

A Randomized Controlled Trial of Child-Informed Mediation

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With over 1 million children in the United States affected by parental divorce or separation each year, there is interest in interventions to mitigate the potential negative consequences of divorce on children. Family mediation has been widely heralded as a better solution than litigation; however, mediation does not work for all families. One proposed improvement involves bringing the child’s perspective to mediation, to motivate parents to create better agreements. In this randomized controlled trial, we compared new child-informed forms of mediation against a mediation-as-usual (MAU) control condition. In child-focused (CF) mediation, parents are presented with general information about children and divorce; in child-inclusive (CI) mediation, the child(ren) are interviewed and parents are provided with feedback about their specific case. Given the similar focus and goals of CF and CI, main study analyses compared a combined CF and CI group ($n = 47$) to 22 MAU cases. The CF and CI interventions had a positive effect on mediation outcomes relative to MAU (e.g., parents were more likely to report learning something useful, and mediators wanted their cases to be CF and CI). Cases in CF and CI reached comparable rates of agreement as cases in MAU, but CF and CI agreements included more parenting time for nonresidential parents, and were more likely to include provisions for coparental communication and provisions assumed to be better for child outcomes. Study results are encouraging and should provide support for wider program evaluation efforts to continue refining the CI and CF interventions.

Keywords: divorce, divorce mediation, child-focused mediation, child-inclusive mediation, randomized controlled trial

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In the United States, by age 10, nearly 30% of children will experience the divorce of their married parents, and roughly 65% of children whose parents are cohabiting will experience the separation of their parents (Manning, Smock, & Majumdar, 2004). Divorce and parental separation¹ are risk factors for children across a wide variety of outcomes. Meta-analyses have shown that children whose parents have divorced are more likely than children of continuously married parents to have externalizing problems, internalizing problems, and academic difficulties (Amato, 2000, 2010). These children also experience greater relationship instability themselves as adults (Amato, 2000, 2010). Child psychological adjustment after divorce is affected by many factors, including the child’s preexisting vulnerabilities, family structure and transitions, and financial troubles. Parental stress and psychological

difficulties, as well as new family processes (e.g., parental conflict, changing relationships between parents and children, parents’ remarriages and repartnering) also affect child adjustment (Hetherington, Bridges, & Insabella, 1998). Children adjust better to divorce when the level of ongoing conflict between parents is kept low, competent parenting from both parents is maintained, other important relationships with friends and family continue uninterrupted, and the reorganized family is economically viable (Kelly & Emery, 2003). Interparental conflict, in particular, may be the key determinant of poor child outcomes after divorce (Lansford, 2009). Thus, there is interest in interventions that buffer children from the negative effects of divorce and separation.

For decades, family court professionals have been concerned that the process of divorce litigation can exacerbate conflict between parents and spur parents to focus on their rights rather than their children’s needs (Carbonneau, 1986). Alternative dispute resolution methods are now often employed instead (Emery, Otto, & O’Donohue, 2005). A widely used alternative to litigation is mediation, in which parents work with a neutral, third-party mediator to negotiate details of parenting arrangements with each other (Milne, Folberg, & Salem, 2004).

Unfortunately, little methodologically sound research has been done on the effectiveness of mediation. Indeed, in a recent “meta-analysis” of studies comparing mediation to litigation (Shaw, 2010), only five studies were included. Based on this very limited research, the meta-analysis result was a small-to-medium effect

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¹ For the sake of brevity, we will use the term *divorce* to refer to both divorce and the separation of never married parents.

size in favor of mediation in the domains of parent satisfaction with the process and outcome, parental understanding of children's needs, and a better coparental relationship. Only a single published study has involved random assignment to mediation versus litigation for families in contested custody cases (Emery & Wyer, 1987). In that study of 71 families, fathers who mediated were more satisfied than fathers who litigated. Mediated cases also settled more quickly and were more likely to have joint legal custody arrangements. In a 12-year follow-up (Emery, Laumann-Billings, Waldron, Sbarra, & Dillon, 2001), relative to litigating families, the nonresidential parent in mediation families had increased contact with the child and increased involvement in decision-making. Overall, although the limited data suggest mediation may be useful, it is also recognized that improving the process of mediation may create better outcomes for children (Emery, Sbarra, & Grover, 2005).

Recently, two related interventions, designed to improve mediation outcomes for children, have been introduced in Australia: child-focused (CF) mediation and child-inclusive (CI) mediation (McIntosh, 2000; McIntosh, Wells, Smyth, & Long, 2008). Given their shared goals and focus, together, we have labeled CI and CF as *child-informed* mediation (Holtzworth-Munroe, Applegate, D'Onofrio, & Bates, 2010). Child-informed mediation approaches are designed to promote protective factors by motivating parents to consider the perspective of their children during mediation. This process ideally leads parents to reduce conflict, make more developmentally appropriate arrangements for their children, be more available emotionally, and keep children out of parental disagreements (McIntosh, 2007). As originally designed by McIntosh, CF was delivered by a trained mediator who gave parents general information about the effects of divorce and parental conflict on children, while helping parents to consider how it applied to their own children. CI was delivered by a mental health professional, called a child consultant, who directly interviewed the children and then shared information from that interview with the parents.² Child consultants communicated many of the same messages that were found in parent education programs for divorcing parents (Fackrell, Hawkins, & Kay, 2011), but did so using a more customized and interactive presentation.

CI and CF were compared by McIntosh et al. (2008). In a study of 181 Australian families, for the first six months all families received CF, and in the next six months all families received CI. Some families were screened out of the study if a parent did not possess "adequate ego maturity. . . (demonstrated intent to better manage the dispute, ability to perceive their children as having needs of their own, and, with support, willingness to consider children's views within the mediation)" (McIntosh et al., 2008, p. 108). One year postintervention, families in both conditions experienced improvements in family functioning (e.g., lower interparental conflict). Families receiving CI experienced additional benefits, relative to families in CF, such as higher levels of child-reported closeness to father, better mother-child relationships, and greater parental satisfaction with arrangements (McIntosh et al., 2008). A 4-year follow-up demonstrated continuing benefits (McIntosh, Long, & Wells, 2009). Only 10% of families in the study reported no contact between the nonresidential parent and the children, much lower than Australia's national average (at 28%). Parents in CF and CI reported lowered levels of acrimony and conflict, as well as higher levels of satisfaction with parenting arrangements. The CI

cases were also less likely to have had any legal actions regarding parenting and custody since mediation, and children in the CI group reported perceiving less interparental conflict and feeling less "caught in the middle" of their parents' disagreements.

These findings are very promising, but the McIntosh study had important methodological limitations (Holtzworth-Munroe et al., 2010). One is the lack of a mediation-as-usual (MAU) control group. If CF and CI do not show benefits relative to MAU, it is not cost-justified to put families through the extra time and expense or the involvement of an additional professional required in CF and CI. Also, it is not clear that CF or CI interventions will generalize to the United States from Australia, given differences in the cultures and the legal systems. Another important methodological limitation of the McIntosh study was the fact that participants who agreed to be in the study were not randomly assigned to condition. Also, the CF intervention was delivered by the mediators while the CI intervention was delivered by a specialized child consultant. Thus, differences between the conditions might be attributable to the addition of a child consultant rather than the intervention content per se.

Current Study

In the present study, our major interest was comparing child-informed mediation approaches (CI and CF) to MAU in the United States to examine the impact of adding an explicit focus on the child to the mediation process. In doing so, we also explored possible differences between CI and CF. Thus, the current study was a randomized controlled trial of child-informed mediation approaches relative to MAU. Of critical importance, families were randomly assigned to a mediation condition.

The methodology of the current study also deviated from that of McIntosh et al. (2008) by having child consultants (not mediators) present parent feedback in both the CF and the CI conditions, for several reasons. First, by having child consultants deliver information to parents in both CF and CI, the interventions were similar in terms of the amount of professional attention parents received. Also, having child consultants give parents feedback drew a clearer role distinction between mediators and child consultants. Mediator neutrality has been widely seen as an indispensable component of mediation (Taylor, 1997), and some have raised concerns about possible conflicts of interests if mediators step outside of a neutral role to take the position of the child during the mediation (Simpson, 1989). Unlike McIntosh et al. (2008), we did not screen out cases of the study based on the parents' level of reflective capacity, because we were interested in testing the effectiveness of differing forms of mediation among all parties seeking mediation. Also, most of the interventions were provided by students in the context of university training clinics.

The current study focused on the immediate outcomes of the differing mediation interventions: parent perceptions, mediator perceptions, and the content of agreements reached in mediation. We hypothesized that, relative to parents in the MAU condition, parents in the child-informed (CI and CF) interventions would be more satisfied with their mediation process and agreements; they

² The child consultant role in child-informed mediation may be viewed as being similar to the child specialist role in collaborative family law (Webb, 2008).

would also be more likely to report that they learned something from mediation and that focusing on their children was helpful. We hypothesized that mediators in child-informed mediation (CF and CI) would be satisfied with the parent feedback and mediation, continue to use any information raised in the parent feedback during the mediation, and prefer CF and CI to MAU. We hypothesized that child-informed mediation (CF and CI) cases would be more likely to reach agreements than MAU cases. For families reaching agreement, we hypothesized that, relative to MAU cases, agreements reached after CF and CI feedback would be more likely to specify joint legal or physical custody and to schedule more parenting time with the nonresidential parent. Additionally, we hypothesized that CF and CI agreements would be more likely to address coparental communication and conflict, include referrals to counseling and provisions for safety, and be rated as better serving the needs of the children.

Method

Participants

Families in mediation. Participants were parents who were mediating initial divorces (if married) or separations (if unmarried) or modifications of previous agreements through the Indiana University Maurer School of Law Viola J. Taliaferro Family and Children Mediation Clinic (hereinafter the Clinic). Parents were referred to the Clinic by judges from two south-central Indiana counties. The Clinic generally serves low-income families in need of pro bono legal services. If parents had children ages 5–17 years, those children also participated in the study. See Figure 1 for an enrollment flow diagram in accordance with the CONSORT 2010 Statement (Schulz, Altman, & Moher, 2010). Sixty-nine cases were included in the study analyses.

Mediators and child consultants. Over the course of the study, 43 mediators (42 law students and one faculty, the Clinic director) provided mediation services. Each mediator mediated an average of 2.88 study cases ($SD = 2.08$). Also, 14 child consultants (12 graduate students and two faculty members from the Indiana University Department of Psychological and Brain Sciences) were involved in the study. Each child consultant provided CI or CF parent feedback to an average of 6.29 cases ($SD = 4.36$).

All mediators completed a 40-hr mediator training course and were registered as domestic relations mediators in the State of Indiana. They then continued in a clinical law course, under the supervision of the Clinic director. Cases were generally mediated by two law student mediators, one who had been practicing as a mediator for at least one semester and one who was in his or her first semester of mediating. In CF and CI cases, one or two child consultants joined the mediators for approximately the first hour to talk with the parents. Graduate student child consultants were initially trained through workshops and were then enrolled in an ongoing clinical practicum course to obtain further training and supervision.

Measures

Parent outcomes form. At the conclusion of mediation, each parent reported on his or her experience in mediation. Five satisfaction items (i.e., satisfaction with the process, the mediators, the

child consultants, and with the agreement reached or with reaching no agreement) were assessed on 7-point Likert scales, ranging from 1 (*not at all satisfied*) to 7 (*very satisfied*). Parents also reported whether they learned anything in mediation and whether the other parent learned anything in mediation. Finally, parents were presented with a list of possible benefits of mediation, and were asked to check all of the aspects of mediation that had been helpful. This list of possible benefits is given in the Results section.

Mediator outcomes form. At the conclusion of mediation, mediators completed postmediation reports that were deidentified and used for research purposes only (i.e., they did not affect grading for any students). These items were answered on a 1–5 Likert scale, ranging from *very unsatisfied* to *very satisfied*. Mediators also reported on whether the child consultants' information about the children continued to be discussed during the mediation, with ratings from 1 (*not at all*) to 5 (*very often*). Mediators also answered the question "How well did you think the assigned condition (CI, CF, or MAU) worked for this case?" on a 3-point scale of *very well*, *neutral*, or *not well*. Finally, mediators reported whether the parents expressed concerns about mediator impartiality, answered as a yes or no question.

Mediation results (Was an agreement reached?). The results of the mediation were coded from a document in the mediation case files on which the mediator reports the outcome of the mediation to the court. It was possible for parties to reach a full agreement (e.g., settle all issues they had wanted to discuss), a partial agreement (e.g., settle some of the issues they had wanted to discuss but return to court to settle the rest), or no agreement (e.g., settle none of the issues in their mediation and instead return to court).

Content of mediation agreements. For parties reaching either full or partial agreement, their mediation agreements were coded for content, adapting a coding system previously developed for use at this Clinic (Putz, Ballard, Arany, Applegate, & Holtzworth-Munroe, 2012). Agreements were coded for information, including legal and physical custody, parenting time, and child support. Coparent communication, including aspirational language about coparental communication (such as "parents agree to maintain a business-like relationship"), was also coded. In addition, referrals to counseling and provisions for child safety were coded. Some miscellaneous provisions were coded (e.g., agreement to return to mediation in the future, addressing new partners, aspirational language about parent–child relationships). Agreements were also rated on "global" codes. One global code assessed levels of child-related rationales stated in the entire agreement (e.g., "for [child's] benefit we agree to develop a consistent routine and communicate with child at an age appropriate level"). Another global code assessed the likelihood of the agreement, taken as a whole, facilitating a positive coparenting relationship (e.g., provisions for communication such as "parents agree to exchange important information about [child] once per week by phone"). A final global code assessed the likelihood of the entire agreement facilitating child adjustment (e.g., keeping conflict low, parents "taking it slow" with new romantic partners, young children seeing both parents frequently).

The coding system included codes that captured whether an issue was addressed (e.g., Did the agreement address legal custody?). These items were coded for all mediation agreements. If

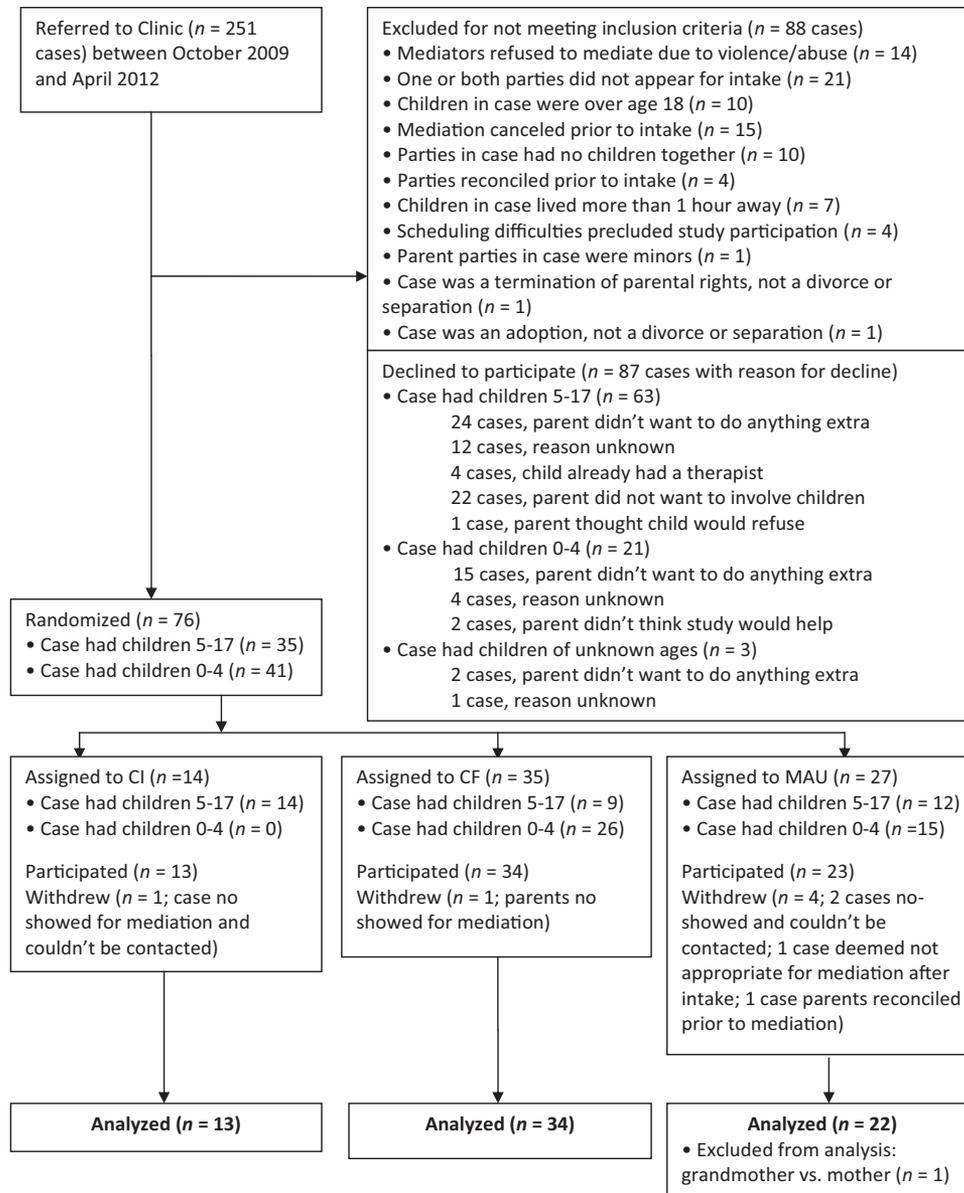


Figure 1. Enrollment flow diagram.

the agreement did address a topic, then agreements were coded for further detail in a manner appropriate for that question (e.g., for parties who specified legal custody in the agreement, the coder went on to code how they did so—joint legal custody, sole legal custody, or some other arrangement). The specific arrangements could only be coded if the parties had addressed the topic in the agreement.³

From the 69 cases in the study, 57 agreements were available for content coding (45 full agreements and 12 partial agreements). All agreements were coded by a trained law student mediator or a psychology graduate student. For purposes of determining reliability, 20 agreements were coded by both coders.⁴ Across codes with categorical data (e.g., Who gets legal custody?), the average kappa was 0.89 (range: 0.64–1.00) and the average percent agreement was 97%

(range: 80–100%). Across all codes with continuous data (e.g., How much child support was paid?), the average intraclass correlation was 0.90 (range: 0.56–1.00). For the agreements coded by both coders, disagreements were settled by consensus of the coders.

Individual demographics. Each parent completed a basic demographics form, reporting age, ethnicity and race, education, employment, yearly income, and number of divorces.

³ The coding system is available from the authors (holtzwor@indiana.edu).

⁴ Reliability data for all codes are available from the authors (holtzwor@indiana.edu).

Family characteristics. Each parent completed a questionnaire about their past and current family structure, including length of time in their relationship with the other parent, number and ages of children, and presence of a new partner.

Case characteristics. Data were gathered from the case file to determine whether the case was a divorce case (parents had been married) or a paternity case (parents were never married). In divorce cases, it was also noted whether the case was an initial dissolution (creating arrangements so the divorce could be granted) or a modification of dissolution (returning to mediation after divorce in order to modify arrangements made at the time of the divorce).

Procedures

Intake day. Parties attended an intake appointment approximately two weeks before their mediation. Each parent had been mailed a description of the study and consent form prior to intake. Rarely, cases referred to the Clinic were found to be ineligible to mediate if there was a conflict of interest (e.g., a party had received legal services from another clinic or person affiliated with the law school) or if the parties had a history of severe intimate partner violence. If the case was deemed by mediators to be eligible for mediation and if the case fit inclusion criteria for the research study, each parent was approached individually by a child consultant to be invited to participate in the study. See Figure 1 for various reasons that cases were not included in the study.

If both parents independently consented to study participation, the case was randomly assigned to an intervention condition based on the age(s) of the child(ren). If the case involved any children between the ages of 5 and 17 years, the parents were eligible to be assigned to all three study conditions—CI, CF, or MAU—with a case having a one-third chance of being assigned to each condition. Parents with younger children only (age range: 0–4 years) were eligible for only CF or MAU, because children under the age 5 may have had difficulties completing child interviews and thus could not participate in CI. For parents with younger children, the CF condition was more heavily weighted in the randomization such that they had a two-thirds chance of assignment to CF and a one-third chance of assignment to MAU; this was done to enhance training opportunities for the graduate student child consultants. Mediators and child consultants were assigned to cases in advance of the intake, based on schedule availability, and were therefore only in the study themselves if the parties in the case agreed to study participation.

After being assigned to a mediation condition, each parent separately completed a research assessment and was compensated \$35. If the case was assigned to CI, the child consultant also conducted a 20- to 30-min developmental history with each parent, separately, to gather information to prepare for the child interview. The developmental history focused on each child's development, understanding of the separation, and strengths and difficulties. In both CF and CI cases, child consultants met with mediators to discuss the case and review the case file that provided a history of the dispute.

Child interviews. In CI cases, the children (age range: 5–17 years) participated in a child interview, which took place between intake and mediation, and was held at the psychology department. These interviews took approximately one hour, and were completed by child consultants. Children assented to the child interview, were informed that the child consultant would make sure that the child agreed to what information the consultant would share

with their parents, and were compensated with a \$10 gift card. The child interview was designed to assess the child's experience of the parents' separation and to gather information in a manner that was therapeutic to the child (McIntosh et al., 2008). Depending on the age and comfort level of the child, the child interview included verbal questions, playing with dolls and doll houses, drawings, completion of story stems, and use of other interactive materials as appropriate for the case. The sessions were video recorded to facilitate supervision of the child consultant and case preparation, but the video recording was never shown to parents or mediators. The parent who brought a child in for an interview was compensated \$20.

Parent feedback and mediation. Parents returned to the Clinic for their mediation session. In MAU cases, the child consultant was not present, and the parents and mediators immediately began the negotiation phase of mediation. In CF or CI mediation, the session began with the child consultants providing parent feedback. Usually, at least part of the parent feedback was conducted with the parents in the same room, followed by individual meetings with each parent. Parent feedback averaged 1.35 hours ($SD = 0.44$) in CF and 1.46 hours ($SD = 0.40$) in CI; these times did not differ significantly, $F(1, 45) = 0.61, p = .44$.

Parent feedback generally consisted of the following stages. First, child consultants reminded parents of their role in the process (e.g., to provide helpful information about children and divorce). Then the child consultant engaged the parents in a discussion to "bring the child into the room." For example, in CF cases, this might involve looking at pictures of the child and asking parents to describe their child and their future hopes for their child. In CI cases, the child consultant gave an overview of the child interview that had been conducted. Next, the child consultant discussed a few main issues that would be helpful for the parents to consider during the mediation process. The issues to discuss were chosen in advance by child consultants, in consultation with mediators. In both CF and CI, the topics chosen were based on the research literature about improving child adjustment to divorce and on information the child consultant had gathered about the family and child. These messages were tailored to the individual case, but nearly all parent feedback sessions included information about the impact of interparental conflict on children and the need to develop a civil coparenting relationship and stronger parenting alliance. Examples of other messages include the need for the children to have a strong relationship with each parent and the value of quality versus quantity of time with the child. When appropriate, messages also included the needs of young children to see parents frequently, the needs of older children to spend time with peers, and the need for a safe and secure household. Examples of messages often delivered to parents individually included discussions about the role of new partners or substance abuse issues. In discussing these messages, CF parent feedback relied on the general research on the effects of divorce on children while also considering how the research fit the particular children and family being discussed. CI parent feedback was primarily framed in terms of what the child consultant heard from the child during the child interview.

After parent feedback concluded, child consultants left and parents and mediators started the negotiation phase of mediation. Parents could mediate parenting plans and financial arrangements, depending on the needs of their case. Of the 138 parents in the study, 107 were pro se. For the 31 parents who had legal repre-

sentation, 29 had their attorneys physically present during the feedback and negotiation phases of the mediation. The other two parents had their attorneys available by telephone for consultation as needed. In all conditions, the negotiation phase usually concluded on the same day, although sometimes parents returned for additional sessions. Duration of mediation negotiations averaged 4.60 hours ($SD = 2.16$) in MAU, 6.38 hours ($SD = 2.91$) in CF, and 8.09 hours ($SD = 3.47$) in CI. These times differed significantly, $F(2, 65) = 6.52, p = .003$. A post hoc Tukey's test showed that mediation duration differed significantly between CI and MAU, but not between MAU and CF or CF and CI.

When mediation negotiations ended, parents completed the parent outcomes form. Parents were each compensated \$30 for completing this form. Mediators completed the mediator outcomes form. If parties reached a partial or full agreement in mediation, the content of those mediation agreements were later coded by graduate-level research staff, as described above in the content of mediation agreements subsection.

Data Analysis

Data were analyzed in Mplus. The analyses accounted for the clustered nature of the data (e.g., mother's and father's reports from the same family) by using robust standard errors. The analyses also used full information maximum likelihood methods of estimation (a method that estimates missing values in data) so that all of the raw data could be analyzed. This had the advantage of including information from people with missing values (Schafer & Graham, 2002). Continuous variables were analyzed with linear regression analyses, and categorical variables were analyzed with logistic regression analyses.

Data were analyzed by comparing a combined group of CI and CF interventions to cases in MAU. Our primary concern was to examine whether a child-informed (CF or CI) approach to mediation would lead to different outcomes than MAU. Also, combining CF and CI maximized statistical power, given relatively small sample sizes. In the same analysis, for exploratory reasons and to more directly replicate the McIntosh et al. (2008) study, CI was compared to CF. Where appropriate in all analyses, if mother and father data were separable, parents were compared to each other as well.

Results

General Presentation of the Results

In most tables, means and standard deviations are presented separately for mothers and fathers in each intervention condition

and for the CF/CI combined (or child-informed mediation) group. Some variables (e.g., coded content of the mediation agreement) are at the case level, so there is no separate information for mothers and fathers. When data were continuous, results of the comparisons are given as estimated differences with the 95% confidence interval of that estimate. When data were categorical, results of the comparisons are given as odds ratios with the 95% confidence interval of the odds ratios. For both types of data, p values are also given. In the tables, *parent* refers to differences between mothers and fathers; these differences are not discussed in the text. Group differences are also indicated (e.g., CF and CI vs. MAU refers to the results comparing the CF and CI cases as one group versus the MAU cases); we note statistically significant group differences in the text.

Demographics and Family and Case Characteristics

We compared the groups in each intervention condition (see the supplemental materials, Table A). Parents in cases across the intervention conditions generally did not differ with respect to demographics: age, education, income, duration of relationship, duration of separation, number of times divorced, number of children, age of oldest child, race and ethnicity, employment, presence of new partner, attorney representation, or type of divorce. There were exceptions, as anticipated, in comparisons of the CI group to the other groups, because CI cases had to have children age 5 or older assigned to CI. CI parents were older, reported longer relationship durations, and reported an older age of their oldest child relative to CF and MAU parents.

Outcome Measures: Agreement Rates

Contrary to the hypothesis, there were no significant differences across conditions in rates of agreement, but note the high rate of some level of agreement (80–85%) in all three intervention conditions. Agreement rate data are in Table 1.

Parent Satisfaction and Self-Reported Outcomes

Contrary to hypotheses, no differences between CF/CI and MAU reached statistical significance for satisfaction ratings. Comparing CF and CI, there were no group or parent differences in satisfaction with the child consultants who provided their parent feedback. Data are presented in Table 2.

As seen in Table 3, and supporting hypotheses, parents in the combined CF/CI group were more likely than parents in MAU to report learning something in mediation and to report that the other parent learned something.

Table 1
Agreement Rates

Level of agreement	Did the case reach agreement?				Odds ratio [confidence interval], p value
	MAU n (%)	CF/CI n (%)	CF n (%)	CI n (%)	
Full ($n = 45$)	14 (63.6)	31 (66.0)	22 (64.7)	9 (69.2)	CF/CI vs. MAU: 0.001 [−0.13, 0.15], $p = .98$ CF vs. CI: −0.03 [−0.28, 0.21], $p = .79$
Partial ($n = 12$)	5 (22.7)	7 (14.9)	5 (14.7)	2 (15.4)	
None ($n = 12$)	3 (13.6)	9 (19.1)	7 (20.6)	2 (15.4)	

Note. No differences across the interventions were found when full and partial were collapsed into one category and compared to reaching no agreement. MAU = mediation-as-usual; CF = child-focused; CI = child-inclusive.

Table 2
Parent Satisfaction

Measure		MAU	CF/CI	CF	CI	Estimate [95% confidence interval], <i>p</i> value (all cases)
		(<i>n</i> = 22) <i>M</i> (<i>SD</i>)	(<i>n</i> = 47) <i>M</i> (<i>SD</i>)	(<i>n</i> = 34) <i>M</i> (<i>SD</i>)	(<i>n</i> = 13) <i>M</i> (<i>SD</i>)	
Satisfaction with Process	Mother (<i>n</i> = 67)	5.62 (1.75)	5.78 (1.67)	5.52 (1.82)	6.46 (0.97)	Parent: -0.20 [-0.61, 0.21], <i>p</i> = .34 CF/CI vs. MAU: -0.08 [-0.31, 0.15], <i>p</i> = .50 CF vs. CI: 0.36 [-0.01, 0.70], <i>p</i> = .06
	Father (<i>n</i> = 66)	5.53 (1.47)	5.53 (1.59)	5.41 (1.64)	5.85 (1.46)	
Satisfaction with mediators	Mother (<i>n</i> = 67)	6.48 (0.87)	6.28 (1.82)	6.18 (1.90)	6.54 (1.66)	Parent: 0.02 [-0.43, 0.48], <i>p</i> = .92 CF/CI vs. MAU: -0.02 [-0.16, 0.13], <i>p</i> = .82 CF vs. CI: 0.19 [-0.14, 0.52], <i>p</i> = .26
	Father (<i>n</i> = 66)	6.26 (1.2)	6.40 (1.17)	6.29 (1.34)	6.69 (0.48)	
Satisfaction with child consultants	Mother (<i>n</i> = 42)	NA	NA	6.31 (1.07)	6.54 (1.66)	Parent: -0.27 [-0.83, 0.29], <i>p</i> = .34 CF vs. CI: 0.12 [-0.19, 0.43], <i>p</i> = .46
	Father (<i>n</i> = 39)	NA	NA	6.04 (1.29)	6.27 (1.01)	
Satisfaction with agreement	Mother (<i>n</i> = 56)	5.00 (1.94)	5.87 (0.99)	5.70 (1.03)	6.27 (0.79)	Parent: 0.15 [-0.23, 0.54], <i>p</i> = .44 CF/CI vs. MAU: -0.13 [-0.37, 0.11], <i>p</i> = .28 CF vs. CI: 0.20 [-0.06, 0.45], <i>p</i> = .13
	Father (<i>n</i> = 55)	5.94 (1.35)	5.66 (1.19)	5.59 (1.28)	5.82 (0.98)	
Satisfaction with not reaching agreement	Mother (<i>n</i> = 10)	2.33 (1.33)	1.57 (1.13)	1.80 (1.30)	1.00 (0.00)	NA: too few cases to analyze
	Father (<i>n</i> = 9)	1.50 (0.71)	2.71 (1.60)	2.80 (1.64)	2.50 (2.12)	

Note. MAU = mediation-as-usual; CF = child-focused; CI = child-inclusive; NA = not available.

When presented with a checklist of aspects of mediation that could have been helpful (see Supplemental Materials, Table B), relative to parents in the MAU condition, parents in the CF/CI group were more likely to report that a helpful aspect of the mediation was getting information on the children. Parents in the CI group were more likely than parents in the CF group to report that hearing about their own children was a helpful aspect of mediation. The same list of items was presented for parents to select the *one* thing that was most useful or important about the mediation. In MAU, the most common answer for mothers (endorsed by 25%) was being able to talk and discuss concerns, and for fathers (23.5%), it was focusing on the children. The most common answer for CF and CI mothers (31.8%) and fathers (37.8%) was focusing on the children.

Mediator Outcome Data

Mediators were more satisfied at a trend level (CF/CI vs. MAU: -0.14 [-0.30, 0.30], *p* = .10; CF vs. CI: -0.12 [-0.40, 0.11],

p = .30) with their mediations in CF/CI cases ($M_{CF/CI} = 4.37$, $SD = 0.71$; $M_{CF} = 4.44$, $SD = 0.68$; $M_{CI} = 4/19$, $SD = 0.78$) than MAU cases ($M = 3.90$, $SD = 1.00$). Although no comparison with MAU was possible (because there was no parent feedback in MAU), mediator ratings of satisfaction with the parent feedback sessions were generally high in both the CF ($M = 4.18$, $SD = 0.77$) and the CI ($M = 4.33$, $SD = 0.65$) interventions.

Mediators generally reported thinking CI worked best for their cases, followed by CF (see Table 4). Mediators were mostly neutral as to whether MAU worked well, but, in 39% of the MAU cases, mediators would have preferred a different condition.

Mediators were asked if the child consultants' information about the children continued to be discussed during the mediation negotiations. Only four of 60 mediators in CF reported "not at all," and none of 26 mediators in CI reported "not at all." The average rating was 3.39 (0.92) in CF and 4.00 (0.76) in CI,

Table 3
Parent Report of Learning Anything (Self or Other Parent)

Measure		MAU	CF/CI	CF	CI	Odds ratio [confidence interval], <i>p</i> value
		<i>n</i> (%)	<i>n</i> (%)	<i>n</i> (%)	<i>n</i> (%)	
Anything helpful you learned? (% reporting yes)	Mother (<i>n</i> = 65)	7 (35.0)	30 (66.7)	22 (68.8)	8 (61.5)	Parent: 0.60 [0.34, 1.05], <i>p</i> = .08 CF/CI vs. MAU: 0.66 [0.48, 0.91], <i>p</i> = .01 CF vs. CI: 0.88 [0.51, 1.51], <i>p</i> = .64
	Father (<i>n</i> = 64)	4 (23.5)	26 (55.3)	19 (55.9)	7 (53.8)	
Anything helpful the other parent learned? (% reporting yes)	Mother (<i>n</i> = 39)	5 (38.5)	17 (65.4)	11 (57.9)	6 (85.7)	Parent: 0.25 [0.10, 0.59], <i>p</i> = .002 CF/CI vs. MAU: 0.59 [0.41, 0.86], <i>p</i> = .006 CF vs. CI: 1.86 [0.83, 4.19], <i>p</i> = .13
	Father (<i>n</i> = 47)	1 (7.1)	11 (33.3)	6 (24.0)	5 (62.5)	

Note. MAU = mediation-as-usual; CF = child-focused; CI = child-inclusive.

Table 4
Mediators Report of Utility of Case Assignment

Measure	How well did you think the assigned condition worked for this case?		
	Very well <i>n</i> (%)	Neutral <i>n</i> (%)	Not well <i>n</i> (%)
Mediators in MAU (<i>n</i> = 36)	5 (13.8)	17 (47.2)	14 ^a (38.9)
Mediators in CF (<i>n</i> = 63)	33 (52.4)	23 (36.5)	7 ^b (11.1)
Mediators in CI (<i>n</i> = 26)	20 (76.9)	5 (19.2)	1 ^c (3.8)

Note. MAU = mediation-as-usual; CF = child-focused; CI = child-inclusive.

^a Of the mediators who reported that MAU did not work well and expressed a preference, five wished for the mediation to be in the CI condition and seven wished for mediation to be in the CF condition. ^b Of the mediators who reported that CF did not work well, none specified what condition they would have wanted instead. ^c The mediator who thought that CI did not work well thought the case would have been better as a MAU because “the parents were stuck in their ways.”

which indicates that feedback content continued to be discussed in mediation “sometimes” to “often.” The difference between CF and CI was statistically significant, $F(1, 43) = 4.47, p = .04$.

Mediator Impartiality

Across all cases in the study, in only one case did mediators indicate that they believed the parents had any concerns about mediator impartiality.⁵

Content of Mediation Agreements

Descriptive data for all codes are given in Table C of the Supplemental Materials. Where data were sufficient (i.e., no cells with 0 or 100%), group difference across the interventions were also analyzed. Most cases addressed legal custody, with joint legal custody being the most common arrangement (64.3% of MAU cases and 75.0% of CF and CI cases). Most agreements addressed physical custody, with mother given sole/primary custody in 92.9% of MAU cases and in 61.5% of CF and CI cases. Nearly all cases addressed parenting time, with parenting time usually being specified for the father (i.e., usually the nonresidential parent). CF and CI cases agreed to more parenting time for the nonresidential parent on weekdays, weeknights, and weekend nights than did cases in MAU. There was no difference in the number of weekend days across conditions (most families chose to alternate weekends).

Regarding provisions about coparental communication and conflict, parents in CF and CI cases were more likely than parents in MAU cases to address communication between parents. CF and CI agreements included more aspirational language about coparental communication, were more likely to agree not to disparage or insult each other, and were more likely to prohibit fighting or conflict in their relationship. Between one third and one half of cases addressed child support; this did not differ significantly across conditions.⁶ Fathers generally paid child support. There was no difference in the amount of child support paid per week across the conditions.

Referrals to counseling were uncommon and did not differ across intervention groups. Safety provisions were likewise uncommon, and only one case had a court-appointed special advocate or a guardian ad litem. In the miscellaneous provi-

sions, cases split fairly evenly on whether provisions were included for returning to mediation. Agreements rarely addressed the presence of new partners, but CI cases were more likely to do so than CF cases (CF and CI did not differ from MAU on this item). Parents in CF and CI cases were more likely to include aspirational language about the importance of parent-child relationships than parents in MAU cases. Cases in CF and CI groups created longer mediation agreements, in number of pages, than cases in MAU; we included this count as an indirect measure of agreement complexity.

On the global codes, relative to MAU cases, CF and CI cases were judged to include more child-related rationales, and CI cases had more rationales than CF cases as well. CF and CI cases were judged to include more provisions to improve the coparental relationship and to facilitate child adjustment to divorce compared to MAU cases.

Discussion

The results of this study provide evidence that child-informed mediation interventions, designed to include the child’s perspective and to motivate parents to focus on their children’s needs, are liked and are perceived as helpful by parents and mediators. They result in mediation agreements that are judged as being more likely than MAU agreements to facilitate positive child adjustment to divorce.

Contrary to our hypotheses, no differences were found in mediation party satisfaction levels across all conditions, possibly because satisfaction was generally high, as found in previous research at this Clinic (Pettersen, Ballard, Putz, & Holtzworth-Munroe, 2010). Mediators tended to be more satisfied with CF and CI than MAU and were satisfied with CI and CF parent feedback sessions. Furthermore, mediators usually thought that CF and CI mediations worked well for their cases, rarely thought that CF and

⁵ This was a child-focused mediation case. The mediators both reported that the father accused the mediators of not being impartial, that the accusation did not appear to have anything to do with the participation of a child consultant, and that they believed the father was attempting to manipulate the mediation process.

⁶ If a parent was in arrears in paying child support, they were often not legally allowed to include child support provisions in their mediation agreement.

CI was not helpful, and often wanted their MAU cases to be assigned to CF or CI. Anecdotally, mediators would let child consultants know that they were pleased child consultant could deliver messages to parents that mediators, as neutral parties, did not feel comfortable delivering. Another possible reason for approval of CF and CI was that parents in CI and CF were more likely than parties in MAU to report that they and their partners learned something helpful. Parents in the CI and CF intervention groups were more likely than parents in MAU to endorse that getting information about their children and hearing about their children was helpful. And mediators reported that the parent feedback information continued to be used in the negotiation phase of the mediation process. Because mediations were not observed for research purposes, it is not known whether feedback information continued to be used in negotiations because of how mediators behaved or because of parents choosing to address those topics again. Either would be acceptable from a child-informed mediation perspective.

Of import, these gains were realized without negatively affecting perception of other important aspects of mediation, such as the process being fair, being able to discuss concerns, feeling supported, and having neutral mediators (as reported by parents and mediators). One potential concern about a child consultant offering advice to parents during the mediation process was that parents may have perceived that mediators were aligned with the child consultant and were therefore not neutral. That does not appear to have happened.

Cases in CF and CI and cases in MAU were equally like to reach agreement in mediation, contrary to our hypothesis. This may have occurred because the small percentage of families not reaching agreement may have been in greater conflict and needed much more assistance than the additional hour or so of child consultant time. Another possibility is that child consultant feedback “stirred up” more issues for consideration, helping some families to settle and complicating negotiations for others.

However, cases receiving the CI and CF interventions created mediation agreements that differed in important ways from cases in the MAU condition. Parents in CF and CI agreed to more weekdays, weeknights, and weekend nights for the nonresidential parent, increasing the overall amount of time spent between the nonresidential parent and children. Although contact alone does not substantially affect child outcomes, it is necessary to have sufficient contact between parent and child for the nonresidential parent to feel emotionally close and to engage in authoritative parenting, both of which improve child outcomes (Amato & Gilbreth, 1999). Also, when asked to reflect on their childhoods, young adults have generally reported wishing they had more time with the nonresidential parent (Fabricius & Hall, 2000). Interventions such as CF and CI, which provide more time for the child’s relationship with the nonresidential parent, may therefore improve child outcomes and alleviate child distress at losing a parent to divorce or separation.

Because conflict between parents is one of the strongest predictors of child outcomes following divorce (Kelly & Emery, 2003; Lansford, 2009), it was heartening to see that parents in CF and CI cases were more likely to address coparental communication in their agreements than parents in MAU. They made agreements that included more aspirational language

about coparental communication, often incorporating ideas from the child consultants’ feedback, such as maintaining a “business-like relationship” or only communicating in particular ways (e.g., agreeing to only communicate by text message). Parents in CF and CI were also more likely to agree not to fight or insult each other. Keeping conflict low was an idea addressed in almost all feedback sessions, and that idea appears to have been reflected in the mediation agreements.

Further evidence for the difference in mediation agreements between MAU and CF/CI cases comes from the global ratings of the agreements. CF and CI cases included more child-related rationales for their provisions, possibly indicating that parents gave more thought as to why they should make the arrangements they were making. The provisions in the mediation agreements of CF and CI cases, if followed as written, were also judged to be more likely to facilitate a positive coparental relationship (e.g., agreeing not to fight) and to facilitate child adjustment to divorce (e.g., frequent contact with the nonresidential parent).

Certain kinds of mediation agreement provisions may have been helpful to child adjustment, but were rare in all agreements and not more frequent in CF and CI cases. These provisions include safety provisions and counseling referrals. These findings are consistent with prior research at this Clinic, and other clinics, that parents usually do not choose to include such provisions in their mediation agreements (Putz et al., 2012; Beck, Walsh, & Weston, 2009).

One methodological strength of the current study was the presence of a meaningful control condition (MAU). Prior research on the CF and CI interventions did not employ an MAU control condition, so comparison was only possible between the two child-oriented intervention conditions. It is unknown in the McIntosh et al. (2008) study whether CF and CI were improvements over mediation without the child-specific components, an important question to answer because of the extra time and resources involved in implementing child-informed approaches. The present findings suggest the benefits of child-informed mediation over MAU. The issue of meaningful comparisons was further confounded in McIntosh’s study by having the mediators deliver the CF intervention and a child consultant deliver CI. This means that the extra time and attention from the child consultant in CI alone could have caused the differences between CF and CI in Australia. In the present study, child consultants delivered the parent feedback in both CF and CI, and there were few differences between the CF and the CI conditions. However, some of the lack of differences between CF and CI in the present study could be due to the use of student child consultants (and mediators), because they have less impact than seasoned professionals. The lack of differences between CF and CI might also be due to limited statistical power, given our small CI sample. Thus, more research will be necessary to determine if there truly are incremental benefits to CI over CF that justify the extra time and effort of conducting child interviews.

Another primary strength of the current study was a design that included random assignment to intervention conditions. Rare in research in family law, random assignment is the criterion standard for intervention studies, because it allows researchers to draw a causal relationship between intervention

conditions and outcomes (Holtzworth-Munroe, Applegate, D'Onofrio, & Bates, 2009). Randomization worked fairly well to equalize the intervention groups on individual, family, and case demographic variables. Partial failures of randomization can be explained by recruitment procedures that caused the CI group to be older (with longer relationship duration and older children).

A third study strength was that nearly every case deemed eligible for mediation was invited to participate in the study. Thus, a broad range of cases were included in this research—from parents who had had very brief relationships, were never married, and were creating initial parenting time arrangements to parents modifying parenting arrangements made after a divorce that occurred years ago. In addition, we included a broader range of child ages than examined in previous research on CI and CF (birth to 17 years in the present study versus ages 5–16 years in McIntosh et al., 2008). We did not screen out parents thought to have inadequate “ego maturity” (McIntosh et al., 2008), instead permitting a broader range of cases to enroll. By providing the intervention to families with very young children, there was the potential to affect the trajectories of child outcomes for children who may never remember their parents' separation. Broadening the scope of recruitment may also enhance the generalizability of the interventions in other mediation clinics that serve a wide variety of families. Participants in this study were generally low income, often high conflict, and often experiencing multiple stressful life circumstances. These factors place these families at particularly high risk of negative outcomes after divorce, and are a population most in need of services.

There are also important limitations to this research study. Despite recruiting for more than two years, only 69 families consented to research and completed the mediation process. This is a relatively small sample, particularly when spread across three conditions, which limits the power of statistical analyses that may be conducted. Because of age restrictions on randomization into CI, the 69 cases were not evenly distributed across all three conditions, and relatively few CI cases were completed. One potential result of the small sample is that existing group differences are currently not significant or are at a trend level that may turn out to be significant in future studies with larger samples. Data from a small sample are also more likely to yield false-positives that do not survive replication in future studies. The small sample size was driven, in part, by the fact that roughly half of the families approached refused to participate, but these refusals were unequally distributed across ages. Two thirds of families with only younger children (all age 4 or younger) consented, while only one third of families with older children (ages 5 or older) consented. Many parents who had older children cited not wanting to involve their children in the process, so the child interview component appears to have discouraged some families from participating. Future researchers will need to consider how to address this, and this finding suggests a potential limitation on the acceptability of CI to parents in the United States.

As with any study at one site, our sample represents a small slice of the divorcing population and one particular style of mediation. Important factors, such as attorney representation, can vary widely among jurisdictions (e.g., Beck et al., 2010). Also, drawing from people who live in south-central Indiana,

this study lacked much racial and ethnic diversity. Because of how difficult it was for low-income parties to return to the Clinic for multiple mediation sessions (e.g., inability to take additional days off work), the mediations usually occurred in a single session. This is a potential drawback, because parties may have become tired by the end of a long session. Outcomes may have differed if the mediations had proceeded in smaller, more frequent increments.

This study is also limited in that only the immediate outcomes from the interventions were available to analyze. Long-term follow-up of the families who participated is a critical step in determining if the CF and CI interventions produce sustained benefits to these families. A longitudinal study of the families who participated is underway, but data are not yet available for analysis. The longitudinal data will include measures of parent and child functioning, interparental conflict, and child adjustment to divorce that will allow an empirical examination of the hypothesis that the agreements reached in CF and CI mediations ultimately result in better child outcome.

Another potential study limitation is that the mediators and child consultants were students, not experienced professionals. It is controversial whether less experienced therapists in psychotherapy provide less effective services (Montgomery, Kunik, Wilson, Stanley, & Weiss, 2010; Stein & Lambert, 1995), and students were provided extensive supervision, but this issue may still have affected the mediations and feedbacks. A related issue is that, to determine if an intervention is being delivered in a competent manner, many program evaluation studies include measures of intervention adherence to a treatment manual and competence. This study did not include such measures. Although students were observed in most of the feedbacks and mediations, they were not formally rated for adherence or competence. One of the difficulties was that the mediation sessions could not be recorded for fear of creating a record of the confidential mediation that a parent or attorney may try to obtain as evidence in a trial. Because of this limitation, in future work, adherence and competence will have to be measured live—a much more difficult task.

Conclusion

The CF and CI interventions were well accepted by parents and mediators, and they led to mediation agreements that should be helpful to family functioning as parents and children adjust to life after separation or divorce. Parents seem to be able to hear the messages of the child consultants (e.g., ideas such as a “business-like coparenting relationship” are often included verbatim in mediation agreements), and those messages are kept salient in the mediation process even after feedback ends. Overall, this randomized controlled trial represents a promising next step from the research conducted in Australia for family law professionals seeking brief interventions to improve the outcomes of divorcing families.

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