A Play-based Preventive Intervention to
Foster Children’s Resilience in the Aftermath of Divorce
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This chapter describes the use of semi-structured play in the Children of Divorce Intervention Program (CODIP), a developmentally based, preventive intervention for children of divorce. The goals, objectives and key components of the intervention and implementation process will be described as well as a number of outcome studies that provide a solid evidence base for its effectiveness. Implications for replication and transportability in various settings will be discussed.

Rationale for Play-based Preventive Interventions

Advocates of prevention efforts have provided a compelling rationale for allocating resources toward the promotion of wellness rather than trying to contain difficulties once they become chronic and entrenched (Albee, 1983; Cowen, 1991; Durlak & Wells, 1997; Pedro-Carroll, 2001). Many prevention programs designed to promote children’s social and emotional well-being utilize play as an integral part of the intervention. Given its instrumental role in development and its natural appeal to children, play has been the main component of many therapeutic and preventive interventions for children (Kazdin, 1990; Phillips, 1985). The Primary Mental Health Project (PMHP), a school-based program designed to prevent school adjustment problems in young children, has utilized play as a central component since the program’s inception in 1957. PMHP’s longevity is supported by an extensive body of research documenting its effectiveness (Cowen, Hightower, Pedro-Carroll, Work & Wyman, 1996). Several other investigators have reported the successful use of play in preventive interventions. Bay-Hinitz, Peterson, and Quiltich (1994) used cooperative games in play therapy and found a decrease in aggressive behaviors in four- and five-year-old children. Children of alcoholics and
substance abusing parents responded well to a play-based intervention and demonstrated increased competencies and reductions in behavioral problems (Springer, Phillips, Phillips, Cannady & Kerst-Harris, 1992). Play-based preventive strategies were also effective in reducing anxiety in hospitalized children (Rae, Worchel, Upchurch, Sanner, & Daniel, 1989).

Puppets and non-competitive games are essential tools in play-based interventions. The Children of Divorce Intervention Program (CODIP) makes extensive use of these tools for achieving program objectives with children of different ages. Puppets and games are used to engage children, enable them to safely express feelings, learn information and practice new skills. Puppet play is also used as a displacement technique that is especially effective for young children dealing with emotionally charged issues such as parental divorce (Kalter, 1990; James & Myer, 1987). The purpose of this displacement technique is to represent the child’s distress about a situation or behavior problem, alternative ways of effective coping, and when appropriate, a reassuring or positive outcome to the underlying difficulties (Kalter, 1990). Empirical studies have also supported puppets or dolls as a valuable tool (e.g., Chittenden, 1942; McCarthy, 1998).

Games are a natural part of children's play, especially when they reach school age, and begin to play more games with rules (Rubin, Fein, & Vandenberg, 1983). By adolescence, the participation in games with rules declines and is replaced with more time alone and with talking and spending time with peers (Rubin et al., 1983; Larson & Verma, 1999). CODIP incorporates games in the groups for all ages except for the early adolescent group, which focuses more on role playing and group interaction activities. Several others have described the use of games in child-focused interventions and play-based activities, including with children who have witnessed domestic violence (Crockford, Kent, & Stewart, 1993), or who have emotional and
behavioral problems (Johnson, Riester, Corbett, Buehler, Huffacker, Levich, & Pena, 1998). In addition to our studies on CODIP, empirical studies have indicated that games are effective as a play therapy technique with several specific groups of children, such as those with learning disabilities (Utay & Lampe, 1995) and with other programs for children whose parents have recently divorced (Burroughs, Wagner, & Johnson, 1997).

Collectively, these studies provide a substantial evidence base for the benefits of play-based interventions for children dealing with stressful life experiences. The next section considers the particular stresses that parental divorce poses for children and protective factors shaping children's adjustment.

**Parental Divorce as a Stressor**

From a child’s perspective, few life changes are as unwelcome as their parents’ separation or divorce. Except in situations of domestic violence and intense, protracted conflict in which divorce provides an effective release from the toxic effects of conflict, most children experience family reorganization as a series of undesirable changes over which they feel powerless. There is substantial variation in children’s long-term reactions to divorce, in the early stages, however, most children of all ages experience considerable distress. Sadness, anxiety, anger, guilt, confusion, loyalty conflicts, and yearning for the absent parent are frequent early reactions (Pedro-Carroll, 2001; Hetherington, Stanley-Hagan, & Anderson, 1989; Oppawsky, 1991; Clulow, 1990). Research on children’s long-term outcomes indicates that although some children fare well, the individual and societal costs of divorce for some children can be profound and enduring, including higher rates of high school dropout, earlier marriage, out-of-wedlock childbirth, and disruption of their own marriages (Werner & Smith, 1982; McLanahan & Bumpass, 1988; Wallerstein & Blakeslee, 1989).
Although some of the earlier studies were not as well-designed as later studies, recent research using more rigorous techniques has continued to demonstrate small but significant negative effects of divorce on children (Amato & Keith, 1991; Hoyt, Cowen, Pedro-Carroll, & Alpert-Gillis, 1990; Zill, Morrison, & Coiro, 1993). These studies show increased rates of conduct, depression, and school adjustment problems among children of divorce. However, it is important to note that a significant proportion of children function well in the long-term. The variability in children’s outcomes highlights the fact that long-term difficulties are not inevitable and underscores the need to identify factors that mediate children’s adjustment to parental divorce over time (Pedro-Carroll, 2001). The next section considers the role of protective factors in children’s post-divorce adaptation and the implications of those findings for developing preventive interventions for children of divorce.

Factors Predicting Risk and Resilience in Children of Divorce

Historically, research on children and divorce has focused more on risk factors for negative outcomes than on protective factors that influence positive outcomes (Emery & Forehand, 1994). Although more research is needed to identify pathways to wellness following divorce, some individual child, family, and extra familial factors have been identified that offer important information for designing preventive interventions. For the purposes of this chapter, we focus only on those factors that are modifiable and applicable to preventive interventions for children (see Table 1).

**Individual Factors**

Coping with unwanted, uncontrollable, and often unexpected life-altering experiences can be enormously challenging, if not overwhelming. Studies have identified a number of individual factors that are related to the quality of children’s adjustment to divorce. Self-blame,
misconceptions, and inaccurate attributions increase the risk of more difficulties for children (Kurdek & Berg, 1983, 1987). Conversely, preventive interventions that focus on developing effective coping styles, clarifying misconceptions, framing realistic appraisals of control, and providing accurate attributions for parental problems have been shown to relate to better adjustment in school-aged children (Alpert-Gillis, Pedro-Carroll, & Cowen, 1989; Pedro-Carroll & Alpert-Gillis, 1997; Pedro-Carroll, Alpert-Gillis, & Cowen, 1992; Pedro-Carroll, Sutton, & Wyman, 1999; Stolberg & Mahler, 1994).

Similarly, active coping that involved problem solving and positive thinking (Sandler, Tein, & West, 1994) increased children’s feelings of confidence in their ability to cope (Sandler, Tein, Mehta, Wolchik, & Ayers, 2000) and led to greater resilience among children. Taken together, these studies demonstrate the importance of incorporating effective coping strategies into interventions for children and the solid potential that well-designed programs have for reducing risk and building social and emotional competencies.

Children of Divorce Intervention Program: Theoretical Underpinnings

Clinical aspects of the Children of Divorce Intervention Program (CODIP) are shaped by developmental theory, which focuses on age-based reactions to parental divorce and intervention approaches tailored to children’s developmental characteristics. CODIP is a preventive intervention, based on theories of resilience that suggest that wellness can be promoted by protective factors that provide supportive scaffolding for children experiencing difficult times (Vygotsky, 1978). As developmental psychopathologists have noted, children’s adjustment is influenced by changes over time as conditions, environments and life events unfold (Cicchetti, 1989; Masten, 1989). This view suggests a bilateral proposition that just as wellness can erode under adverse conditions, so can it be enhanced by nurturing conditions and protective processes
such as supportive, evidence-based interventions. The key is to foster supportive outreach and reduce risk across systems that affect children, including schools, courts, communities and families. This cumulative protection across systems is intended to provide a foundation on which children can effectively navigate challenges (Masten & Coatsworth, 1998). Wyman, Sandler, Wolchik and Nelson’s (2000) concept of cumulative competence promotion and stress protection underscores the ways in which preventive interventions such as CODIP can be fortified by using an organizational –developmental model of resilience. Central features of this model include: (a) enhancing protection from the negative impact of adverse experiences such as parental conflict and divorce, and (b) facilitating the child’s mastery of healthy developmental milestones. CODIP is also based on a transitional-events model that emphasizes the stressful challenges and changes associated with marital disruption for families (Felner, Farber, & Primavera, 1983; Sandler, Braver, & Gensheimer, 2000). These stressors are posited to influence post-divorce adjustment through mediating factors such as children’s individual resources, effective coping strategies, accurate appraisals and attributions of divorce-related events, and the availability of social support.

CODIP is a school-based, selective preventive intervention program, built on the assumption that timely intervention for children of divorce can offer important short- and long-term benefits. The primary goals are to create a supportive group environment in which children can freely share experiences, establish common bonds, clarify misconceptions, and acquire skills that enhance their capacity to cope with the stressful changes that divorce often poses (Pedro-Carroll, 1997).

From our earliest experiences developing this program for children of different ages, it was clear that even an empirically derived, carefully developed intervention with a rigorous
research design would fail miserably if not embedded in play-based activities that have intrinsic appeal for children. Thus, CODIP began with an initial intervention for fourth to sixth grade suburban children of divorce which included semi-structured, interactive play-based activities geared to the developmental characteristics of 9- to 12-year-olds. The positive results of that early pilot (Pedro-Carroll & Cowen, 1985) led to subsequent adaptations of the program model for children of different ages and sociodemographic backgrounds. Four separate versions of the CODIP model have been developed for children of different ages: kindergarten and first grade; second and third; fourth through sixth, and seventh through eighth grade. Different play-based techniques have been developed to match the clinical profile and developmental needs of each age group, and to promote the specific objectives of the intervention. Semi-structured play is used extensively with younger children, while creative writing and activities reflecting mastery motivation are geared to older school age youth. Thus, each subsequent adaptation for an additional age group has been built on their age-related needs and play practices.

**Key Treatment Ingredients**

**The Group Model**

All CODIP programs use a group modality for several reasons. Although limited support services in the schools is one reason for doing so, there are more basic and important justifications. Parental divorce alters children’s lives profoundly. Despite record high divorce rates, many children of divorce feel alone and different as a result of their family circumstances. One important potential benefit of a group format is that it offers children support and comfort by virtue of sharing experiences and feelings with peers who have been through similar experiences, and learning that they are not alone at a time when it feels as if everything in their life is changing. The group format also provides natural opportunities for exchanging

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1 Copies of the CODIP manuals for different age groups are available by contacting the first author at Children’s Institute, 274 North Goodman Street, Suite D103, Rochester, NY 14607.
information on common divorce-related issues and for clarifying common misconceptions about divorce.

One of the most comforting aspects of group interaction comes from mutual support for shared experiences. Children who have gone through common stressful experiences are more credible to peers than those who have not had that experience. A child who fears, deep down, that he or she is responsible for the breakup of her parents’ marriage can find much comfort and relief from the words of a peer with exactly the same feelings – indeed, even more so than from the intellectual assurances of an adult. Furthermore, a group format provides the opportunity for children who are further along in the process of adjusting to divorce to serve as credible coping models for those in the early stages of adjusting to family changes.

Moreover, in CODIP’s later, structured, skill acquisition meetings, the group format offers children opportunities to learn about others’ efforts to solve problems, deal with anger, disengage from loyalty conflicts, and effectively manage day-to-day challenges. Thus, children learn from each other’s successes and setbacks. The group format also includes discussion and role-playing in an engaging and active format that provides opportunities for acquiring and practicing important coping skills.

*Group Leaders*

CODIP’s success depends on the commitment and clinical skills of group leaders. The group leader’s sensitivity and ability to establish a trusting environment, to encourage children’s involvement in group activities, and to express feelings all contribute to the development of a cohesive group. The leader’s ability to deal comfortably with emotionally laden issues sets a basic tone and climate for the group. CODIP groups are generally co-led, ideally by a male and female. The two leaders share task and process roles. This arrangement helps children to
observe firsthand a positive, cooperative, cross-gender adult relationship. And because most CODIP groups are mixed-gender groups, it also offers children a positive, same-sex adult role model. Having two leaders also facilitates responses to sensitive issues, nonverbal cues, and behavior management problems. What one leader may miss in the midst of group interaction, the other can address.

CODIP leaders are selected more for their interest, skills, and sensitivity than for training in any specific discipline. In practice, leaders have included psychologists, social workers, and nurses; guidance counselors; principals and teachers; graduate trainees in mental health fields; and a trained paraprofessional teamed with a mental health professional. Leaders have four to five 2-hour, weekly training sessions before the program begins, and 1 ½-hour-training/supervision meetings every other week while it is in process. The initial training sessions provide information about the impact of divorce on parents and children, age-related reactions of the target age group to parental divorce, factors that shape children’s adjustment to parental divorce over time, and group leadership and facilitation skills. Supervisory meetings review clinical and programmatic aspects of the prior week’s meeting(s), including things that went well and problems experienced; provide opportunities to problem solve and modify curriculum materials or management strategies; and preview the following week’s curriculum.

Developmental Factors

Despite individual differences, children’s age and developmental level appear to be the most salient factors shaping initial responses to marital disruption. Developmental stage profoundly influences a child’s dependence on parents and peers, perceptions of the family changes, as well as their coping and defensive strategies. Thus, CODIP’s structure (e.g., duration of sessions) and content (e.g., therapeutic approach) are tailored to the developmental
characteristics of the target population.

Structurally, group size, duration of the sessions, and length of the program are predicated on the developmental characteristics of the four age groups. For example, with older youngsters, one-hour group sessions over 12 to 14 weeks has worked effectively. By contrast, 45-minute weekly sessions with smaller groups (4 to 5) distributed over 12 to 16 weeks is more appropriate for younger children.

Program content is also tailored to variations in reactions that divorce predisposes in children of different ages. For example, issues of loyalty conflicts, anger, and feelings of stigma and isolation are more predominant responses among 9 to 12 year old youngsters; while intense sadness, confusion, guilt, and fears of abandonment are prominent among 6 to 8 year olds (Wallerstein & Kelly, 1980). Therefore, such differing clinical profiles indicate the need to shape the central themes and focal issues of interventions to the special attributes of particular age groups. The next section outlines how specific program objectives are translated into developmentally tailored, play-based activities for children.

Program Objectives with Different Age Groups

I. Foster a supportive group environment.

Social support is a fundamental underpinning of the CODIP group process. Contact with peers who have had similar experiences helps to reduce children’s feelings of isolation and promotes a sense of camaraderie and trust. Creating an atmosphere in which children can share experiences and feel safe that what they say will be respected and kept confidential is a major objective from the first session to the last.

Depending on the age range, different techniques are used within the group process to foster supportive interactions and a sense of belonging. In the first few sessions, fourth to sixth
grade students choose a name for their group and create a group banner and special symbol that remains in the room for the duration of the meetings. The process of choosing a name is often one that fosters an early sense of connectedness and common bonds among group members. The names children have selected for their groups reflect themes of support, solidarity and feelings about families including “Forever Family,” “The Confidential Group,” “Kids Helping Kids,” “K.I.C.S.*--*Kids Incorporated in Caring and Sharing,” and “Kids’ Union.”

Younger children (kindergarten through third grade) are introduced to the purpose of the group through "get acquainted" games and puppet play. Semi-structured puppet play is used extensively to promote program goals and objectives with young children. As discussed above, puppet play is a valuable displacement technique that helps children understand feelings and learn strategies for dealing with the many challenging aspects of their parents’ divorce (Kalter, 1990).

Thus, in the very first session with young children, after leaders and members have introduced themselves, a shy puppet hesitantly emerges, apprehensive and unsure about what to expect from the group. In our experience, young children love to be asked to help, so group leaders request their assistance in helping the puppet (who is their age, and whose parents are recently separated) to feel accepted and more comfortable with the group. They typically respond with suggestions (“Let’s tell him our names, and what we’ll be doing in our group”; "Let’s give him/her a name”) and reassurances (“I wasn’t sure what the group would be like so I sort of feel like he does”). As group discussion continues and members share common likes and dislikes, favorite games, foods and TV shows, the puppet also shares many of those interests and takes on the role of group mascot. Thus, when important topics such as confidentiality and coping skills are discussed, the puppet takes an active role in sharing feelings, problems, ideas
and solutions.

2. **Facilitate identification and appropriate expression of feelings.**

The stressful changes associated with parental divorce cause complex feelings that are difficult for children to identify and understand. Young children are especially vulnerable to being overwhelmed because of their limited cognitive understanding, verbal skills and coping strategies. Accordingly, an important program objective is to enhance children’s ability to identify and appropriately express a range of emotions. However, leaders must carefully balance the need for children to express their feelings while titrating the dose of emotionally laden material with more neutral experiences in a non-threatening, play-based format. Thus, group process is sequenced so that early sessions emphasize the universality, diversity and acceptance of all feelings before divorce-related issues are introduced.

A variety of play techniques are used to help children identify a range of emotions including the interactive use of books, pictures of facial expressions, feelings charades, a feelings telegram, and a feelings “grab bag” game. In this game, children take turns choosing cards depicting various emotions, and silently act out the emotion while group members guess the feeling and share a time when they too felt that way. The group puppet actively participates in this activity, sharing times when she/he has had a similar feeling or experience as a group member. An important element of this game involves helping children to learn techniques for self-soothing when they're distressed.

These games have multiple objectives, including helping to: 1) develop empathy through an awareness and sensitivity to nonverbal signs of how another person feels; 2) expand children’s “emotional vocabulary” with a label for a variety of emotions (e.g., frustrated, proud, embarrassed, excited, confused, loving); 3) promote children’s understanding of the universality
of emotions, e.g., “even the president has times when he feels afraid or worried;” 4) emphasize that all feelings are acceptable (“All feelings are OK, but all behaviors are not.”) Puppet play is used to convey the message that “Tenderheart” (the group puppet) is not bad if she feels angry, but it’s not OK for her to hit someone when she is angry; and 5) increase children’s awareness that feelings can change and learn healthy ways to help themselves feel better when they are upset.

Sometimes during the game, a reticent child may need support and encouragement from the group. When seven-year-old “Jenny” drew a “proud” card, she was baffled and unable to think of a time she felt that way. With the aid of supportive modeling by the leaders, group members (and the puppets) pointed out her strengths (e.g., good at drawing and math; being kind to others). “Jenny” beamed at these affirmations and commented that she was proud to be a part of the group.

3. Promote accurate understanding of divorce related concepts, and clarify misconceptions.

One of the tasks inherent in this objective is helping children separate their own worst divorce-related fears from reality. Young children are especially vulnerable to fears of abandonment, and may worry that if the marital bond could dissolve, they too might be left behind. Therefore, clarifying misconceptions is an important aspect of preventive interventions for children of divorce. Magical thinking, partially a function of young children’s egocentrism, also leaves them vulnerable to feelings of guilt and responsibility for restoration of the intact family. Hopes and wishes for reconciliation run high, as one child commented: “I pray every night that they won’t get a divorce.” Confusion and misconceptions relating to the reasons for the marital conflict include troublesome self-blame. “They broke up because of me… I could hear my name come up over and over when they fought.” Clarifying such damaging
misconceptions requires a process over time to increase the child’s ability to separate adult responsibilities from child concerns. Through structured puppet play and the interactive use of books, the concept is conveyed that *Divorce Is a Grown-up Problem* (Sinberg, 1978), and not one caused or fixed by children. “Daring Dinosaurs,” a board game developed specifically for CODIP, contains cards reflecting misconceptions that children often have about the reasons for family problems, with opportunities for group discussion and puppet play to clarify common misconceptions of self blame. (This game is described in more detail in objective 5.)

For many children in our groups, explaining an absent parent’s lack of involvement in their lives is a central issue. When children have infrequent contact with a parent, their search for explanations for the parent’s absence may lead them to internalize the belief that they are somehow defective, and not lovable enough. Through group discussion, puppet and doll play, and interactive use of books such as *Dinosaur’s Divorce* (Brown & Brown, 1986), the message is conveyed that sometimes parents feel too upset or guilty to stay in touch with their children, but that is in no way a reflection of the child’s worth. Group leaders actively guide group discussion and puppet play to increase children’s ability to attribute adult problems to external factors, rather than internal child attributes. The goal of these activities is to restore diminished self-esteem and break the link between a parent’s departure and other adult issues and the child’s fantasized unlovability.

4. *Teach relevant skills to enhance children’s competence and capacity to cope.*

Although the support and solidarity that comes from sharing common experiences is important for children, enhancing coping skills is an equally essential component of this intervention model. Training in prosocial skills such as problem solving, communicating effectively, dealing with anger, and asking for help and support is accomplished over a number
of sessions. A variety of games and play techniques are used to encourage practice, acquisition, and eventual generalization of skills.

Teaching coping skills helps to prepare group members to deal effectively with the multiple life changes that children of divorce are often expected to take in stride. Developing a repertoire of coping skills helps to reduce the stress and confusion inherent in the divorce process and enables children to gain control over aspects of a situation over which they initially may have felt helpless. A key element of social problem solving training involves helping children gain realistic perceptions of control: e.g., teaching children to differentiate between problems that they can and cannot control. That distinction is instrumental in helping children master the psychological task of disengaging from interparental conflicts, and redirecting their energies into age appropriate pursuits (Wallerstein, 1983). Coping skills training in a group context has the additional benefit of facilitating supportive, cohesive group interactions. Members are often eager to offer suggestions and feedback to peers. In turn, they are comforted by an awareness that they are not alone with their problems.

Interpersonal communication and problem solving skills are presented over several sessions using interactive games and activities to learn and practice new skills. Through games and puppet play, young children are drawn into discussions of problem scenarios and various solutions. They are taught to “stop and think” in these situations (e.g., “You want to watch your favorite show on TV, but your brother wants to watch something else. What can you do?”). In this way, they are eased naturally into learning relevant problem-solving skills, and applying them to personal problems. A team based “Tic-Tac-Toe” game helps children learn to generate alternative solutions, evaluate their consequences, and choose the most appropriate solutions to problems. Puppet play is used to depict common divorce-related problems such as loyalty
conflicts. Group members then actively participate in generating alternative solutions to help the puppets deal effectively with those problem scenarios. Play-based activities such as the “Red Light-Green Light Game” help children differentiate between solvable (green light) and unsolvable (red light) problems. When faced with an unsolvable (red light) problem, children are encouraged to disengage from that uncontrollable problem and spend their time instead on age-appropriate activities.

5. **Enhance children’s perceptions of self and family and reinforce coping skills.**

This final integrative unit emphasizes positive qualities of children and families. Children in the midst of stressful life changes often feel different and defective (i.e., “If I were a better kid, my parents would have stayed together”). Several self-esteem building exercises are used to highlight their positive qualities, including a “You’re a Special Person” activity. In this exercise, all children receive written feedback from peers and leaders about their unique qualities and special contributions to the group. Children enjoy this exercise; some keep their “special person” card long after the group ends.

Building children’s competencies and coping skills are so essential to the CODIP intervention that the board game, the “Daring Dinosaurs” (formerly called the “Kids Are Special People” game) was specially designed to foster children’s sense of self-efficacy and assess children’s progress in understanding divorce-related issues and developing skills. The game is one of several therapeutic techniques used in the program, designed to review feeling words and concepts, family and divorce-related issues, social problem solving, communication, and anger control skills, and to promote self-awareness and self-esteem.

The game cards ask questions about children’s thoughts and beliefs (e.g., “Do you believe you can make your parents get back together?”), their feelings (e.g., “How do children
feel when their parents fight?”), and to show ways to self-soothe when feeling upset (e.g., “Act like you are feeling lonely. Name two things that you could do to feel better.”). If a child cannot answer a question, other children or the group puppet is invited to help. The content of the cards covers most of the topics explored in previous sessions. However, to reflect the unique experience of individual groups, blank cards are included with the game. Leaders can write individualized cards to reflect problems, situations, or feelings specifically discussed in their groups. Leaders are encouraged to “stack the deck” so that the most relevant cards for the children in their group are placed on top.

To consolidate skills and reinforce key program objectives with older youngsters, a popular CODIP activity is the WKID-TV “Panel of Experts” on family changes. Children take turns as members of a panel of experts on divorce and field questions from the “audience” (i.e., the other group members). This activity: (a) underscores common problems of children dealing with divorce; (b) further clarifies misconceptions about divorce; (c) provides practice in solving personal problems; (d) highlights problems that can, and cannot, be controlled; (e) diversifies suggestions for coping with difficult problems; and (f) enhances children’s sense of competence and self-esteem by emphasizing the fact that they have indeed acquired skills for resolving problems and insights about divorcing families that can help others. Sample questions from this activity include “What are some things kids worry about when their parents separate?” and “My parents still fight even though they’re divorced; what can I do to solve this terrible problem?” Children offer spontaneous solutions to the problems posed, often with wit, wisdom, and understanding. A few examples include the following advice:

For Parents:

- Don’t give us everything we want just to get us to like you more than our other parent.
• Be honest with us. Tell us if you’re getting a divorce, but please, spare us the gory details.

• Don’t use us as bullets. Don’t fight in front of us. Don’t say, “Your Dad is an idiot.” Don’t ask us if Mom is dating.

• Let us know that it’s OK to love both of you. Don’t make us choose between the two of you.

• Let us know that you love us. Even if we act like we already know, tell us again.

For Other Kids:

• Just remember, it’s not your fault that your parents are splitting up, even if you did laugh when your Dad told that joke about your Mom.

• Find someone that you can trust to talk to. Sometimes you just need to let it all out.

• Remember that there are some things--like your parents’ divorce--that you can’t change. Spend your time on things that make you happy instead.

• If your parents start to date or get married again, it doesn’t mean they will stop loving you.

Replication and transportability

CODIP has been disseminated to over 500 schools around the world. Although CODIP is primarily school-based, with training and consultation, it is a transportable model that has been adapted successfully to other settings including mental health centers, family nurturing centers, private practitioners’ offices and court connected services for children. CODIP has also been translated into French and successfully implemented in Quebec, in a program called “Entramis” (Mireault, Drapreau, Faford, Lapointe, & Clotier, 1991). The model can be applied to different populations in urban, suburban and rural settings. A new holistic health approach combines CODIP services with medical care and well-child visits in urban pediatric clinics. Pediatric practitioners are often the first professionals to identify initial warning signs of stress in children that warrant additional supportive services and early intervention. As they discuss the child’s
health status during pediatric visits, they are trained to identify children who may benefit from a preventive intervention such as CODIP, and parents are referred to an educational program designed to help them reduce the stress of a breakup on their children (Pedro-Carroll, Nakhnikian, & Montes, 2001). Children’s support groups can be provided at clinics, neighborhood community centers, and after school-care programs. Program facilitators are trained to link families with additional supportive services, and remain available to families for supportive “booster sessions” after the program ends.

We find it useful to implement CODIP in new settings with a relatively brief meeting to describe the program to relevant mental health professionals. Because they are the people most likely to be conducting the program, their interest and commitment is an essential precondition for starting. In sites where professionals express interest in CODIP, follow-up meetings are held with administrators to obtain formal approval and establish preliminary contracts outlining how the program works.

After initial need and contract issues are resolved, recruiting program participants can begin. To that end, we have sent letters on school letterheads describing the program to all parents at the targeted grade levels. The letter includes a consent form. An informational meeting is held at the site for parents who wish to learn more about the program. There the coordinator describes the program’s goals, provides an overview of its activities, and responds to parent questions.

Occasionally, even with parental consent, a child may initially resist getting involved in CODIP. In such cases, we explain to the parent that the child’s hesitation is understandable because not all children know what to expect from the groups, and we request permission to meet with the child to explain how the program works. These steps are intended to give parents
and children an accurate picture of the program and thus to facilitate informed decisions about participating. Children are free to withdraw from the program at any time; however, less than 1% have ever chosen to do so. Before the program begins, leaders meet individually with all children to welcome them, to provide further information about the groups, and to answer their questions.

To qualify for CODIP, a child must: (a) be within the targeted age range, (b) have parents who at one time lived together and are now separated, (c) have written parental consent, and (d) be capable of functioning adequately in a group (i.e., show no evidence of serious aggressive behaviors or severe emotional problems that warrant more intensive services). These selection criteria are important. Sometimes there are pressures to include children who are not appropriate for the group. Including such children can be frustrating for all parties if managing the child’s inappropriate behavior, rather than the program’s central divorce-related objectives, becomes the major focus. In other words, CODIP is designed as a preventive intervention, not as intensive group therapy for serious emotional difficulties.

Outcome Evaluation

CODIP has been evaluated extensively to assess its effectiveness with children of different ages and sociodemographic backgrounds. Since its inception in 1982, eight separate studies have been conducted, including a two-year follow up documenting the program’s enduring benefits (Pedro-Carroll et al., 1999). Some of the key information and results are summarized in Tables 2 and 3, and a brief summary follows.

Research on the initial program with fourth- to sixth-grade suburban children, using a delayed treatment control group design, assessed CODIP’s efficacy on the children’s adjustment from four perspectives: parents, teachers, group leaders, and the children themselves. From all
four perspectives, program children, compared to matched controls randomly assigned to a
delayed treatment condition, improved significantly (Pedro-Carroll & Cowen, 1985). A
replication study with different group leaders and different schools confirmed these initial
findings (Pedro-Carroll, Cowen, Hightower, & Guare, 1986).

Encouraging results from those early studies promoted extension of CODIP to children of
different ages and sociodemographic backgrounds. These next steps included adaptations of
CODIP both for second- to third-grade and fourth-, fifth- and sixth-grade urban children.
Evaluations of these new programs confirmed the improvements in adjustment previously
reported for suburban samples (Alpert-Gillis et al., 1989; Pedro-Carroll et al., 1992). Overall,
these data, involving multiple input sources, demonstrated improved home and school
adjustment for CODIP children, reductions in their anxiety and divorce-related concerns, and
gains in their social competencies. Collectively, these studies demonstrated that the program
model could be modified effectively for young children and for low-income populations in
which divorce is but one of many stressors.

A further challenge for CODIP was to identify key program components and practices
that accounted for positive outcomes (Grych & Fincham, 1992). As noted earlier, CODIP rests
on two essential components: providing support and teaching coping skills. Others have also
found these components effective with children of divorce (Stolberg & Mahler, 1994). Sterling’s
(1986) evaluation of CODIP for second and third graders included a components analysis
assessing the effectiveness of a program with, and without, an emphasis on social problem
solving (SPS) and coping skills. Sterling found that the support alone (i.e., no SPS) condition
was less effective than the full program with a coping skills component. She also found that 16
weekly sessions for this group yielded more positive outcomes with young children than a twice
weekly, 8-week program format. Those results provided a useful foundation for the later adaptation of CODIP for very young (5 and 6 year old) children. Evaluation of the CODIP program for kindergarten to first-grade children again provided multisource evidence of the program’s effectiveness (Pedro-Carroll & Alpert-Gillis, 1997).

The positive findings cited above reflect children’s adjustment status when the program ended. Pedro-Carroll, Sutton, and Wyman (1999) assessed the stability of these outcomes over a 2-year follow-up period. New teachers, blind to children’s initial group status, rated CODIP children as having significantly fewer school problems and more competencies than comparison children. Parent interview data showed that their improvements at home and in school endured over the 2-year period. These results demonstrate that CODIP provided skills and benefits that enhanced children’s resilience and healthy adjustment over time.

An evaluation of a pilot CODIP program for seventh and eighth graders (Pedro-Carroll, Sutton, & Black, 1993) again reflected the perspectives of parents, leaders, and children. Although findings from this study are tempered by relatively small sample sizes, agreement about important gains for participants was again found across diverse perspectives. A further finding of special interest for this age group was the significant improvement in participants’ hopes and expectations for the future—a finding with implications for choices and decisions that shape their lives. Such self-views facilitate responsible decision making and the formation of trusting, enduring, satisfying relationships. In this context, Wyman, Cowen, Work, and Kerley (1993) found that the presence of positive future expectations among 10- to 12-year-old, highly stressed urban children related to resilient outcomes 3 years later. Such views functioned as a protective factor in reducing the negative effects of major life stressors.

Practitioners wishing to implement CODIP groups in a clinical setting could evaluate the
effectiveness of the intervention by utilizing many of the child and parent-focused measures in the studies described above, including assessments of children’s anxiety, coping skills, attitudes and beliefs about divorce, parent-child relationships, and other variables known to relate to children’s risk and resilience in the aftermath of parental divorce.

Conclusion

This chapter summarizes an empirically validated, play-based preventive intervention for children of divorce. Marital disruption is a well-documented stressor for families, affecting millions of children in this country. The risks that these stresses pose for children’s long-term adjustment are equally well established. However, long-term social and emotional difficulties are not inevitable outcomes. Much depends on the extent to which risk and protective factors influence children’s adjustment over time, and the availability of supportive scaffolding from the child’s family and environment.

Preventive interventions that incorporate support and competence enhancement hold promise for reducing the stress of a breakup on children and fostering their resilience and healthy development. The intervention model described here, the Children of Divorce Intervention Program, uses play as an integral component of the intervention model to foster a safe, trusting environment in which children can share experiences and acquire essential coping skills. Although it is primarily a school-based program, the play-based activities described in this chapter can be applied in individual and group work with children in various professional and community settings.

Program evaluation over the years has established a solid evidence base for CODIP’s effectiveness in reducing the stress of a breakup on children and enhancing their social, emotional, and school adjustment. In a time when millions of children are grappling with
stressful disruptions in family relationships, effective preventive interventions offer much needed support and the potential for fostering children’s resilience and healthy development.
References


<table>
<thead>
<tr>
<th>Individual Factors</th>
<th>Family Factors</th>
<th>Extrafamilial Factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Realistic appraisal of control</td>
<td>Protection from interparental conflict</td>
<td>Supportive relationship with positive adult models</td>
</tr>
<tr>
<td>Accurate attributions</td>
<td>Psychological well-being of parents</td>
<td>Support network: family, school and community</td>
</tr>
<tr>
<td>Active coping style</td>
<td>Solid, supportive parent-child relationships</td>
<td>Evidence-based preventive interventions providing support and skills training</td>
</tr>
<tr>
<td>Effective coping skills</td>
<td>Authoritative parenting; household stability and structure</td>
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Table 2
Overview of factors measured in outcome evaluation studies on CODIP

<table>
<thead>
<tr>
<th>Age, SES &amp; (citation)</th>
<th>Data source(s) &amp; timing</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Group leaders &amp; Children</td>
<td>Changes in protective factors: ↑ school-related and social competencies ↑ home adjustment (e.g., better communication, more able to express feelings, more age-appropriate behavior, and better able to deal with problem situations) ↑ adjustment to family changes ↑ group-based peer interaction ↑ acceptance and understanding of changes in their families (children)</td>
</tr>
<tr>
<td></td>
<td>Pre-post measurements</td>
<td>Changes in protective factors: ↑ home and school adjustment ↑ social competencies ↑ prosocial peer interactions</td>
</tr>
<tr>
<td>2nd &amp; 3rd graders (Sterling, 1986)</td>
<td>Pre-post measurements</td>
<td>Key components: • Support component alone without coping skills training not as effective • 16 weekly sessions more effective than twice a week for 8 weeks with young children</td>
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</tbody>
</table>
Table 2 – continued

Overview of factors measured in outcome evaluation studies on CODIP

<table>
<thead>
<tr>
<th>Age, SES group (citation)</th>
<th>Data source(s) &amp; timing</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kindergarten &amp; 1st graders (Pedro-Carroll &amp; Alpert-Gillis, 1997)</td>
<td>Teachers, Group leaders, Parents, Children, Pre-post measurements</td>
<td>Changes in risk factors: ↓ school-related problem behaviors (teachers) Changes in protective factors: ↑ school-related competencies ↑ accurate attributions for the divorce ↑ coping skills ↑ being able to talk about deal with divorce-related feelings ↑ getting along with peers ↑ ability to deal with feelings ↑ positive feelings about self and family</td>
</tr>
<tr>
<td>Kindergarten &amp; 1st graders (Pedro-Carroll, Sutton, and Wyman, 1999)</td>
<td>Teachers, Parents, Follow up at 2nd &amp; 3rd grade (2 years after program)</td>
<td>Gains had endured at 2 year follow-up compared to divorce-controls, including: Changes in risk factors: ↓ school problems ↓ worries about family ↓ visits to school health office Changes in protective factors: ↑ school competencies ↑ adjustment to family changes ↑ positive feelings about self and family ↑ coping skills ↑ ability to express feelings appropriately</td>
</tr>
</tbody>
</table>
Table 2 – continued

Overview of factors measured in outcome evaluation studies on CODIP

<table>
<thead>
<tr>
<th>Age, SES group (citation)</th>
<th>Data source(s) &amp; timing</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>7th &amp; 8th graders (Pedro-Carroll, Sutton, &amp; Black, 1993)</td>
<td>Parents Group leaders Participants Pre-post measurements</td>
<td>↑ overall adjustment ↑ ability to cope effectively with family changes ↑ ability to express feelings, manage anger, solve interpersonal problems and differentiate between controllable and uncontrollable problems ↑ strategies for disengaging from parent conflict and refocusing on age-appropriate activities ↑ friendship formation, anger control, communication effectiveness ↑ hopes and expectations for the future (for personal responsibility, interpersonal relationships, staying out of trouble, and having people care about them)</td>
</tr>
</tbody>
</table>
Table 3
Statistics on outcome evaluation studies on CODIP

<table>
<thead>
<tr>
<th>Study</th>
<th>Age/SES</th>
<th>Rater</th>
<th>Constructs measured</th>
<th>N/df</th>
<th>Effect size*</th>
<th>Relevant statistics**</th>
<th>p values</th>
</tr>
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<tbody>
<tr>
<td>Pedro-Carroll &amp; Cowen, 1985</td>
<td>4th, 5th &amp; 6th graders/ suburban</td>
<td>Teacher</td>
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<tr>
<td></td>
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<td>Perceived competence</td>
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<td></td>
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<td>Coping skills</td>
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<td>Pedro-Carroll, Cowen, Hightower, &amp; Guare, 1986</td>
<td>4th, 5th &amp; 6th graders/ suburban</td>
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<td>Behavior problems</td>
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*Effect sizes are for the experimental group compared to the control group (see article for statistics on experimental group compared to the non-divorce control group).
**F values reflect MANOVA’s with all three groups: experimental/in program group, children of divorce control group, children in non-divorced families control group.
Table 3 – continued

Statistics on outcome evaluation studies on CODIP

<table>
<thead>
<tr>
<th>Study</th>
<th>Age/SES</th>
<th>Rater</th>
<th>Constructs measured</th>
<th>N/df</th>
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<td>Coping skills</td>
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<td>Frequent nurse visits</td>
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*Effect sizes are for the experimental group compared to the control group (see original article for statistics on experimental group compared to the non-divorce control group).

**F values reflect MANOVA’s with all three groups: experimental/in program group, children of divorce control group, children in non-divorced families control group.

***There were significant pre-differences; i.e., at pre-test, the divorce control group was rated by teachers as higher functioning than the experimental group.

****Teachers were blind to condition.