



Doubt, Hope, Pain, and New Discoveries: Parents' Experiences of the High-Conflict Program 'No Kids in the Middle'

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Studies show that there are strong links between parental conflict and children's psychosocial problems. The program 'No Kids in the Middle' is a group-based, time-limited, multi-family intervention for children aged between four and 16, living with parents in prolonged conflict after divorce. The program is based on a dialogical framework and the purpose is to create a therapeutic and dialogical space where the parents are invited to see, empathise, and connect with their children and act with their child in mind. This paper presents a qualitative study based on interviews with parents who participated in the program. The analysis of the material led to three main themes: ambivalence – doubt, shame and hope; painful new experiences; and progress and new discoveries. We discuss the findings in relation to the therapists' role and the program's aim of creating a free space for interaction, which seems to be important to the parents' progress.

Keywords: High-conflict families, No Kids in the Middle, family therapy, dialogical practices, experiential exercises, qualitative research

Key Points

1. Families in what is termed 'high conflict' after divorce represent a major challenge for the family therapy field, and studies show that children suffer.
2. The program 'No Kids in the Middle' is a multi-family program based on dialogical principles that puts the children in focus. The program's experiential exercises combined with open dialogues in the group leads to new discoveries for the participants.
3. An experiential approach evokes emotions, including painful feelings for parents, which helps them to be more aware of their children's situation.
4. This study has relevance for clinical practice showing that some high-conflict families can be helped by a dialogical and experiential approach.
5. As an alternative to a 'defining-and-solving-the-problem-rationality' the program points to possibilities within a 'feeling-and-finding-new-ways-rationality'.

In this paper we explore a dialogical approach called 'No Kids in the Middle' designed to help families in postseparation high-conflict situations (Van Lawick & Visser, 2015). Studies show a strong link between parental conflict and children's psychosocial problems, including anxiety, depression, and aggression (Amato, & Cheadle, 2005; Vander Valk et al., 2005), hyperactivity, somatic problems, depression, loneliness, academic problems, suicidal tendencies, and defiant behaviour (Dalton, Carbon, & Olesen, 2003; Jaffe, Crooks, & Poisson, 2003; Kelly & Emery, 2003). The literature suggests that the more conflictual a divorce, the more severe the psychosocial consequences are for children (Amato, 2001; Amato & Keith, 1991). Conflict between parents is widespread in connection with break-ups, and children often seem to be trapped in the middle of such conflicts (Rød, Ekeland, & Thuen, 2008).

What are often referred to as ‘high-conflict divorces’ in the literature are characterised by long-lasting conflict, hostile exchanges, blame, emotional volatility, and a partner’s inability to take responsibility for their part in the dispute (Anderson et al., 2010; Helland & Borren, 2015). These features give rise to reciprocal and escalating negativity (Ridley, Wilhelm, & Surra, 2001). In an overview of available research findings, Helland and Borren (2015) estimate that between 12% and 25% of separating couples (both married and cohabitating) in Norway can be assumed to fit into this category of high-conflict divorce. High conflict between parents after divorce involves a range of services pertaining to children. The family counselling offices report that mediators usually experience working with these families as an area of failure. From the perspective of courts, legal processes often end up focusing on winning and losing with parents protecting their territory and consequently the children’s situation can become even worse (Rød, Ekeland, & Thuen, 2008; Van Lawick & Visser, 2015).

From the perspectives of child welfare and child and youth mental health services, high-conflict divorces can be considered a form of abuse or neglect where parents show a lack of understanding of the effects of conflict on their children (Dalton et al., 2003; Kelly, 2003). However, Smart and Neale (1997) and Smart (1999) criticise mainstream research suggesting that parents in high conflict are morally incompetent. Their empirical investigation into how parents negotiate over their children after divorce indicates that these parents were ‘morally competent’ actors. Treloar (2018, 2019), who interviewed parents who had experienced post-divorce conflicts, also found that these parents could be seen as agents that over time produced positive change through caring and moral decisions within their difficult circumstances.

The program

‘No Kids in the Middle’ is a group approach program for up to six families with children who are between the ages of four and 16, living in prolonged high conflict after their parents’ divorce. It was developed by family therapists Van Lawick and Visser (2015) in the Netherlands who experienced the complexities of working with these families. The intervention is a group treatment model intended to reduce parental conflict by preventing and/or decreasing psychosocial adjustment problems among children and increasing social support for parents and children from the extended family and social network (Van Lawick & Visser, 2015).

The program is based on six key principles:

- keeping the child in mind;
- working in groups;
- stopping legal processes;
- making free space for interactions;
- creative presentations ceremonies; and
- reaching out to the network.

The intervention is led by four therapists: two therapists lead the parents’ group, while two other therapists lead the children’s group. The core of the program is eight two-hour group meetings. The content of the parents’ group consists of a fixed program alternating between *educational segments* about the nature and effects of parental conflict, *group discussions*, and *experiential exercises* where parents are invited to

alternately take the role of child or parent in a variety of scenarios where conflicts are enacted. The program offers an opportunity to collaborate with other parents in finding better solutions to relevant dilemmas.

The children's group is held at the same time and in the same building as the parent's group. The main purpose of the children's group is to support and assist the children in giving expression to their experiences of living with parents who are in conflict, and to facilitate the sharing of experiences and coping strategies between the children. Organising the children's group in parallel with the parent's group helps the parents to keep their children and their wellbeing in mind. This serves as a reminder of the main aim for parents, namely, to make a safe place for the children. At the end of the program, the children present a 'message' to their parents in a *presentation ceremony*, either jointly or individually, communicating the children's hopes for the future. In response, the parents present a message to the children, ideally taking responsibility for their past and future actions, and showing recognition of the effects that the conflict has had on their children.

Van Lawick and Visser (2015), citing authors such as Peter Rober (2017), Seikkula and Arnkil (2013) and John Shotter (2016), state that the program is inspired by dialogical perspectives. A dialogical therapy approach understands human beings to be formed by dialogues throughout life and consequently therapy is about changing the dialogues rather than attempting to change the individual (Seikkula, 2011). The different elements of the 'No Kids in the Middle' program aim to create a dialogical space rather than attempt to change the behaviour of the parents or introduce initiatives directed towards resolving the conflict. The therapists' approach is to focus on possibilities through curiosity and openness to the unexpected; to create a therapeutic and dialogical space where parents can see, empathise, connect, and act with their 'children in mind' (Van Lawick & Visser, 2015).

Since 2014, family counselling centres in the south of Norway, the department for child and youth mental health at Sørlandet Hospital, and child welfare services have collaborated in running the 'No Kids in the Middle' program. This collaborative way of organising the program in southern Norway in itself breaks new ground. A governing committee consisting of representatives from the district courts, child welfare services, child and youth mental health services, and the family counselling centres oversees the work.

The focus of this paper is the program and its themes, including extended quotes from research participants rather than reviews of other programs and research. It explores the dynamics of the program beginning with the following research question: *How did parents experience participating in the 'No Kids in the Middle' program as it is practiced in southern Norway and how did it affect them and their children?*

Methods

A qualitative research design involving research interviews (Kvale & Brinkmann, 2009) made it possible to explore the program through the subjective experiences of the participants utilising a phenomenological (Malterud, 2011) and hermeneutical (Brinkmann, 2017) framework. As researchers we kept an open mind to the parents' experiences and understanding. We will briefly describe the study's procedure and then present the results in detail.

Participants

Participants were parents participating in the 'No Kids in the Middle' program in three groups at three different sites in southern Norway. They were invited both orally by the therapists and in writing with a letter of information and consent. Thirty-six parents received the request, six parents accepted, and only five parents were interviewed as one parent could not find time to meet. Three men and two women aged 37–47 participated. Two of the participants were parent pairs.

These families had experienced a long-running conflict after divorce. In most cases child welfare services were involved and some families also had an ongoing case in court, which was put on hold while they participated in the program. Families were referred to the program by child welfare services, family counselling centres, the department for child and youth mental health at the hospital, court judges, or they could be self-referred.

Creating the data

All participants were interviewed individually after the program had ended. The interviews were either conducted at the University of Agder, the workplace of the authors (two parents) or in the home of the participants (three parents). The interviews were conducted by the first author and all interviews lasted for about 30–60 minutes.

The opening question of the interview was: *How did you experience participating in the program?* Then the researcher responded in a dialogical way. A semi-structured interview guide was developed; however, this did not govern the interview but was there to be consulted if needed. The interviews were audio-recorded and transcribed verbatim by the first author. The five qualitative interviews amounted to 57 pages of transcripts.

Data analysis

The interviews were analysed according to content analyses as described by Graneheim and Lundman (2004) and Graneheim, Lindgren, and Lundman (2017). Content analysis makes it possible to carry out a systematic analysis of the material. Both authors read the transcripts separately and met several times during the process of analysis. The first step involved reading through the interviews several times to get a sense of the whole. Then the transcripts were read again and broken up into meaning units; that is 'words, sentences or paragraphs containing aspects related to each other' (Graneheim & Lundman, 2004, p. 106).

The next step was to condense or shorten the text of the meaning units while preserving its quality and the core meaning. The condensed meaning units were then abstracted into codes: 'The codes allow data to be seen in new and different ways in relation to the context' (Graneheim & Lundman, 2004, p. 107). The codes preserve the context of the whole interview while offering the possibility to discover new aspects of meaning. Coding the condensed meaning units involved discussion among the two researchers about how to conceptualise it without losing the meaning and context.

The codes that were developed were then organised into three main categories: 1. ambivalence – doubt, shame, and hope; 2. painful new experiences; and 3. progress and new discoveries. In the following analysis each participant is coded with numbers (1–5), and letters (M for mother and F for father).

Ethical considerations

The Norwegian Centre for Research Data (NSD) approved the study (Project number 53646). The study was conducted in accordance with 'Ethical guidelines for nursing research' (Northern Nurses' Federation, 1983). The participants gave their informed and voluntary consent based on oral and written information. All were informed that they could withdraw from the study at any time, without any consequences for their participation in the program. In this study the participants were in difficult conflicts with many emotions involved and were informed that if they felt a need to talk to someone after the interview, the personnel in the program would be available.

Results

The three themes formed through the analysis are both thematically and chronologically organised as follows. In summary, *ambivalence – doubt, shame, and hope* is about experiences related to entering the program, *painful new experiences* is about experiences related to the experiential exercises within the program, and *progress and new discoveries* is about how the program seemed to affect the families' daily living.

Ambivalence – doubt, shame, and hope

I, for my part, took a deep breath: If this could help my kids then we go. (2F)

The parents talked about low expectations before entering the program. However, after going through the program they seemed to express a more positive attitude towards it. The parents described ambivalent feelings between hope and hopelessness and doubt before entering. Some had been in therapy before and expressed low expectations, but they still had hope that this could bring something new. One parent expressed hope in this way: 'The hope is that it [participating in the program] will calm down the situation – that in a way it will be a kind of wake-up call' (1F). Another parent both doubted and hoped in this way: 'If you can do miracles then I'm very happy. But I highly doubt it' (4M).

Some participants felt they had failed as parents and felt ashamed. So, joining the program was about overcoming shame and fear of humiliation:

You are in that room because the child welfare services are looking into your family. You wouldn't have been there if child welfare wasn't involved. So, going into that room is admitting that this has gone off the tracks. (2F)

The parents seemed to hold in mind their children and were very concerned and worried that the children suffered because of their conflict. The parents described their children as 'emotionally traumatised' and even 'damaged.' It seemed as if the children were the greatest motivational factor for the parents joining. 'I think when you have something as important on the table as a child, there is nothing that should not be tried' (3F). The doubt, hesitation, and shame seemed to be overcome by the hope that their children would benefit from the program.

Parents reported that they had changed their attitudes towards the program as it went on. After having participated they gave descriptions such as: 'I may have been a bit sceptical at first – like, you know, a "high-conflict course!?" I was more like

that but as I said, gradually . . . it has been very positive' (5M). Another articulated their ambivalence towards the program like this: 'It's a bit like going to the dentist, it's not something you're looking forward to, but once you've done it, it has had an effect' (3F). This turn in experience during the program may be related to how the parents characterised the program as a place where 'no one blames you' and 'no one judges you.' As one parent put it: 'No one is blaming you for anything. No one talks about what you have done right and what you have done wrong. They talk about how we can go on.' The parents' attitude and experience changed during the program and they reported wanting more time with experiential exercises: 'What was most clear for almost all of us was that when we became confident enough to start sharing with each other and learning how your conflict related to my conflict, it was over' (2F).

Painful new experiences

I cried too. It is absolutely awful to realise that your kids are hurting because of you.
(2F)

The parents pointed out the experiential exercises and presentation ceremonies as emotional triggers. This could be because they brought out painful feelings related to the ex-partner, to the children, and even evoked difficult feelings from their own childhood. Some parents said that just being in the same room as the ex-partner was difficult. A mother said she had to be very careful about what she said to avoid hurting her ex-partner. A father reported it as 'quite difficult' when their broken relationship became a discussion topic in the group. Another father said he and his ex-partner had the highest conflict level in the group and they did not talk to each other. He expressed how difficult it was to be brought together with his ex-partner in this way: 'Because I don't think we realised that we would get into as many confrontations as we did. Even though we were probably informed about it I didn't think we would have so much to do with our ex-partner' (3F).

The experiential exercises in the program made the parents face how it is to be in the child's position when they are fighting, and they were not prepared for what the role plays could set off emotionally. Being in the child's position was described as 'horrible', 'painful,' and as making them 'feel grief.' A mother described a situation where, in a role play, she had the role of a child sitting waiting for the parents to argue:

I realise that this must have been how he experienced being with us and he felt that there's something going on here -- mum and dad do not look at each other when they start arguing. So, that made an impression.
(5M)

The experiential exercises also elicited previous bad experiences. In an arguing role play a father experienced a flashback from his childhood: 'Suddenly I heard my dad in me.' A mother talked about her reactions to this particular role play:

[M]y tears rolled and rolled and rolled, and I couldn't stop. And I thought that this really wasn't necessary. Because as I've said, that's why I think they should have checked what kind of stories a person has. It was the same as being raped again, to put it like that.
(4M)

This shows that some parents questioned aspects of the program, suggesting it exposed participants to unnecessarily painful experiences.

The parents talked about the children's presentation ceremony, which included role plays, theatre, music, drawings, videos, and posters. The children had made posters with text like: 'We wish that mum and dad could move together' and 'We must learn to share.' The parents talked about how this was an emotionally good experience for them and said that they 'felt proud' and that 'it was beautiful.'

Still, for some parents, the experiential exercises were painful. A mother said that her child was sitting under a table as part of the performance and she heard him cry, and she said how painful that was for her to witness (4M). A father talked about how difficult the children's performance was for his ex-partner:

This was so difficult for K that she started crying and left. She couldn't be in the room anymore that evening. But when she heard about their presentations and about their thoughts on what they carried with them, she took it seriously.

(2F)

In a next step in the program, the parents had to prepare a presentation in front of the children. The parents' presentation varied greatly, including videos, singing, giving roses, and giving something in writing. A father sang a song he had written and said his presentation was from both mum and dad. Some parents were comfortable with giving something back to the children in front of the others, and some had great anxiety about doing this.

How the program affected them emotionally seemed to be related to both the focus on the children and in particular the way they were invited to take different positions in the experiential exercises, but also to the fact that by participating in the program they had to relate to their ex-partner.

Progress and new discoveries

And just that effect in itself was probably good for the children. Just seeing that mum and dad were actually sitting at the same table eating, even if we didn't communicate was a kind of progress in that situation.

(3M)

Joining the program seemed to lead to new ways of sensing how the conflict affected the children. The parents considered it progress that they both had managed to be with their children at the same time. Before working in the groups, they ate pizza together and some parents said that made the children comfortable and safe before dividing into the parents' group and the children's group. One family called it 'the pizza course.' A father put it this way: 'Just being in a place with no yelling or threatening and where no one hits you. That's progress in itself' (2F).

The parents reported that being with other parents in similar situations was a positive experience and helped them see their own situation with new eyes. They could learn from each other and exchange experiences. They discovered that they were not alone: 'So many of them have had the child welfare services. So, I was not alone. I thought I was alone, but I wasn't' (4M). A mother discovered perhaps it was good enough only that they managed to celebrate birthdays and holydays together. Still there was also doubt: 'But in relation to the kids, what's good enough for the kids? So that was the feeling I was left with' (5M).

The parents also talked about how the program had made a difference for them in their daily life. A father said he had discovered that perhaps his most important contribution could be to stop fighting to preserve the marriage. The complexity and nature of progress was articulated as a father said their situation was now worse and they would continue the case in court, but this had nothing to do with the program. Despite this the father considered it as progress that in the program they were with the children at the same time:

Perhaps this is the key for us to move forward, to begin there. And not focusing so much on communicating really, but mostly just being able to attend to things concerning the children in school and kindergarten together.

(3F)

Some parents said that the situation for the children had become better. Some parents said they had a more relaxed relationship with the ex-partner with less arguing and less surveillance of each other. One parent said that the children could probably notice that mum and dad were not as angry or upset as usual, and it seemed like the children felt safer.

Discussion

The findings show how the parents' expectations were ambivalent. On the one hand they doubted this could contribute to anything new. On the other hand, they had hope that this could be different from previous therapy and might help the children. All the parents said it was a good program even though not everybody said it helped. This is in accordance with Van Lawick and Visser's (2015) experiences who say the program cannot help everybody. After attending, the parents seemed to change their attitudes to the program in positive ways, even though the experiential exercises of the program aroused painful feelings for several of them. Most parents seemed to have become more aware of how conflict affected their children.

We now discuss how the dialogical underpinnings of the program might have affected the parents' experiences and facilitated these changes through three steps. First, we look at *the therapist approach*, the therapist ways of being and doing in the program then look at how this seemed to *make space for interactions*, and finally we reflect on if, and in case how, the program led the families *out of deadlock*.

The therapist approach

The findings showed that parents experienced the therapists as having a non-judgemental approach, in the sense that they did not judge or blame the parents for the situation they were in. According to participants, they were invited to conversations without specific advice and without judgement. The parents described how the therapists directed attention to the children, to possibilities, and to the future. Parents said that the focus of the therapists was not on assessing what they had done right or wrong. Hence, they did not have to defend themselves, and this made it easier for them to enter the space the program offered. This may have contributed to the change from the initial ambivalence of doubt, shame, and hope to a more positive involvement in the program.

The therapists' attitude and approach seemed to give the parents an opportunity to be more relaxed and open-minded and induced them to share thoughts and

experiences with the other participants. Through this they were invited into a joint space that offered the possibility to find new ways of expressing themselves and make new meaning, and new discoveries, in their difficult situations. An open space for interaction occurs when the therapist's approach is charged with curiosity and openness to the unexpected (Van Lawick & Visser, 2015).

The nature of dialogue is responding to the speaker's words (Shotter, 2015), and Brown (2015) claims that when the therapist is reflecting back the speaker's actual words this enables, 'an opportunity for the other to be a speaker and listener of their own words' (p. 197). This in turn gives them the possibility to discover something new from what they hear themselves say. Dialogue opens a possibility for expressing something not expressed before and enables both the speaker and the listener to hear something for the first time.

Meeting the parents with such a therapeutic attitude seems to be in line with what Anderson and Goolishian (1992), in their classic paper, called a 'not knowing position.' This means that 'the client is the expert on themselves and their world, and the therapist is an expert on creating a space and process for collaborative relationship and dialogical conversations' (Anderson, 2012, p. 137). By creating a collaborative atmosphere, the therapists in the 'No Kids in the Middle' program gave space for openness, which seemed to be crucial in creating interactions in the group. The program invited participants to address the high-conflict situation through child-focused *experiential* exercises. A non-judgemental and 'not knowing' therapist stance seemed to encompass experiences and feelings and not just words found through the conversations, which allowed for affective and bodily aspects to be part of the experienced change.

Making space for interactions

We also suggest that the described changes were related to a rich space for interactions opened by the program. The parents pointed out the experiential exercises and presentation ceremonies of the program and how they affected them. Taking the role of both parent and child moved the parents and affected them emotionally. They were able to get a feeling of how it was to be a child when mum and dad are arguing. Wilson (2007) claims that repositioning enables each participant to speak and listen from different positions.

The *role-play* in the program gave an opportunity to play out and experience the roles both bodily and verbally. Through these interactions, the participants could engage both with their bodily movement and sensations, which, in turn, could also lead to changes in thinking and to new ideas on how to proceed in the difficult situation. One of the mothers said that the role play with its arguing situation provoked flashbacks to past events. As Lawick and Visser (2015) claim: 'Psychological injuries dating back to childhood often resonate in this process' (p. 36). Reflections on the past may give a better understanding of the present situation the family are trapped in.

The *presentation ceremonies* had a great impact and induced strong feelings in the parents. The children had a message for their parents; the parents said it was lovely and they were proud of their children. Still, for some it was very painful because it was terrible to realise how the children were in pain because of them. One mother left because she could not bear to see her children's presentation. Opening possibilities for strong experiences and feelings, both good and painful, seemed to be the key

when the program encouraged parents to take their children's position, and put them at the centre of their awareness. This seemed to be in line with the purpose of the original program, namely that the exercises help the parents to be aware of their children (Van Lawick & Visser, 2015).

It also seemed that the painful new experiences and feelings parents talked about in various ways contributed to steps forward in the families' difficult situations. This is in line with studies by Bøe et al. (2013, 2015) which suggest that dialogical approaches facilitate interactions that cannot be reduced to meaning-making, and that there are expressive and ethical dimensions to dialogue that are perhaps even more important. New forms of vitality and new ethical relations emerge through dialogues (Bøe et al., 2013, 2015).

Could the program also be an obstacle to interaction? Perhaps so. Our findings show that for some, being in the same room as the ex-partner was a challenge. Parents' conflicts may create bitterness and anger towards the partner in such a way that keeping their attention on the well-being of the children becomes difficult (Dalton, Carbon, & Olesen, 2003; Van Lawick & Visser, 2015). This may explain the difficulties some parents had in keeping their child in focus. Our findings indicate that for some, having to be with their ex-partner, as the program demands, could be an obstacle to openness because the program brings to life and reinforces the accusations and the blame they associate with their ex-partner.

Out of deadlock – Or not?

We try to create a dialogical space where rigid, destructive processes can be more flexible, and dialogical. In the No Kids in the Middle project we try to find new roads that create a context for movement out of deadlock for these families.

(Van Lawick & Visser, 2015, p. 38)

In this study, most of the parents said their daily life had become better. Some said that there was not so much arguing, or controlling of each other, and the situation had calmed down. Participating in the program had consequences for the future. This is in accordance with Bøe et al. (2015) who point out that dialogues can open the future in terms of offering new possibilities. New conditions for going forward are created because how we relate ethically, how we exist expressively, and how we understand our possibilities are changed in the dialogue. New ways of moving into the future are created.

The parents in this study experienced joining the program as quite tough, but it seemed to help them see the children's situation and act more with their child in mind. While their conflicts may not have been fully resolved by participating in the program, it seemed to allow moving forward in positive ways for many of the participants.

Limitations

Among the 36 invited parents only five volunteered for interviews. This makes the data more limited than originally planned. However, the five interviews provided a rich variety of experiences and made the investigation possible. There might be a risk that these five were the most positive and satisfied with the program. Perhaps they also were the most resourceful in terms of education, income, and occupation. Consequently, there is a risk that these parents were among those most positively affected by the program.

A challenge as an interviewer was that open questions gave open answers. Most of the informants often directed the conversation towards their life situation and their ex-partners. The interviewer found it important to give space to talk about what they were engaged in at present and to keep an open mind about their stories. The task was to keep the conversation in line with the interview guide and at the same time be careful not to close off what the informants wanted to talk about. According to Malterud (2011) it is necessary to be adequately open-minded and focused at the same time. The new knowledge often appears incidentally.

Conclusion

Our study indicates that participating in the 'No Kids in the Middle' high-conflict program created progress and change in parental attitudes to how conflict affects their children. It seems that working in groups, the program's experiential exercises, and the therapists' non-judgemental attitudes created a space for openness and sharing, as the parents became more aware of their children's situation. The experiential exercises and presentation ceremonies had a great impact on some of the parents. Perhaps changes were prompted by how the program affected them experientially and emotionally, which in turn made them move on from difficult situations in new ways.

Our study supports the idea that working in ways that directly affect participants in experiential and emotional ways seem promising. Allowing participants to enter different roles and positions through role play opens a space for a rich and multifaceted dialogical practice. Here the 'No kids in the Middle' program suggests developing dialogical practices, and a family therapy approach that extends beyond meaning-making conversations where participants (and therapists) invest their whole body and soul.

Our findings suggest that practitioners working with families experiencing enduring conflict after divorce should not focus on mapping and solving the conflict, which can be seen as a technical, intellectual, 'defining-and-solving-the-problem-rationality.' More fruitful approaches may be found in practices that invite parents to engage in activities and interaction that invite them to *experience* their situation in new ways. This may lead to painful feelings for parents, but in turn this also seems to make them more aware of their children's situation. Through such practices both parents and children are given an opportunity to experience and respond to their situation and each other in new ways. This, we suggest, becomes a practice related to conflict that does not operate in a 'defining-and-solving-the-problem-rationality' but perhaps rather a 'feeling-and-finding-new-ways-rationality.'

A family therapy approach that utilises these practices offers much potential for helping high-conflict divorcing families. Reaching beyond a *co-creation of meaning/understanding* commonly articulated in social constructionist and dialogical approaches, the 'No kids in the Middle' program points to the significant role of *bodily, emotional, evocative* aspects of therapy as facilitated by experiential approaches.

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