SHARED-TIME PARENTING: NEW EVIDENCE ON RISK GROUPS

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EMERGENCE OF SHARED-TIME PARENTING

• In many countries, shared-time parenting is emerging as an important modern family form following divorce

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PRIMARY AND SHARED-TIME PARENTING

• Primary = A primary residence with one parent and up to 35% overnights with other parent
  • (up to 2 nights per week)
• Not to be confused with rare or no overnight care
• Shared care = 35%+ overnight time with both parents
  • (more than 2 nights per week)

SOCIO-LEGAL IMPETUS FOR SHARED-TIME PARENTING

• Internationally, family law reform is moving to encourage and support shared-time parenting
• Legislative push toward shared-time parenting can be traced to a variety of socio-economic shifts in normative family caregiving
• Empowerment and parental equality paradigms also underpin the movement away from primary care

RATES

• Between 9-30%: General Population
• 16% in Australia – predominantly primary school aged children.
• 34% of Australian Family Court Matters (2008)
A GIVEN.....

- Meaningful, loving involvement of both parents in their child’s life post separation is optimal....
- But is ‘shared care’ an inoculation against risk?
- Should we be prescribing it?

2006 AUSTRALIAN LAW:
PREFERENCE TO SHARED CARE ARRANGEMENTS

- Where an order provides for equal shared parental responsibility, court must ‘consider’ child spending equal time, or substantial and significant time, with each parent (s 65DAA) (care arrangements)
- Other family law professionals (mediators, advisors) must advise the parents that the legislation encourages them to consider an equal or near equal shared time arrangement.

And what happened then?
The AIFS report

- 10,000+ sample of parents, plus widespread data collection across family law sector
- Documents demise of the old 80:20 time distribution as an automatic default, with increasing use of creative options in post separation arrangements.
  But....
- The Amendments created widespread misperceptions amongst parents - especially fathers – about time entitlements.
AIFS evaluation of post reform life, down under

- led to a new wave of complex and repeat litigation over parenting arrangements in the group least equipped to cooperatively share care, and
- mediation processes driven by "entitlement, fairness and equity" oriented agendas.
- increased attempts by clients to manipulate the number of overnights spent with the child in order to lessen their child support payments.
- The new legal framework made it more difficult to consider children's developmental needs.

SHARED CARE IN HIGH CONFLICT POPULATIONS

- Appeasing warring parties?
- A compromise solution to a difficult problem?
- A modern version of halving of the child under King Solomon's dilemma?

(McIntosh & Chisholm, 2008; Eekelaar & Clive, 1977; Moloney, 2008; Smyth, 2009).

SHARED-TIME PARENTING AS AN IDEAL, A REALITY, AND A RISK

1. Defining risk in the context of shared-time parenting
2. Interpreting the current literature pool around shared-time parenting
3. Recent empirical findings about risk factors associated with shared-time parenting
“It seems easier to understand the 2006 amendments, especially the ‘twin pillars’, and the nudge towards equal time, as a political compromise rather than an expression of what we know about children’s needs.”

BRUCE SMYTH (ANU)

• The research questions we ask about post separation living arrangements and the methods we use to explore them need to be as complex as the phenomenon itself.
• “the idea that a clear linear relationship exists between parenting time and children’s outcomes (such that ever-increasing amounts of time necessarily leads to better outcomes for children) appears to lack an empirical basis.” 2009

INTERPRETING EMPIRICAL LITERATURE ON SHARED PARENTING & RISK

• Problems with the claims
• The idea that any given parenting time arrangement can create positive or negative outcomes in their own right, independent of parenting and relationship qualities and psychosocial resources, is simplistic
1. DEFINING RISK IN SHARED-TIME PARENTING

- What outcomes are likely to be independently shaped by shared-time living arrangements?
- What outcomes are determined or mediated by the way those time arrangements are enacted?

2. PROBLEMS OF INTERPRETING SHARED PARENTING RESEARCH

- Small literature pool
- Methodological complexity
- Variation of samples used in time-sharing research
- Problem of data sources
- Conclusions reached

3. RECENT RESEARCH CONSIDERING RISK IN SHARED-TIME PARENTING

- Note on recent Australian research
  - Australian Institute of Family Studies (AIFS)
  - Longitudinal Study of Separated Families (LSSF)
  - Cashmore et al. (2010)
  - Bagshaw et al. (2010)
  - Chisholm (2009)
  - Family Law Council (2010)
  - McIntosh, Smyth, et al. (2010)
  - McIntosh, Smyth & Kelaher (2010)
4. THE RISK LITERATURE: WHAT WE DO KNOW

- Area 1: Pragmatic Resources for Durable & Workable Shared Parenting
- Area 2: Co-Parenting Relationship & Parenting Attitudes
- Area 3: Children’s Outcomes & Developmental Considerations

SHARED TIME PARENTING LESS LIKELY TO BE AN ENDURING ARRANGEMENT

- General population: 49% in place after 4 years (Kaspiew et al., 2009)
- High conflict sample: 27% in place after 4 years (McIntosh et al., 2010).

AREA 1: CURRENT FINDINGS IN BRIEF

- Importance of strong pragmatic, parenting and relationship resources in maintaining shared arrangements
- Key factors to support workability & durability in shared care arrangements are:
  - Well-resourced, responsive, child-focused arrangements
  - Previously existing base of adequate cooperation between parents
  - Numerous social & economic structural supports
AREA 2: CO-PARENTING RELATIONSHIP & PARENTING ATTITUDES

- Parents’ subjective reports of satisfaction with shared care arrangements are associated with:
  - Gender
  - Level of concern about safety
  - Histories of violence
  - Current conflict levels
  - Litigation pathways

- Shared-time parenting in context of family violence & ongoing inter-parental conflict is often associated with problematic outcomes for children.

AREA 3: CHILDREN’S OUTCOMES & DEVELOPMENTAL CONSIDERATIONS

- Shared time arrangements are most common with children in primary school years.
- Simple links between parenting time & mental health outcomes for children are unlikely.
- Time-sharing schedule has less effect on children’s development than the method of its enactment.
- Quality of parental alliance & parent warmth, sensitivity, personal adjustment & discipline style make the difference between a well-adjusted child & one who is not.
- Lack of consultation with child is risk factor for children’s reported dissatisfaction with shared time arrangements.
• Elevated risk is more likely when shared-time parenting arrangements co-occur with ongoing parental conflict that triangulates child and/or heightens exposure to conflict.

• Rigid arrangements that are not responsive to changing needs are associated with problematic outcomes.

4. SUBSTANTIALLY SHARED TIME & THE HIGH CONFLICT FAMILY

• A cluster of elevated risks posed by shared-time parenting arrangements over time to children in high conflict climates.

• A small but important group of children may benefit from loss of contact with a parent.

STUDY 1:
A LONGITUDINAL STUDY OF SCHOOL AGED CHILDREN IN HIGH CONFLICT DIVORCE
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<thead>
<tr>
<th>STUDY 1:</th>
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<tbody>
<tr>
<td>A LONGITUDINAL STUDY OF SCHOOL AGED CHILDREN IN HIGH CONFLICT DIVORCE</td>
</tr>
<tr>
<td>• 131 families</td>
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<td>• 240 children (mean age now 12.5 years)</td>
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<td>• High conflict sample: all sought mediation to resolve a parenting dispute in 2003.</td>
</tr>
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<td>• Repeated measures over 4 years</td>
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<td>• 4 X 1:1 interviews, parents and children</td>
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<table>
<thead>
<tr>
<th>STUDY 1:</th>
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<td>CASES GROUPED IN 3 WAYS</td>
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1. Pattern of care over 4 years
   • continuous primary care (> monthly and < 35% )
   • continuous shared care (35%+ overnights)
   • changed arrangements (1+ substantial changes)
   • no/rare overnight contact

2. Nature of change to living arrangements

3. Flexibility vs rigidity of the arrangement

<table>
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<tr>
<th>SOME QUESTIONS...</th>
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1. Continuity, change, flexibility/rigidity of care patterns over four years in a high conflict sample?
2. What influenced contentment with arrangements over time?
3. What was the interplay between parents’ conflict, parents’ emotional availability, children’s well-being and care pattern over four years?
1. CONFIRMING PRIOR FINDINGS...

Shared care arrangements least stable over four years. Strong tendency over four years to revert to arrangements in place prior to mediation (status quo), unless Court Order in place.

WHO SUSTAINED SHARED PARENTING OVER 4 YEARS?

**Group 1: Flexible, cooperative shared care**

- Separation mutually decided
- Low acrimony
- High cooperation
- High father availability from the outset
- Younger children
- Small sibling groups
- Boys
- Father’s tertiary education

**Group 2: Rigid, low cooperation, high conflict**

- Had a court order
WHAT HAPPENED OVER THE NEXT 4 YEARS?

**Conflict**

- More frequent inter-parental conflict and sustained mother acrimony in shared care families

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**FATHERS’ PERCEPTION OF CONFLICT**

![Graph](Image)

- Mean total conflict scale score (T1-T4)
- Time: Intake vs. 4 years later

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**MOTHERS’ PERCEPTION OF CONFLICT**

![Graph](Image)

- Mean total conflict scale score (T1-T4)
- Time: T1 vs. T6
- Types: Primary parenting, Shared care
2. SATISFACTION WITH ARRANGEMENTS, 4 YEARS ON

1. Fathers in shared care arrangements most satisfied
2. Children least content
3. Flexibility of the arrangement influential

CHARACTERISTICS OF RIGIDLY SHARED CARE

- Higher marital conflict levels
- Mothers more frequently threatened by ex-partner
- Fathers’ regard for mothers’ parenting skills lowest
- Mothers’ alliance with father plummeted
- Higher conflict & acrimony
- Lower cooperation
- Children report higher conflict than primary care, but less than flexibly shared group
- Children and mothers became more distressed

SATISFACTION WITH LIVING ARRANGEMENT AFTER 4 YEARS BY CARE TYPE & RIGIDITY: FATHERS (n=86)

![Diagram showing satisfaction levels]
SATISFACTION WITH LIVING ARRANGEMENT AFTER 4 YEARS BY CARE TYPE & RIGIDITY: FATHERS, MOTHERS (n=103)

SATISFACTION WITH LIVING ARRANGEMENT AFTER 4 YEARS BY CARE TYPE & RIGIDITY: PARENTS, CHILDREN (n=125)

4. CHILDREN’S REPORT OF CONFLICT, 4 YEARS ON

Children in sustained shared care reported
1. Most frequent conflict between their parents,
2. More likely to feel caught in the middle of their parents’ conflict
CHILDREN’S REPORTS OF PARENTAL CONFLICT BY CARE ARRANGEMENT

CAUGHT IN THE MIDDLE

Table 4: Type of change child wants in care arrangement after four years by type of care pattern

<table>
<thead>
<tr>
<th>Type of change child wants</th>
<th>Child now has rare contact with parent (%)</th>
<th>Continuous primary care (%)</th>
<th>Continuous shared care (%)</th>
<th>2 changes to living arrangements (%)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>More time with Dad</td>
<td>21.4%</td>
<td>26.5%</td>
<td>4.8%</td>
<td>15.2%</td>
<td>15.0</td>
</tr>
<tr>
<td>More time with Mum</td>
<td>16.7%</td>
<td>8.8%</td>
<td>42.9%</td>
<td>21.2%</td>
<td>21.1</td>
</tr>
<tr>
<td>Kept it the same</td>
<td>65.9%</td>
<td>72.7%</td>
<td>52.4%</td>
<td>63.4%</td>
<td>63.9</td>
</tr>
<tr>
<td>Total</td>
<td>(28)</td>
<td>(44)</td>
<td>(42)</td>
<td>(33)</td>
<td>(14)</td>
</tr>
</tbody>
</table>
5. CHILDREN’S REPORT: PARENTS’ EMOTIONAL AVAILABILITY

Child’s report of father’s emotional availability was predicted by history of parenting, not contact per se.

Mothers a different picture...

6. CHILDREN’S MENTAL HEALTH

Care pattern not predictive of overall mental health scores for children

Two caveats.....

CHILDREN’S MENTAL HEALTH

Hyperactivity/Inattention:
Sustained shared care over 3–4 years was associated with greater difficulties in attention, concentration and task completion by the fourth year of this study.

Emotional Symptoms:
Internalizing symptoms significantly worse for children in rigid care arrangements of any kind (either primary or shared)
HYPERACTIVITY: WHAT’S IN A NAME

• Restless, over-active
• Constantly fidgeting
• Easily distracted
• Problems thinking things through before acting
• Poor attention span
4. INFANCY: A SPECIAL CASE

STUDY 2: INFANTS & PRE-SCHOOLERS, GENERAL POPULATION
McIntosh, Smyth, Kelaher, 2010.

Longitudinal Study of Australian Children (LSAC)*,
- Infants aged 0-1 (B1)
- 2-3 year olds (B2)
- 4–5 year olds (B3+K1)

LSAC initiated and funded by the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs.

STUDY 2: RESEARCH QUESTIONS

1. Demographic profile of families who share the care of their very young children?
2. Does higher frequency shared overnight care parenting differentially impact the infant’s/child’s:
   a. ability to self-regulate emotions and behaviours?
   b. physical and psycho-social health status?
3. What parenting qualities, parent relationship and socio-demographic characteristics moderate or mediate relationships between care-pattern and outcomes?
STUDY 2: CONTROL VARIABLES

Level 1
Income, Education, Employment, Gender

Level 2
Parent warmth/hostility with child

Level 3
Co-parenting relationship, anger, disagreement, consultation, satisfaction with arrangements

STUDY 2: PARENTING GROUPS

For babies under 2 (n=258):
1. ‘rare (if any) overnights’
2. ‘between monthly and weekly overnight’
3. ‘one or more nights a week’

For children 2-3 (n=509) and 4-5 (n=1292):
1. ‘rare (if any) overnights’
2. ‘between monthly and 5 nights per fortnight’
3. ‘5+ nights per fortnight’ (35%+)

BABIES 0-2 YEARS (n=258)
Overnight care with non resident parent at the rate of once or more per week was independently associated with:

1. Higher irritability than infants in primary care
2. Higher separation anxiety than infants in rare overnight care
3. Trend for more illness with wheezing than infants in primary care group

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2-3 YEAR OLDS (n=509)

Overnight care with the non-resident parent at 5 nights or more per fortnight was independently associated with:
1. Lower persistence than either rare or primary overnight groups
2. More problematic behaviours than children in primary care group

4-5 YEAR OLDS (n=1,292)

In the 4-5 year old sample, independent effects of any care arrangement on emotional and behavioural regulation outcomes for children were not evident.

WHY?

Attachment in the first year of life, when the brain circuits for attachment are still setting up, is different from attachment in the third or fourth year of life, when the system is going, so to speak. That is, to stress a developmental system while it is organizing in the first years will have a much more negative impact in response to the same stressor than if you did it when the child was four.

(Schore, and McIntosh, forthcoming)
HYPERACTIVITY/INATTENTION

- Higher scores for the ‘shared care’ group relative to the ‘primary care’ group on Hyperactivity/Inattention (teacher report) and ADD (Parent report) were noted.
- Similarity to CIF findings

5. TOWARD A MATRIX FOR UNDERSTANDING RISK IN SHARED PARENTING
SHARED-TIME PARENTING AND RISK: AN EVIDENCE BASED MATRIX

Based on forthcoming chapter by Jennifer E. McIntosh, Ph.D. and Bruce Smyth, Ph.D.


5. MATRIX FOR SHARED PARENTING

5. MATRIX FOR SHARED PARENTING
5. SUMMARY OF RISK LEVELS

Low current risk:
Across all axes, there is an existing, developmentally supportive context for shared-time parenting.

Moderate current risk:
Risks are evident on 1 or 2 axes.

High current/future risk:
Risks are substantial, if not numerous, or are evident across all 3 axes.

5. LOW-RISK SHARED PARENTING SCENARIO

- Adequate pragmatic resources
- Developmental readiness and willingness of the child
- Self selection into shared parenting; solid co-parenting foundation; flexible, responsive arrangements.

5. HIGH-RISK SHARED PARENTING SCENARIO

- Troubled co-parenting relationship; few pragmatic resources
- Vulnerability in development and/or child's discontent
- Court Order/Unresponsive rigid plan
5. WEIGHING THE RISKS IN HIGH CONFLICT

- Children's exposure to conflict
- Potential for threat, coercion/ control
- Co'parenting relationship
- Sibling size
- Income/housing

FUTURE RESEARCH: THE NEED FOR DEVELOPMENTAL FRAMEWORKS

- Researchers do not share a common lens when operationalizing their developmental terms
- Frameworks needed that specifically consider trajectories of childhood psycho-emotional development known to be vulnerable to parenting & family functioning, and to be implicated in lifespan outcomes – eg PDM.

DOES IT WORK: A FINER LENS

- In what contexts do specific parent-time schedules:
  - Enable parents to provide a predictable, supportive, low stress, warm environment for their child?
  - Promote child’s experience of personal & relationship safety?
  - Protect child from unhelpful aspects of parents’ conflict?
  - Enable child to know & express own feelings?
  - Help child internalize guidelines for coping with & responding to life?
  - Employ a healthy range of defences to manage life stressors?
  - Support stage-appropriate independence, autonomy & important relationships beyond immediate family?