e.g., colonoscopy) is based on the participant's decision, with the advice of a trusted medical professional and informed by research, that their elevated risk (e.g. due to age or family risk factors) justifies the discomfort of the procedure. Indicated interventions place an even greater burden on the individual and are more intrusive and are only justified when the individual is at even greater risk, such as showing early signs of a developing problem. For example, statin medications are used to lower elevated cholesterol, although they require periodic blood tests to monitor for possible iatrogenic side effects. In public health, the

decision to use indicated interventions is voluntary, although in cases where there is demonstrated danger to another, such as child maltreatment, the state actively intervenes.

One important distinction between the public health model and current use of parent education in the court is that there is a greater reliance on scientific evidence in making decisions in the public health approach. For example, in the public health model, a critical question to ask in considering a particular program is whether there are data demonstrating positive effects. Acquiring the evidentiary base for making such decisions has not been as high a priority in the family court. Below, we describe a three-level model of parent education in the courts that integrates the concepts of risk and protective factors and evidence-based decision making from the field of public health with the distinction between voluntary and mandated participation that can help define boundaries for the authority of the courts to mandate programs and to promote parents' ability to make informed decisions about the services they wish to voluntarily use. The model is visually presented in Figure 1. Throughout, we emphasize the importance of methodologically strong evaluations to build the evidence base to evaluate whether parent education programs are achieving their goals.

Universal parent education programs to support parents as informed consumers of services: A universal program could be designed that treats parents as informed consumers encountering a stressful legal and personal situation that affects their own and their children's well-being. This program would provide information to help parents make knowledgeable decisions about how to address the personal and legal issues facing their families. Because the burden of participating in a brief program is minimal compared to the potential benefit, it would be required of all separated and divorcing parents. To promote informed decision making about children's post-divorce adjustment, this program would provide scientifically accurate and up-to-date information about factors that affect post-divorce adjustment. Information would be based on methodologically rigorous research that has identified the major risk and protective factors that are associated with children's adjustment following divorce (Kelly, 2012). This program could also include tools for parents to assess their family's needs for additional services. For example, parents could be provided with a tool that assesses how their family is doing on factors that are known to predict problem outcomes for children, such as the child's current problem behaviors, conflict between the parents, and quality of the parent-child relationships (Dawson-McClure, Sandler, Wolchik, & Millsap, 2004). Similar tools are commonly used in physical health settings (e.g., assessing risk factors for cardiovascular disease) to help people make decisions about their health behavior (e.g., increase exercise, lose weight). Parents could use such a self-assessment to make voluntary decisions about whether or not to participate in programs for parents that have been demonstrated to be effective in helping families through this time of change or child coping enhancement programs that have been demonstrated to be effective (e.g., Boring, 2012).

Universal programs would also include a component on legal process and court services including information about the role of legal representation, parenting plan and dispute resolution options, child support guidelines and services for self-represented litigants. These programs could also include a self-assessment of the parents' needs for legal assistance. Information could be provided both in group sessions and through other modalities, including court websites and self-help centers and answer lines.

The universal program proposed here is not necessarily new or a dramatic change from existing programs. Indeed, a number of court-affiliated parent education programs have curricula and services that include many, if not most of the components noted above (Geasler & Blaisure, 1998). However, the proposed universal program differs from many that are currently provided in two ways. First, it proposes that universal programs focus on

providing information on risk and protective factors that are consistently supported by research. Second, the goal articulated by the proposed programs, to provide parents with information that is helpful for making well-informed decisions about the personal and legal issues they are facing, is much more focused than that of many existing universal mandated programs. Research is needed to evaluate whether universal parent education programs such as described above will increase parents' awareness of the risk and protective factors affecting children's post-divorce adjustment and help parents assess whether they need additional services to deal with psychological or legal concerns.

Selective voluntary parent education programs to promote the well-being of children:

Selective programs would be available to those parents who voluntarily elect to participate in programs that focus on skills for enhancing their children's post-divorce adjustment. Examples would be skill-building programs that teach effective discipline, effective co-parenting, methods for reducing inter-parental conflict and ways to handle common concerns such as communication around school or health-related issues. There is increasing evidence that short (i.e., single-session) programs or web-based programs can be effective in teaching parents skills to handle specific problems (Lim, Stormshak & Dishion, 2005; Sanders, Markie-Dadds, & Turner, 2003). In this model, participation in selective programs is intended to be voluntary; however it would not be a surprise if some judicial officers "strongly encouraged" participation of some parties. Although this is perhaps not an ideal referral process from a due process perspective, it is a reality of the court system and may nonetheless benefit these families.

For selective programs, the court could serve as a conduit rather than a direct program provider, endorsing those that are evidence-based and that align with the needs identified by the families. Alternatively, to enhance access, courts may elect to provide some programs that they deem particularly useful for the families they serve. The list of selective programs would likely change over time as new needs are identified and new services are demonstrated to be effective. An array of such services might be offered depending on the specific needs most often identified by parents in a community and on the availability of programs that have been shown to be effective to meet these needs. Illustratively, the Summit Project of the Arizona Association of Family and Conciliation Courts (2011) has developed a parent communication resource for professionals involved with high conflict divorces that provides guidance on how to handle specific situations that often lead to conflict. Similar material might be developed to guide parents in how to reduce conflict in these situations. These resources would need to be carefully evaluated to establish that they are accomplishing their intended goals.

To create greater awareness about the availability of voluntary selective services, parents could be informed about them during the mandatory universal component. For example, in a recent study, parents in a mandated universal parent education program were shown a brief DVD that invited them to voluntarily attend an evidence-based ten-session program that focused on enhancing parenting skills. Over 50% of parents expressed an interest in attending the longer program and 10% of parents in the universal program who were eligible attended the ten-session program (Berkowski et al., 2012). It is noteworthy that attendance at the ten-session parenting program was higher (approximately 20% of eligible) for parents who rated their families as experiencing more problems following the divorce than for those who reported fewer problems. There currently are several longer skill building parent education programs that have been shown through randomized experimental trials to reduce inter-parental conflict (Cookston et al., 2007), strengthen parenting (Wolchik et al., 2002) and improve outcomes for children many years later (Forgatch, Patterson, & DeGarmo, 2005; Wolchik et al., 2002), indicating that linking parents to such programs can have a significant public health benefit.

Indicated mandated parent education programs to protect the well-being of children:

Indicated services are appropriate for parents who are behaving in a way that the court deems to be harmful to their children's well-being. Such behaviors might include intimate partner violence or chronic high levels of inter-parental conflict, particularly conflict that puts the children in the middle or that involves repeated re-litigation over issues of parenting time, which leads to a lack of family stability. Indicated services are analogous to what Blaisure and Geasler (2000) describe as a Level 3 program. We agree with Blaisure's and Geasler's (2000) comment that programs designed to change behaviors, such as reducing inter-parental conflict, are more likely to be more intensive and require more resources than universal or selective programs. However, it is important to note that simply having a longer and more intense program does not necessarily equate to one that is effective. Relatively short but intense programs can be effective. For example, a short mandated program for high conflict parents has demonstrated encouraging results to reduce interparental conflict and improve children's adjustment in a randomized experimental trial (e.g., Sandler, Braver & Hita, 2012). The critical dimension that leads to efficacy of conflict reduction programs may not simply be the length and intensity of the program, but may involve other factors such as the degree to which they teach the parents new conflict reduction skills, provide parents with an opportunity to practice those skills and motivate parents to change. The only way to have confidence that a program is effective is to conduct a methodologically strong evaluation of the program, and to monitor quality of delivery of the program over time. These programs might be mandated by the court based on legal standards and judicial findings of parental behaviors that are potentially harmful to the child's well-being. Importantly, mandating intensive and potentially costly and burdensome services should not be taken lightly. As noted above, there are important due process considerations that are beyond the scope of this paper. Mandated indicated programs would need to be very goal specific, for example, to teach parents skills to reduce behaviors that are known to be damaging to their children such as exposing them to chronic inter-parental conflict, and should be differentiated from therapies to change mental health problems more generally.

Integrating universal, selective and indicated parent education programs with other court services:

In considering the adoption of a public health model for parent education programs, courts should consider how parent education might relate to other services provided by the court. For example, a mandatory universal program that provides information on risk and protective factors might be complimented by an overview of the legal system, a self-help center, online information or a case manager or referral system to help inform the parent about the available services and identify the most appropriate dispute resolution process for a given family. A voluntary selective program that enhances skills to promote child well-being could be complimented by mediation, collaborative law or cooperative law.³ An indicated program, such as an intensive program for high conflict parents, might be mandated while a child custody evaluation or parenting coordination is being conducted. Optimally, the different levels of parent education and legal services would be coordinated so that the diverse needs of different parents are met by a court system that processes cases efficiently and in a timely manner. The Collaborative Law Project (Kline-Pruett, Insabella, & Gustafson, 2005) provides one example of a coordinated effort. An evaluation of the Collaborative Law Project that used a randomized experimental trial showed that it reduced factors that increase the risk of children's adjustment problems (e.g., interparental conflict) and had positive effects on the use of court services (e.g., increased use of less expensive services and decreased use of more expensive services). Hopefully, with increased use of rigorous evaluations to identify effective parent education programs at

³Although mediation is mandated in many jurisdictions, like selective services, it is traditionally considered a voluntary process.

universal, selective and indicated levels of service the courts will have a broader array of effective services that they can adopt to meet the needs of the families they are serving.

Conclusion: Parent education has great potential to improve outcomes for children and families seen in family courts

This paper reviewed the history and current status of parent education programs in the United States. It also proposed a public health model for conceptualizing parent education programs in the court. We believe that a public health model is appropriate because children in separated or divorced families are at increased risk for multiple problem outcomes that have individual and societal costs (e.g., substance abuse and mental health problems). Further, support for the utility of a public health model is provided by research that has identified the risk and protective factors for children's post-divorce problem outcomes as well as demonstrated the efficacy of interventions to reduce these problem outcomes. A three-level model of parent education programs was proposed to meet the wide range of needs of divorcing families while respecting the limits on the court's power to constrain parental autonomy. This model can be useful for courts considering how to systematically integrate parent education into the full array of services provided by the court. Because the goals, content and format of the parent education programs are aligned within each of the levels, the model should be amenable to rigorous evaluations to assess the degree to which the programs are accomplishing their goals. Parent education programs have enormous potential to improve outcomes for children and families. Courts that provide a well-integrated set of evidence-based parent education services can make a significant contribution to reducing the problems experienced by children following divorce.

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Sharlene Wolchik is a Professor in the Department of Psychology at Arizona State University. She has done research on developing and evaluating preventive interventions for children from divorced families for the last 25 years. Dr. Wolchik completed her psychology doctoral training at Rutgers University.

Key Points for the Family Court Community

- Educational programs for separated and divorcing parents are widely disseminated, popular and diverse in their structure, goals and teaching strategies.
- To enhance the value of parent education programs a more cohesive approach to program development and rigorous evaluation is needed to work toward dissemination of evidence-based programs.
- A model is proposed to integrate concepts from public health into court-affiliated parent education programs.

Figure 1.
Levels of Parent Education: Public Health and Legal Goals