Services to the Child in the Single Parent Family

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We struggle between our desire to work out the special problems that the adult faces in marital conflict or at a time of separation or divorce or death of a spouse and our desire to treat the whole family, with less focus on the individual and more on the family interactions and relationships. Where should our emphasis be . . .

It is difficult, if not impossible, to separate the problems of children of single parents from those of the adults. Though their problems may in part be internalized as a result of the trauma of the death or separation from the home of one of the parents, there is no doubt that the child does not live in a vacuum and is part of the family. What happens to either or both of his parents affects him. The *death* of a parent means that the child may be bearing the burden of his own guilt and anger at what is conceived of as "desertion;" but also bears the weight of the feelings of the remaining parent (mother or father) who will have the same kind of feelings, perhaps intensified because of greater involvement in the illness (or accident) preceding the death. The surviving parent (more often the wife) may either externalize her feelings of guilt onto the child, or use the child as a crutch or support, particularly during the initial months, or even years, following the death of the husband.

A similar pattern exists, of course, when there is *separation or divorce;* only it is more complicated by the physical existence of the spouse. If it is an "amicable" separation, followed by divorce, there are all the issues to be settled relative to visitation rights, with the child often used as a pawn, in determination as to who will have the child for weekends, summers, holidays, etc. When the separation and divorce are not "amicable," there may be fights over the financial terms of the settlement, as to whether the house remains with the man or the woman, where the child will stay, who will assume the responsibilities of "baby-sitter," who will make the many decisions as to education, college and career planning for the child. Frequently that decision is blurred by the need of the woman to start a new career, go back to college or to work, and face the burdens that come with custody of the child—of planning her own career at the same time she must manage the home and children.

The picture may be more complicated. Frequently remarriages occur. Often such remarriages are between divorced people who have children by their previous marriages. If this occurs where both spouses marrying have full or partial custody of the children, it may mean one home becoming the home of two families, with the additional burden facing the child of having to adjust to stepbrothers and stepsisters, as well as to a stepfather (or stepmother) and often having to move to the home of the stepfather or stepmother rather than having the comfort of his own home as a "security blanket."

This problem can be even more complicated in the event both of the divorced parents remarry into homes with other children: then the child is really torn in loyalties to parents and there is a consequent loss of personal identity as he feels shifted between four different parents and stepparents, and two families of stepbrothers and stepsisters.

The dynamics of the single-parent family have been excellently stated in many articles, particularly one by Gerda L. Schulman.[1] The reaction of the children is noted in recent volumes by Dora H. Tessman,[2] and Lee

[1] Gerda L. Schulman, "The Single Parent Family," *Journal of Jewish Communal Service,* Vol. LI, No. 4. (Summer 1975).

[2] Dora H. Tessman, *Children of Parting Parents.* New York: Aronson, 1978.

Salk.[3]

What is less clear is the role of the family agency in treating the single-parent family: the parents and the children. For we are continuously torn between working with the parent as an individual, with personality problems that may need more intensive therapy, and working with that person to help handle an acute reality crisis that needs to be resolved immediately. We struggle between our desire to work out the special problems that the adult faces in marital conflict, or at a time of separation or divorce or death of a spouse and our desire to treat the whole family, with less focus on the individual and more on the family interactions and relationships. Where should our emphasis be: on the adult, on the resolution of the adult separation experience, on the parent-child problems that emerge as a result of the death, divorce, or separation? On the reality problems, especially financial, facing the parent? Or on the problems facing the child during this traumatic period?

I would hazard a guess that most family agencies would opt for working with the parents in individual or group therapy, with an occasional option taken for family interviews which occur in less than 5 percent of the cases). This choice, of working primarily with the adult(s) is made both consciously and unconsciously. Consciously, agencies are aware that their staffs are trained or experienced principally in working with adults; that there is little training undertaken for work with children. Therefore, the staffs are inexperienced in the latter task. When decisions are made as to case assignment and treatment direction, the natural tendency is to work out a plan involving work with the parent(s). On an unconscious level there are many elements at work, particularly the ready identification of the caseworkers with the adults, who are often their peers in age or life-experience. Especially where the caseworker is widowed, divorced, or separated, the unconscious identification is with the adult who is facing the same type of trauma that the therapist may be facing or has faced in the past.

In addition, there has been a noticeable lack of assumption of responsibility by family agencies for direct treatment of children. I noted this in an article written more than 12 years ago[4] and I doubt if there has been a significant change in the intervening years in the patterns of direct treatment of children—not only in family agencies, but by juvenile courts, by school social workers, and in community mental health centers. What *may* have accounted for some increase is the increased costs for placement of children, particularly in residential treatment settings, and the growing difficulty in finding good individual foster homes or small group home facilities.

Some agencies, like Jewish Family Service of Detroit, have made a conscious effort to strengthen their treatment approach to children by having child analysts as consultants and encouraging staff to engage directly with the child and not to confine their work to the parent. Activity group therapy with latency-aged children and reaching-out to adolescents and the use of "rap groups" have increased in recent years and are encouraging.

But except for these trends and the occasional family interview involving the youngsters (and there is no evidence that the family modality has taken hold significantly in family agencies) there has been little direct treatment of children and adolescents in our settings. There are other factors that could be analyzed in detail, that relate to agency and community priorities, such as the settling of refugees, the care of the aged, the emphasis on providing concrete services to diverse segments of the population (financial assistance for the Jewish poor, food for the homebound and the ambulatory aged, homemaker services, care of the mentally retarded and mentally ill). These

[3] Lee Salk, *What Every Child Would Like Parents to Know About Divorce.* New York: Harper & Row, 1978.

[4] Samuel Lerner, "Treatment of Children — Whose Responsibility?" *Journal of Jewish Communal Service,* Vol. XLIII, No. 4, Summer 1967.

are all important and vital but, realistically, when an agency is asked to provide a variety of concrete and necessary services to the Jewish community and there is not a proportionate increase in staff and funds to meet these needs, the agency will "borrow" staff from the counseling services to provide these "concrete" services. There then results a decline, or at least a lack of increase, in the amount of therapy provided in the form of marital counseling, post-divorce counseling, treatment of parent-child and individual personality problems of adults and adolescents.

Specifically, it means that the single parent is apt to suffer, as will her children, in times of diminished availability of services to her family. There is normally a reluctance and a resistance to asking for help from an outsider, such as a casework agency. When this is combined with limited available resources and waiting periods for service, then the likelihood is that many of the single parents will not come for help. And, unless there is a massive effort at outreach, many will not respond to efforts to get them involved.

What specifically should family agencies do for the single parent family? What can be done for the child in the family?

I here outline some key programs that should be considered. Some cannot be handled by the family agency alone and need the involvement of community centers, public welfare agencies, and the variety of non-Jewish agencies that are set up to provide specific concrete services to the total community.

a. Cooperative Child Day-Care Centers for working parents. In some instances, the services can be extended to the non-working parent who needs relief from the often onerous daily duties of child-rearing and having children under care 24 hours a day, seven days a week.

b. Financial Assistance. This may mean regular assistance (through A.D.C.) or supplemental assistance when child care payments are late, inadequate, or absent; or where the public agency grant is inadequate to meet the real budgetary needs of the family.

A sub-category of financial assistance relates specifically to the Jewish single parent. Many of them cannot join, or feel the need to drop out from, synagogues and temples because of dues requirements. They are often too embarrassed to ask for waiver or reduction in dues. A concerted effort must be made by the Jewish community to enable contact with Jewish resources to be maintained through reduced fees or waiver of fees, and to provide transportation for the children, particularly if the mother is working. This applies to all Jewish resources, including Jewish community centers, summer and day-camp facilities, Hebrew Schools. Financial assistance funds should be available in the budgets of these agencies or in that of the family service agency. Whatever means are used, these services must be provided for reasons of Jewish survival, as well as for the enrichment of the lives of the members of the single-parent family.

c. Job retraining, upgrading of vocational skills, counseling of the single head of the household who needs to return to the job market. The return may be to part-time jobs when the parent is still needed for child-care for part of the day or to full-time work when it is indicated to work out arrangements for the care of the children.

d. Use of Big Brothers and Big Sisters. This is not new to many agencies. (The former Jewish Board of Guardians of New York City has had this service almost since the agency's origins 80 years ago.[5] But it began a special outreach project about 7-8 years ago for the single-parent family which was not ready to use traditional social services. The program provides concurrent group guidance to the mothers. It is no longer limited to cases where the children are in therapy in the agency.)

Many agencies in small, intermediate, and large Jewish communities, may not have the

[5] Ruth Stark, "The Fatherless Boys Project of the Jewish Board of Guardians: Some Therapeutic Implications," *Journal of Jewish Communal Service,* Vol. LIII, No. 2 (Winter 1976).

resources within the agency to start BB-BS programs, nor is it always economically or functionally feasible to do so. However, in such instances a liaison might be worked out with the non-sectarian agencies which may have separate Big Brother-Big Sister organizations to work out the use of Jewish Big Brothers and Big Sisters for Jewish children.

e. Homemaker Service. This has been traditionally provided by family and children agencies, (JFS-Detroit, for one, began its homemaker service in 1933 and Philadelphia JFS, for another, began its program in the 20's). However, not enough agencies are providing the service and even where provided it is minimal.

In recent years there has been a shift away from providing homemaker service to families with children, towards increasing homemaker services to the aged. This is, in part, due to the growth in aged populations and efforts to keep the aged out of institutions. It also occurs because one can "spread thin" the resources in providing homemakers for aged one or two days a week, whereas if a man or woman is the single parent and needs child-care during working hours, there is need for 5-day-a-week homemaker service. This makes it more expensive and thus less obtainable.

f. Self-help groups of single parents. This is different from agency therapy groups. These self-help groups can be formed by Centers or family agencies or "outside" groups like National Council of Jewish Women, but in which the parents link up with each other and meet in informal "leaderless" groups to build their own support system.

g. An untried approach (but which was traditional in the *shtetl* and which seems to be successful in certain Orthodox groups in New York City) is the *shadchin* or matchmaker. Why should not family agencies seek out truly talented *shadchonim* who would relate to the emancipated, liberal, non-Orthodox Jews who are interested in meeting people and might perhaps get married again? This idea may seem novel and revolutionary (or may even be branded as "reactionary"), but I propose that it be seriously considered. It may not have value for all single adults but it might be tried experimentally for the single parent interested in considering remarriage.

h. Agencies should continue to offer "traditional services."

1. Individual treatment of the adult.
2. Individual treatment of the child or adolescent.
3. Family treatment of the parent and child (including involvement of the separated or divorced spouse, where possible).
4. Group therapy for the adults. These could be "permanent" groups, which new members could always enter (open-ended groups).

i. Agencies should experiment with short-term, problem-focused groups (8-12 weeks duration, several of which would run serially during a year) and which would relate to various phases of separation and divorce.

j. Agencies should try to develop groups for the children affected by divorce. This would help us understand more how the divorce is perceived by the children, what stresses they experience and their feelings about their parents undergoing this traumatic experience. Equally important, the agency can help the child through such an airing of feelings and development of self-understanding at such a crucial point in the child's life.

There have been such "rap" groups formed by some Jewish community centers as well as in family agencies. There is nothing sacred about the setting and it can be done in any of a variety of settings.

There are theoretical differences as to the composition of such groups, in terms of age. Many people feel that the groups should be limited to adolescents, who can be more verbal and express their feelings more easily than latency-aged children. This is true. However, it would be worth experimenting with single-purpose focused groups of latency-aged youngsters, particularly those 9-12 years of age, to see whether they could and would discuss with their peers their feelings of loss of a parent, their anger at the "surviving" parent, their own guilts. Although group activity therapy is often the treatment method of choice with latency-aged youngsters, it is possible that, with a skilled caseworker as a group leader, they could be helped to talk out their feelings in a group composed of peers "in the same boat."

k. An innovative approach would be the formation of groups consisting of three families, the single parents and the children. The interaction in such groups may help the children as well as the parents see the similarity of the problems that they face, and they might get some sense of support as they talk out their problems. The former Jewish Family Service of New York City has had such groups in operation for years. It may be more difficult to form such groups in communities of smaller size, because of the problem of finding the right families faced with the same problems at the time of formation of the group. But it might work in family agencies in other cities if there is careful planning and out-reach.

l. Foster day care, as distinct from foster home placement, should be considered as a help to single parents. It is extremely difficult, in many communities, to find Jewish foster homes. But perhaps recruitment efforts might be more successful at finding Jewish families who would provide foster day-care during the working hours of the single parent, with the child brought home at the end of the working day. This is currently being done by Jewish Child Care Association of New York City. It might be more practical and realizable if agencies were to attempt to work out arrangements for half-day care, or for after-school care. This could be helpful not only for the working mother, who might work on a part-time job, but also for those going back to school for retraining. Obviously there are funding problems that must be solved, and it may be necessary to find non-Jewish day care homes if none is available in the Jewish community. But the problems ought to be worked on, because the need is there, and is largely unmet.

m. Foster home and residential treatment care must be considered in agency budgets as necessary options for some youngsters who are seriously disturbed at the trauma of the "broken" home and whose previous emotional development left severe gaps in their ego structure. Normally an agency should attempt to treat the youngster while he is in his own home. However, if this is not diagnostically indicated, then agencies should search diligently to find the proper placement for the child; then work with the child and the parent prior to the placement, to be sure that the child, particularly, does not see the placement as another rejection or "desertion."

Work must continue with the parents as well as the child during the placement; and the agency must plan follow-up contacts with the parents and the child to be sure that whatever gains are achieved as a result of the placement will be retained if the child returns home.

In Summary

Family agencies must retain the variety of "traditional" services that help children and families in crisis. But they must be especially innovative in working with the single-parent family. For we must remember that these families, the adults and the children, are more than usually reluctant to refer themselves to social agencies for help. It confirms for them differentness from the "norm" and makes them feel more dependent at a time when they are struggling for independence, and thus tending to deny their genuine need to depend upon others for help. The loneliness, the damage to the egos, the guilt that is engendered in both adults and children when death, divorce, or desertion occurs, often makes for more social withdrawal; a period of mourning, of licking one's wounds, of turning inward, of anger at the world as a projection of the anger felt toward the "deserting" adult.

Very often these families, both the adult and the child, avoid institutionalized helping agencies, such as family service, because they object to being looked upon as "pathological." We can assume that the majority of

single-parent families will not accept referral readily to family service agencies. Therefore continuous community education, on the "normality" of the special problems faced during and following divorce (or death) on the value of talking to an understanding counselor/therapist or on participating in a therapy group, is needed before such referrals can be effective. Innovative methods of outreach are needed to attract these people to family agencies. Work must also be done with school counselors and camp counselors to pave the way for the referral so that it can be most effective in getting the child and the parent involved.

Once the referral holds, it is important that the family agency, and the community, have available the resources suggested in this article, in order that most effective help be given the child in the single-parent family.