

ATHABASCA UNIVERSITY

POST-SEPARATION PARENTING IN THE FACE OF COVID-19

BY

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A THESIS

SUBMITTED TO THE FACULTY OF GRADUATE STUDIES

IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF

MASTER OF COUNSELLING

FACULTY OF HEALTH DISCIPLINES

ATHABASCA, ALBERTA

APRIL 2025

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Approval of Thesis

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POST-SEPARATION PARENTING IN THE FACE OF COVID-19

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March 3, 2025

Acknowledgements

I thank my supervisor, Dr. Jeff Chang, for his encouragement, patience, dedication and guidance across the whole timeframe of this project. This thesis is a product of our journey through the unexpected and unprecedented COVID-19 context, which lent to the rich insights and curiosities on how parents navigate co-parenting challenges and make sense of such.

I would like to thank my children, Viktoria and Eva, for the love and motivation they provided along the timeframe it took to complete this project. I am grateful for the insights that both the topic and method of analysis provided me in how to keep a tentative perspective, acknowledge my bias, and distinguish my bias, and get curious about the essence and complex factors that entail the experience of another person. I am grateful to experience this centre-ground positionality in my parenting journey, my professional work and in the context of relationships I have with others in my life.

I also wish to thank my friends, Zeeya, Sarah, and Nour, who have encouraged me along the way and held a centre-ground positionality in their care and compassion, as I navigated the challenges of my intersectionality amid life's significant contextual shifts.

Abstract

High-conflict divorce (HCD) and high-conflict co-parenting (HCC) occur when one or both parents experience a prolonged psychological and emotional impasse, marked by anger, distorted thinking, and impaired communication, manifesting in coercive dynamics and chronic litigation. Although systemic, relational, and individual factors influence conflict chronicity, research remains largely quantitative, overlooking parent's lived experiences. This interpretive phenomenological study explored how six North American mothers over 30 experienced HCC during the COVID-19 pandemic. Findings suggest that despite protective factors such as social support, adaptive coping, and financial resources, fear of authority and systemic legal barriers persisted across participants' intersectional differences, as all experienced gender-based coercive maltreatment by their ex-partners across interpersonal, familial, and legal contexts. Notably, despite the oppression they faced, participants demonstrated resilience through therapy, and efforts in their advocacy for court reform, challenging pathologizing narratives common in HCC literature. Results of this study highlight the need trauma-informed, intersectional, and systemic approaches in research and practice to better understand and address HCC dynamics in family law and co-parenting contexts.

Keywords: Interpretive Phenomenological Analysis (IPA), COVID-19 Policy Restrictions, High-Conflict Divorce (HCD), High-Conflict Co-parenting (HCC), Parent-Child Contact Problems (PCCP)

Table Of Contents

Approval of Thesis.....	ii
Acknowledgements.....	iii
Abstract.....	iv
Chapter 1: Significance of the Problem.....	1
Definition of Terms.....	2
High-Conflict Divorce (HCD).....	2
High-Conflict Co-Parenting (HCC).....	2
Parent-Child Contact Problems (PCCP).....	2
Coronavirus Disease (COVID-19).....	3
Chapter 2: Review of the Literature.....	4
Co-Parenting in High-Conflict Divorce (HCD).....	4
What is High-Conflict Divorce (HCD)?.....	4
What is High-Conflict Co-Parenting (HCC)?.....	5
What are Parent Child Contact Problems (PCCP)?.....	6
Impact of HCD/HCC on Children.....	7
Immediate Impacts of HCD/HCC on Children.....	7
Long-Term Impacts of HCD/HCC on Children.....	8
Factors that Worsen and Prolong HCD/HCC.....	9
Individual and Familial Factors.....	9
Systemic Factors.....	10
Factors that Mitigate HCD/HCC.....	18
Systemic Factors.....	18
Individual Factors.....	19
Acquisition of Resources.....	21
Co-Parenting in the COVID-19 Context.....	22
Service Provider Challenges.....	22
Disruptions in Family Courts.....	23
Compromised Co-Parenting Arrangements.....	25
Mixed Findings.....	26
Conclusions.....	27
Chapter 3: Methodology.....	28
IPA Philosophical and Theoretical Tenets.....	29
Phenomenology.....	29
Hermeneutics.....	31
Ideography.....	32
Researcher Positionality in IPA Analysis.....	33
Data Collection.....	35
Participants and Recruitment.....	35
Interview Preparation.....	35
Data Storage.....	36

Interview Process	36
Data Analysis	37
Interpretive Commentary	38
Limitations	39
Chapter 4. Results	40
HCC Dynamics: The Experience of Maltreatment	40
Patterns of Maltreatment Over Time	40
Ripple Effect: Familial Patterns of Maltreatment	42
No End in Sight	43
Barriers to Boundary Setting in HCC	44
Impossible Boundaries: Desperation for Peace	44
Legal Barriers: No Social Justice	45
Fear of Authority	47
COVID-19 Barriers and Opportunities	48
The Benefits of COVID-19 Restrictions	48
Slowed Courts	49
COVID-19: Maltreatment in a New Context	50
Exasperation and Futility	51
Futile Efforts	51
Exhausting Full Time Job	53
Concern for Children	54
Something Needs to Change	55
Advice to Other Parents	55
Parents' Recommendations for Court Reform	56
Ongoing Fight for Social Justice	57
Chapter 5: Discussion	58
Summary of Findings	58
Awareness of Maltreatment	58
Male Privilege in Maltreatment	59
Systemic Power Imbalances	60
Fears for the Children	60
Effect of the COVID-19 Pandemic	61
Male Privilege in COVID-19 Co-Parenting	62
Vexatious Litigation	62
Conclusion	63
Implications for Practice	63
Implications for Legal Professionals	63
Implications for Counsellors	64
Encouraging and Promoting Interventions	66
Treatment Programs, Therapy Considerations, and Prioritization of Children's Well-Being	67
Recommendations for Future Research	68

POST-SEPARATION PARENTING IN THE FACE OF COVID-19

Personal Transformation	70
Plans to Disseminate Research Results.....	73
References	75
Appendix A: Interview Schedule	99
Appendix B: Certification of Ethical Approval	102

Chapter 1: Significance of the Problem

While most divorces of couples with minor children in developed Western nations result in an adequate post-divorce co-parenting relationship, a small proportion result in high-conflict co-parenting (HCC). Many factors, including economic, systemic, contextual, interpersonal, and individual, contribute to the cause, maintenance, and/or fluctuation of HCC (Garber, 2020; Polak & Saini, 2019). Parents in HCC experience a chronic psychological and emotional impasse that hinders their ability to communicate and cooperate to make child-focused decisions (Polak & Saini, 2019), which often manifests through ongoing parenting-related litigation, draining parents' emotional, psychological, physical, and financial resources (Sullivan et al., 2023; Schmidt & Grigg, 2023). Moreover, this devastates parent-child relationships and compromises children's development in various domains (Garber, 2020; Polak & Saini, 2019).

Lockdowns and quarantines, aimed at preventing the spread of COVID-19, began in 2020. Several sources suggest that these policies, combined with the threat of disease, worsened divorced parents' ability to communicate and cooperate on child-centered decisions, heightening co-parenting conflicts (Daks et al., 2020; Gunther-Bel et al., 2020; Kaur & Behre, 2020; Russel et al., 2020; Singh & Sim, 2021; Wilke et al., 2020). Legal, health and community professionals prioritized protecting vulnerable family systems amid their recovery and survival throughout the pandemic (Kaur & Behre, 2020; Kryukova et al., 2020; Singh & Sim, 2021). However, HCC dynamics are mitigated by comprehensive interventions that include legal, psychological, and social support, which were crucial for parents during the pandemic.

On the other hand, the literature on COVID-19 and family functioning has not yet explored parents' interpretations of their HCC experiences throughout the pandemic. Accordingly, the present study explores how mothers interpreted their experiences of high-

conflict co-parenting throughout the COVID-19 pandemic.

Definition of Terms

High-Conflict Divorce (HCD)

High-Conflict divorces typically involve protracted, contentious disputes characterized by hostility and adversarial interactions. These disputes frequently revolve around parenting time, property division, and financial support. Moreover, these disputes are marked by intense emotional strain, poor communication, continuous litigation, and a focus on winning at all costs (Schmidt & Grigg, 2023; Sullivan et al., 2010).

High-Conflict Co-Parenting (HCC)

Parents in HCC tend to experience adversarial mindsets, hindering their co-parenting objectives and compromising their ability to prioritize the needs of their children over their conflict (Barth et al., 2019; Judge & Ward, 2017; Polak & Saini, 2015; Rauh et al., 2016). As such, parents in HCC tend to engage in persistent, intense, hostile disputes over parenting issues, which negatively impact their relationships with their children along with their children's development (Choi & Becher, 2018; Houston et al., 2017; Sullivan et al., 2023; Judge & Ward, 2017). Parents' hostile disputes not only occur in the context of their co-parenting interactions but also the legal context (Carmen & Aspinall, 2020; Vath, 2022; Visser et al., 2017).

Parent-Child Contact Problems (PCCP)

Parent-child contact problems (PCCP) involve difficulties and disturbances in the relationship between a parent and child, particularly after separation or divorce including a child's total refusal to see a parent (De Alcântara Mendes et al., 2018; Garber, 2020; De Alcântara Mendes & Bucher-Maluschke, 2017; Judge & Ward, 2017; Polak & Saini, 2019; 2015; Sullivan et al., 2023; Warshak, 2015).

Coronavirus Disease (COVID-19)

COVID-19, a pneumonia-like respiratory virus, was declared a pandemic in March 2020, prompting governments worldwide to declare national emergencies and impose restrictions such as lockdowns and the closure of businesses, schools, and community centers to control infection rates (Lee, 2020). COVID-19 was an unpredictable disaster (stressor) due to its profound yet elusive impact, rapid changes in social policies, clear public health threat, and lack of a foreseeable end, all of which dictated external systemic conditions beyond the control of families.

Chapter 2: Review of the Literature

In this chapter, I will review the literature that informs this study. First, I will outline the distinctive characteristics of HCD, HCC and PCCP and their impacts on children's immediate and long-term psychological, physical, interpersonal, and emotional development. Then, I will review the literature on the individual, familial, and systemic risk factors for HCD/HCC, followed by mitigating individual and systemic factors. Moreover, I will review the literature on co-parenting in the COVID-19 context, discussing the potentially problematic and or mediating role that health policy shifts played in these dynamics. Finally, I will conclude with a brief rationale for exploring how parents made sense of HCC in the COVID-19 context.

Co-Parenting in High-Conflict Divorce (HCD)

What is High-Conflict Divorce (HCD)?

Approximately 40% of marriages in Canada end in divorce before their 30th anniversary (Statistics Canada, 2022). Historically, around 70, 000 divorces occurred annually, but recent data shows a decline, with 42, 933 divorces granted in 2020, down from 56, 937 in 2019, likely due to the COVID-19 pandemic (Nussbaum, 2025; Statistica, 2025).

In 2020, Canadian courts handled family law cases in which 75% processed with uncontested issues, while approximately 51% of divorces involved minor disputes over custody and financial support (Government of Canada, Statistics Canada, 2021). However, 5% to 15% of Canadian divorces are classified as high-conflict, involving prolonged litigation over parenting time, access, and support (financial, co-parenting, etc.) (Government of Canada, Department of Justice, Electronic Communications, 2022).

Divorce-related conflict is considered chronic when it persists for longer than two years and stems from an emotional and psychological impasse, characterized by a) self-preservation as

a dominant motive, b) impaired collaborative decision-making, and c) a diminished capacity for normative expressions of care (Treloar, 2018; 2019; Webber, 2011). Parent's impasse often entails intensified anger, dichotomous thinking, and an inability or refusal to engage in effective problem-solving, negotiation, or communication, frequently culminating in protracted litigation over time (Polak & Saini, 2019; Sullivan et al., 2023). Ultimately, parents' impasse in HCD is evidenced by challenges in co-parenting and experiences of parent-child contact problems (PCCP) (Garber, 2020; Polak & Saini, 2019). Notably, patterns of conflict in HCD fluctuate based on systemic (legal, institutional, professional, social values), relational (relationship status, change in address, social networks), and individual (physical health, cognition, affect, past trauma, worldview) factors (Chang & Kier, 2016; Garber, 2020).

What is High-Conflict Co-Parenting (HCC)?

Difficulty in co-parenting occurs when at least one parent experiences an emotional and psychological impasse at least two years post-divorce that hinders their ability to communicate, negotiate, and make child-focused decisions (O'Hara et al., 2019). Conflict is often exacerbated when one parent perceives that their relationship with the child(ren) is being compromised or the presence of a new partner of the other parent (Francia et al., 2019; Gulbrandsen et al., 2018; Levite & Cohen, 2011). Moreover, co-parenting issues like routines, scheduling, children's friendships, education, and/or recreational activities also become topics of contention, manifesting in overt or covert aggression between the parents. (Eddy, 2010; Garber, 2020; Haddad et al., 2015; Polak & Saini, 2019; Sullivan et al., 2023, 2013).

Overt forms of aggression include threats, acts of harassment (such as continuous phone calls and emails), physical assault, and verbal abuse (Sullivan et al., 2023). In contrast, covert forms of aggression may be more challenging to detect and often manifest in patterns of coercive

behaviours (Cross 2022; Government of Canada, Department of Justice, Electronic Communications, 2024; Government of Canada, Department of Justice, Electronic Communications, 2023). According to the Standing Committee on Justice and Human Rights (2021), *coercive control* entails a pattern of controlling behaviour that takes place over time in the context of intimate partner relationships, as well as familial relationships, which serves to entrap victims and eliminate their sense of freedom and autonomy in the relationship.

Coercive control can manifest either with or without the involvement of a third party (i.e., psychologists, social workers, counsellors, family members, and their children). Coercive control seeks to undermine the other parent's autonomy by fostering dependency, curtailing parenting time, degrading the parent-child bond, and restricting access to resources through mechanisms such as persistent litigation (Carmen & Aspinall, 2020; Polak & Saini, 2019). Notably, a parent in HCD/HCC is more vulnerable to coercion when they experience greater power imbalances in society as a result of their intersectional identities (i.e. identities (i.e., age, socio-economic status, cognitive, physical, emotional ability, gender, immigration status, access to social capital, ethnicity, race, religion) (Carmen & Aspinall, 2020; Cross, 2022; Hocking & Awyn, 2022; Savage, 2021; TGCDJEC Canada, 2024).

What are Parent Child Contact Problems (PCCP)?

Common in HCC, PCCP refers to difficulties or disruptions in the relationship and interactions between a parent and their child (Sullivan et al., 2023). Gardener (1998) initially identified parental alienation (PA) as a phenomenon that purportedly occurs when one parent manipulates their children to avoid or resist contact with the other parent, discouraging the child from seeking, forming, or maintaining a relationship with that parent (Bosch-Brits et al., 2018; Sullivan et al., 2023; Warshak, 2015). However, the PA construct is problematic because it is a

single-factor theory that lacks empirical support and fails to consider other reasonable explanations for why a child may refuse contact with a parent (i.e., developmental stage of the child, stepfamily formation, sibling influences, common adjustment difficulties with divorce transitions, untenable loyalty to conflict in response to parent-child conflict) (Garber, 2020; Johnston & Sullivan, 2020; Sullivan et al., 2023). Legal and mental health professionals relying on the construct of PA increases the likelihood that they will turn to simplistic solutions like placing the entire responsibility for the child's reluctance on the favoured parent (Clement & Padilla-Racero, 2016; Dallam & Silberg, 2016; De Alacantra Mendes & Bucher-Maluschke, 2018; Johnston & Sullivan, 2020; Sullivan et al., 2023).

Rather than relying on the construct of PA, scholars advocate for the use of an ecological systems framework, which provides a multifactorial approach that incorporates the complex, reciprocal interplay of the individual (i.e., ontogenetic, development, microsystem) and environmental (mesosystem, macrosystem) factors in the development and maintenance of PCCP (Sullivan et al., 2023; Polak & Saini, 2015). To elaborate, PCCP arises from the interplay of individual and environmental factors: the favoured parent, the rejected parent, the interparental relationship, the child, and the parent-child relationship. Polak and Saini (2015) also suggested that the adversarial nature of the legal system escalates existing negative dynamics in HCD/HCC and PCCP.

Impact of HCD/HCC on Children

Immediate Impacts of HCD/HCC on Children

Legal and mental health professionals classify HCC as a form of child neglect, noting that children's chronic exposure to parental conflict elicits their preoccupation with their parents' conflict and distress, depriving children of essential developmental needs such as secure

attachment, emotional safety, and a sense of security (Warshak, 2015). Accordingly, children in HCC are at an increased risk of immediate and long-term issues in psychological, emotional, behavioural, interpersonal, occupational, and academic functioning (Bosch-Brits, 2018; Haddad et al., 2015; Straus, 2019; Treloar, 2019; Warshak, 2015).

Compared to their peers, children in HCC exhibit a much greater prevalence of oppositional behaviours, attachment issues, feelings of loneliness, and avoidance of social interactions with peers and adults at home and in school (Chang & Kier, 2016; O'Hara et al., 2019; Polak & Saini, 2019; Straus, 2019). These children are four to six times as likely to be diagnosed with depression, anxiety, and conduct disorder (Bala et al., 2010; Bosch-Brits et al., 2018; Polak & Saini, 2019). Moreover, Van Der Wal and colleagues (2019) found that approximately 46% of children in HCC develop post-traumatic stress disorder (PTSD) (Bosch-Brits, 2018). Moreover, their difficulty regulating intense emotions and interpersonal problems correlate with compromised academic performance and lower educational attainment (Treloar, 2019).

Long-Term Impacts of HCD/HCC on Children

Children raised in HCC dynamics experience increased physical, psychological and emotional health and interpersonal risks from adolescence to late adulthood (Polak & Saini, 2019; Schmidt & Grigg, 2023). For instance, in adolescence, they are more likely to engage in risky, impulsive behaviours, such as substance abuse and earlier sexual activity, compared to their peers (Lange et al., 2021). Furthermore, in later adulthood, because of their exposure to chronic stress, they are more likely to experience cardiovascular diseases and weakened immune systems (El-Sheikh et al., 2019; Lange et al., 2021). In terms of interpersonal relationships, they are more likely to have difficulty forming and maintaining healthy relationships, resulting in

issues with trust, intimacy, and communication (El-Sheikh et al., 2019; Lange et al., 2021).

Notably, they are more likely to re-experience their parents' dynamics of HCD, HCC and PCCP in their own family and parenting dynamics (Polak & Saini, 2020; Saini, 2012).

Given the high impact of HCC on children's immediate and long-term psychological, emotional, and physical development, it is essential these families have access to opportunities for early detection to facilitate timely, affordable and appropriate intervention(s). There is emerging evidence that early access to appropriate resources mitigate HCC dynamics, altering parents' and children's trajectories toward more adaptive outcomes (McMahon et al., 2023; Vath, 2022).

Factors that Worsen and Prolong HCD/HCC

Individual and Familial Factors

Parents participating in HCC dynamics often have documented histories of intergenerational trauma and psychopathology (Sullivan et al., 2023; Polak & Saini, 2019; Rauh et al., 2016). According to Eddy (2024), at least 60% of individuals within these families meet the criteria for one or more personality disorders in the Diagnostic and Statistical Manual of the American Psychiatric Association, 5th edition (DSM-5). Eddy distinguished three characteristics of HCC behaviours: a) lack of self-awareness, especially regarding the effects of their behaviour on others, b) inability or unwillingness to change their behaviour, even when receiving repeated negative feedback, and, c) the tendency to externalize responsibility for problems in life and blame forces beyond themselves.

Rauh and colleagues (2016) noted a greater incidence of intergenerational trauma, compared to the general population, among parents who attended Giving Children Hope, a treatment for HCD and HCC. They found that many experienced a history of childhood trauma,

such as abandonment, physical abuse, sexual abuse, and domestic violence. Rauh et al. (2016) also noted that parents often displayed more problems with affect regulation, substance use, and domestic violence. Garrity and Baris (1997) found that HCC parents' interactions are characterized by poor communication, low cooperation, ineffective decision-making, high distrust, and the need to control and limit the other person's autonomy.

Systemic Factors

Sociocultural Factors

Gender stereotypes in North American society are socialized and shape the way men and women develop and interact with one another (Kumar, 2017; McGoldrick et al., 2016). Unfortunately, these stereotypes promote behaviours that often hinder a person's emotional, psychological, and interpersonal development because stereotypes are fixed, oversimplified beliefs and assumptions that distort reality (Collins & Arthur, 2010; McGoldrick et al., 2016). For example, women are socialized to be submissive and self-sacrificing. At the same time, men are taught to embody an image of strength, suppress their emotions, and be the primary earners and decision-makers in their families (Collins & Arthur, 2010; Kumar, 2017; McGoldrick et al., 2016).

These gender-based attitudes support and align with HCD/HCC dynamics reported in the literature (Polak & Saini, 2019; Treloar, 2018; 2019). For example, men in HCD/HCC are more likely to perceive higher levels of threat when their control or authority is challenged, have greater financial power, use more aggressive conflict resolution strategies, and seek practical and legal supports to cope with the divorce process (Hocking & Anwyn, 2022; Savage, 2021; Treloar, 2018). In contrast, women in HCD/HCC dynamics are more likely to initiate divorce, seek social and emotional support and resent the sacrifice of their career goals in favour of parenting and the

resultant economic and social power imbalance (Treloar, 2019). Notably, Treloar (2018, 2019) found that women who survived HCD and HCC attributed decreased conflict over time to acquiring key skills, such as assertive communication, affect regulation, retention of meaningful employment, and engaging in their communities' prosocial behaviours. Furthermore, Treloar (2018, 2019) also highlights the importance of economic factors in divorce, particularly in mitigating HCD and HCC, as women reported how access to financial resources facilitated their access to the psychological support required to acquire life skills.

All genders experience challenges in the legal context, albeit mothers tend to experience greater discrimination and scrutiny due to gender stereotyping by lawyers and judges (Bailey et al., 2020; Cano & Garcia, 2022; Park & Rosen, 2013). For example, due to the female caregiving stereotype, men report feeling less heard in their plight for more parenting time and, in fact, exercise less parenting time overall (Leopold, 2018; Treloar, 2018). In contrast, legal professionals are more likely to perceive mothers as damaged by the separation and critique their emotional/psychological coping and parenting, particularly if they have young children or more than one child (Kruk, 2013; Pulkingham, 2014; Stets & Straus, 2017). Women are also more likely to face scrutiny about their financial acumen, particularly as they cope with debts incurred during marriage, their management of financial challenges, and their ability to maintain work-life balance (Bailey et al., 2020; Cano & Garcia, 2022; Park & Rosen, 2013). Mothers prominently report feeling unheard and that the legal system is unfair, as they seek equality in their divorce outcomes, attributing this to gender stereotyping (Treloar, 2018; 2019; Van den Eynde et al., 2019).

Women are more likely to experience gender-based scrutiny from their children and the father. For example, mothers are often the recipients of their children's anger, particularly if the

mother initiates the divorce, which is more often the case (Bruning, 2022). Fathers are more likely to object to mothers' increased work hours amid separation and divorce, suggesting that this diminishes their capacity to care for children despite their increased parenting responsibilities and the inevitable need to increase their earning power to support their children (Pulkingham, 2014; Van den Eynde et al., 2019). Notably, the emotional, psychological, and financial strain that mothers experience as a result of gender-based scrutiny often reduces their capacity to respond to their children physically, psychologically, and emotionally ((Pulkingham, 2014; Stets & Straus, 2017), inviting further scrutiny, facilitating a vicious cycle. Fundamentally, gender-based scrutiny due to gender-based stereotypes in the economic, legal, and familial contexts impacts mothers' sense of agency and fairness in the divorce process as they navigate economic, familial, and legal challenges (Van den Eynde, 2019).

Legal System Factors

Systemic barriers exacerbate parents' psychological and emotional challenges and compromise their ability to adapt to the legal and economic challenges they face as they divorce (Gerson, 1995; McGoldrick et al., 2016). A significant systemic barrier is the family justice system in its current state, which parents often find difficult to navigate. Chang and Vath (2024) identified several systemic barriers: (a) the adversarial philosophy of the legal system; (b) challenges with access to justice; (c) service fragmentation; and (d) gaps in professional competency; and (e) misappropriation of psychological constructs. Additionally, stigma has been identified (Bala et al., 2010; Chang & Vath, 2024; Polak & Saini, 2019).

The Adversarial Legal System

Understanding and addressing HCD and HCC requires a holistic perspective that considers the interplay of individual, interpersonal, familial, and systemic factors, which can

either escalate, prolong, or mitigate conflict (Johnston & Sullivan, 2020; Polak & Saini, 2019; Schmidt & Grigg, 2023). However, parents first point of contact in divorce is often the legal system, where each family member is treated as a separate legal entity, reinforcing adversarial dynamics (Bala et al., 2010; Chang & Vath, 2024; Polak & Saini, 2019).

The legal system's adversarial approach prioritizes interpersonal disputes over systemic factors, fueling contention rather than family-oriented resolutions. This structure disadvantages parents without legal representation and fails to prioritize the child's best interests (Chang & Vath, 2024; Polak & Saini, 2019). Additionally, legal education trains lawyers to be zealous advocates for their clients, a responsibility that does not always align with ensuring the well-being of the child (Chang & Vath, 2024).

Access to Justice

Limited access to justice, specifically, the absence of affordable, competent legal representation, intensifies the challenges parents in HCD/HCC face (Brennan et al., 2019; Justice Canada, 2019; Polak & Saini, 2015, 2019). The legal system is adversarial, complex, and expensive, which is challenging for parents, particularly those navigating psychological and emotional wounds from divorce (Cross, 2022; Hocking & Anwyn, 2022; Justice Canada, 2019). Divorced families commonly experience financial burdens, with legal and private counselling services out of reach, particularly for the many low and middle-income parents (Chang & Vath, 2024; Francia et al., 2019; Hocking & Anwyn, 2022; Treloar, 2018, 2019). For example, hourly fees for specialized services, like child assessments, can be 50-100% higher than therapy fees (Eddy, 2024).

In cases where parents cannot afford the costs of legal representation, they represent themselves, considerably increasing their stress (Bala, 2020; Hocking & Anwyn, 2022). Parents

struggle to navigate Canada's dual court system, which includes provincial/territorial and superior courts, particularly in understanding their functions, rules and jurisdiction over divorce proceedings (Bala, 2020; Chang & Vath, 2024). Notably, Canada's shortage of judges, particularly at the superior level that grants divorces, results in long waitlists and crowded court dockets (Leblanc, 2023; Pritchett, 2018).

Service Fragmentation

Timely and affordable interventions are essential for families experiencing high-conflict separations, and courts can play a role in directing parents to participate in these services (Francia et al., 2019; Rauh et al., 2016; Sanders et al., 2014; Sullivan et al., 2010; Treloar 2018, 2019). Notably, service fragmentation is directly related to the adversarial nature of the legal system.

In other service delivery contexts, such as hospitals, schools, and rehabilitation settings, professionals from different disciplines often collaborate to provide care for a client or a patient, often with a designated case manager coordinating the services. However, in HCD, multiple professionals are usually involved (i.e., psychologists, mediators, parenting coordinators, and child therapists), often serving multiple family members (Chang, 2016; Chang & Kier, 2016). Moreover, in HCD, either parent may engage a professional to support their position in litigation (or at least not harming it) without looking at the overall situation holistically or systematically (Chang & Vath, 2024). The involvement of multiple professionals by one or both parents can lead to uncoordinated services, with professionals sometimes working at cross purposes (Chang & Vath, 2024; Lux et al., 2024).

Gaps in Professional Competency

There is a significant shortage of competent mental health professionals working with

families navigating HCD and HCC (Chang & Kier, 2016; Ordway et al., 2020; Sudland, 2019). Even experienced therapists who supervise trainees and early-stage professionals may lack the expertise to guide new practitioners (Chang & Vath, 2024). Notably, mental health professionals who work with families in HCD receive the highest number of ethical complaints compared to those in other areas of practice (Judge & Ward, 2017; Schmidt & Grigg, 2023; Sudland, 2019).

Working with families in HCD can evoke strong emotional reactions in professionals (Judge & Ward, 2017). Without proper training and professional support, this emotionally charged environment can lead to blurred boundaries, inappropriate advocacy, burnout, vicarious trauma, ethical or regulatory complaints, and practitioner attrition (Judge & Ward, 2017; Sudland, 2019). The overwhelming nature of this work often causes mental health professionals to avoid working with these families, further limiting their ability to develop the necessary skills to effectively support this population (Chang, 2016; 2018; Ordway et al., 2020; Schmidt & Grigg, 2023).

Sudland (2019) found that social workers often perceive parents in HCD as resistant to change, and report difficulties engaging them in discussions concerning child-related issues. The study highlighted the social workers need for increased professional support, including emotional resources and training in strength-based approaches, to help practitioners effectively manage their working relationships with these families (Ordway, et al. 2020; Sudland, 2019). However, because so few practitioners specialize in HCD and HCC, the pool of competent clinical supervisors remains limited, often resulting in “the blind leading the blind” (Chang, 2018; Chang & Kier, 2016). Furthermore, the intensity of parental conflict in HCD cases can lead to child and family therapists withdrawing services from children, as the ongoing disputes between parents create

barriers to effective intervention (Chang & Vath, 2024).

Misappropriation of Psychological Constructs

The misappropriation of psychological constructs by legal professionals risks the oversimplification and ignorance of systemic and contextual factors, causing harm to families, particularly children (Chang & Vath, 2024; Milchman et al., 2020). Notably, psychological constructs such as attachment, PA, parenting capacity, personality, and risk of violence are not equally validated in the psychological literature, yet have been integrated into family law discussions (Chang & Vath, 2024; Clemente & Padilla-Racero, 2016; Dallam & Silberg, 2016; Sullivan et al., 2023; O'Donohue et al., 2016).

Parental alienation (PA) has gained significant traction in legal and public discourse, shaping how HCD cases are handled (Clemente & Padilla-Racero, 2016; Dallam & Silberg, 2016; Sullivan et al., 2023; O'Donohue et al., 2016; Polak & Saini, 2015). However, the application of the PA in courtrooms by legal professionals is a deeply flawed practice because the construct oversimplifies complex family dynamics, disregarding systemic and contextual factors that contribute to PCCP (Pola & Saini, 2015; 2019). When legal professionals invoke PA to frame custody disputes, the approach becomes reductive and escalates litigation by prompting parents to blame one another for PCCP, rather than reflecting on their own roles or acknowledging the broader environmental, interpersonal, and developmental factors that contribute to PCCP (Clemente & Padilla-Racero, 2016; O'Donohue et al., 2016).

Stigma

Professionals in legal and social service communities tend to harbour stigmatic perspectives and biases toward parents in HCD/HCC (Ordway et al., 2020; Schmidt & Grigg, 2023; Sudland, 2019). Indeed, this stigma can be fostered by inadequate knowledge and poor

understanding of certain phenomena, particularly when there is a lack of attention to systemic and contextual factors (Collins & Arthur, 2010; Ordway et al., 2020; Schmidt & Grigg, 2023; Sudland, 2019). Moreover, stigma and lack of competence are closely connected, with stigma reinforcing the lack of competence and vice versa (Polak & Saini, 2015). This mutually reinforcing dynamic can contribute to poor inter-professional cohesion, impairing parents' access to well-trained professionals (Ordway et al., 2020; Schmidt & Grigg, 2023; Sudland, 2019). Professionals working with families in HCD/HCC often labels the parents as uncooperative or problematic, reinforcing parents' conflicts and defensiveness (Ordway et al., 2020; Schmidt & Grigg, 2023; Sudland, 2019). Unsurprisingly, parents frequently express their grievances, citing professionals' lack of training and understanding (Barth et al., 2019; Ordway et al., 2020; Sudland, 2019).

Hints of Progress

Despite the barriers described above, there have been some positive developments in recent years. For example, some jurisdictions have moved to actualize a publicly funded triage model to refer separating parents to appropriate services such as risk assessment, bilateral evaluation, or direct court involvement upon their first contact with the court (Manitoba Family Law Reform Committee, 2018). Also, there is a gradual move toward unified family courts, which streamline processes and reduce overlapping jurisdiction issues. This enables courts to respond in a timelier manner, potentially reducing parental conflict (Department of Justice Canada, 2022; Ross, 1998). Indeed, six provinces (Manitoba, Newfoundland, New Brunswick, Nova Scotia, Prince Edward Island, Ontario, and Saskatchewan) have adopted a unified family court. Additionally, the former Chief Justice of the Supreme Court of Canada established the Action Committee on Access to Justice in Civil Matters (ACAJCFM, 2012), which works to

develop strategies for improving access to justice in family and other civil proceedings (ACAJCFM, 2012).

Moreover, several provinces and territories now mandate parent education programs on communication skills and the effects of separation on children (Alberta Justice, 2024; Bacon & McKenzie, 2004; Ontario Ministry of the Attorney General, 2024). While reform plans appear to exist, the process is moving slowly (Federation of Law Societies of Canada, 2019).

Factors that Mitigate HCD/HCC

Systemic Factors

Evidence shows that interventions and parenting programs effectively mitigate HCD/HCC, particularly mediation, parenting coordination, and effective intervention programs that treat the whole family as individuals and as a system (Bello & Marra, 2020; Sim, 2015). Mediation is effective in helping divorced couples articulate their positions and receive support in reaching mutually acceptable agreements (Chang, 2016; Chang & Kier, 2016). Mediation services are typically time-limited, structured, and focused on resolving specific issues (Chang & Kier, 2016). A caveat is that not all Canadian jurisdictions offer public funding for these services, and waitlists are the norm in the ones that do (Family Mediation Canada, 2022). While mental health professionals competent in mediation can help parents resolve parenting issues, parents often require additional services to resolve financial issues (i.e., spousal support and/or property division) (Chang & Kier, 2016; Chang & Vath, 2024).

Families in HCD/HCC have also benefitted from parenting coordination, which helps parents with a history of prolonged litigation who require ongoing support in decision-making, sometimes after a final agreement or order for parenting is in place (Brophy et al., 2020; Higichi & Lally, 2014). Parenting coordinators also help parents resolve recurring issues (issues (i.e.,

effective communication, vacations, extracurricular activities, changes to parenting schedule) and educate parents on their children's developmental needs to prevent recurring litigation. Evidence suggests parenting coordination benefits families and courts (Brophy et al., 2020; Higichi & Lally, 2014; Scott, 2020).

Effective intervention programs for HCD/HCC typically entail the treatment of all family members by well-educated and open-minded professionals who can provide emotionally safe spaces, which create a context for parents to learn skills and strategies in emotional regulation, stress management, flexible thinking, parenting, and interpersonal communication methods (Bello & Marra, 2020; Sim 2015). Additionally, Barth and colleagues (2019) suggested that service providers must be knowledgeable about family of origin issues/generational trauma. In these programs, parents report improvements in their interpersonal communication skills (i.e., negotiation, assertiveness) and capacity to regulate their emotions and tolerate distress (Rauh et al., 2016; Sanders et al., 2014). Importantly, there is evidence that parents experience long-term reductions in stress and anger, co-parenting conflicts, and improved parent-child relationships (Choi & Bercher, 2018; Rauh et al., 2016). Such programs are effective whether conducted online or in-person (Eddy, 2024).

Individual Factors

While systemic interventions improve co-parenting behaviour, less is known about the perceptual shifts parents experience when adapting to co-parenting challenges. When crises are chronic and unavoidable, professionals focus on reflective cognitive reframing or meaning-focused coping, which includes self-examination, goal adjustment, and the use of resources (Boss et al., 2017; Webber, 2011) to support parents to respond more effectively to high-conflict

situations.

Non-judgmental environments help parents reappraise their divorce impasse and facilitate perceptual shifts (Barth et al., 2019; Winnicott, 1988). For example, in Barth, and colleague's (2019) study, 25 parents reported that the guidance of a supportive counsellor, who was knowledgeable about intergenerational trauma and who normalized their emotional experiences, allowed them to feel heard, understand themselves better, and develop counter narratives to their assigned gender stereotypes. Moreover, the parents reported how a supportive counsellor led to their transformative outcomes, such as improved communication, self-management, co-parenting skills and forgiveness from the other parent.

Notably, forgiveness plays a key role in reducing conflict and fostering cooperation for parents in HCD/HCC (Boss et al., 2017; Gerson, 1995; McGoldrick et al., 2016; Visser et al., 2017). Moreover, fathers with positive views of co-parenting relationships were more motivated to change and increase their involvement with their children, leading to more engaged and cooperative parenting behaviours (Zhang et al., 2024). Indeed, parents' awareness of what they can control in their co-parenting relationship contributes to behavioural changes and more amicable co-parenting (Barth et al., 2019). There is evidence that parents who become cognizant of the impact of their conflict on their children can shift their focus away from the impasse and toward the children's well-being (Barth et al., 2019; Choi & Bercher, 2018; McMahon et al., 2023; Rauh et al., 2016; Sanders et al., 2014; Vath, 2022).

Acquisition of Resources

Evidence suggests parents' access to financial and legal resources helps mitigate HCD and HCC, decrease conflict and improve child-focused care (Treloar, 2018; 2019). Factors contributing to positive changes for families in HCD include financial stability (Cashmore & Parkinson, 2011), employment (Treloar, 2019), number of children, education (Yárnoz-Yaben, 2013), time since the divorce (Francia et al., 2019), gender (Peixoto-Freitas et al., 2020), satisfaction with the divorce decree (Piexoto-Freitas et al., 2020), neutral support networks (Visser et al., 2017), and access to social capital (Lange et al., 2021; Pulkingham, 2014).

Treloar (2018, 2019) found that parents in HCD/HCC reported decreased conflict over time, but only when they had access to resources that helped them develop key skills, engage in prosocial behaviours, and pursue employment opportunities. Common resources that parents found helpful included access to employment programs, legal system-savvy counsellors, and family interventions specific to HCD/HCC. Thus, access to financial and social resources is essential for reducing conflict and promoting long-term stability.

Co-Parenting in the COVID-19 Context

In March 2020, the Government of Canada implemented public health policies to curb the spread of COVID-19 (Brooks et al., 2020; Brown et al., 2020; Gunther-Bel et al., 2020; McBratney, 2020; Rankin, 2021; Russel et al., 2020). Restriction mandates required people to isolate, don masks, frequently wash their hands, and engage in routine COVID-19 tests, particularly in the event of exposure risk (McBratney, 2020). COVID-19 restrictions and the threat of disease varied across Canadian jurisdictions, resulting in closures of community and social institutions (i.e., schools, community centres, recreational centres) and delaying court proceedings (Daks et al., 2020; Kaur & Nehre, 2020; Wilke et al., 2020).

Service Provider Challenges

COVID-19 presented challenges to family service providers, which caused families to face significant disruptions in accessing the social community, and legal services needed to mitigate conflict (Daks et al., 2020; Kaur & Behre, 2020; Wilke et al., 2020). Professionals working with these families faced challenges adapting their services to COVID-19 precautions, which impeded their ability to provide timely, transparent, and reliable services (Cook et al., 2021; Lee, 2020; McLaughlin, 2020; Pickens et al., 2019; Rivett, 2020; Wilke et al., 2020). Professionals also noted how the remote delivery of services (i.e., parenting coordination, supervised parenting time, case management, child custody evaluations and facilitation of parenting programs) posed ethical issues (Cook et al., 2021; Rivett, 2020; Seikkula, 2020; Wilke et al., 2020). For example, telehealth services induced ethical challenges concerning confidentiality, access to the internet, and coordinating schedules with parents, who experienced role saturation (i.e., juggling homeschooling, work, and household care) (Cook et al., 2021; Kaur & Behre, 2020; Seikkula, 2020). Professionals noted that telehealth impeded their ability to

accurately observe parenting dynamics, particularly non-verbal cues (McLaughlin, 2020; Kaur & Behre, 2020; Comer et al., 2017; Rivett, 2020; Seikkula, 2020; Wilke et al., 2020). Pandemic precautions also made collaborating with other professionals more difficult (Cross, 2022; Kaur & Behre, 2020; Lebow, 2020; Lee, 2020; McBratney, 2020; Pickens et al., 2019; Scott, 2020; Wilke et al., 2020).

In addition to ethical and logistical challenges with remote service provision, mental health professionals reported their own emotional and psychological stress (Lee, 2020; McLaughlin, 2020; Pickens et al., 2019; Wilke et al., 2020). Notably, Rivett (2020) depicted how this stress from isolation and the risk of disease clouded their objectivity to make informed professional decisions, making it difficult to lead from the outside.

Disruptions in Family Courts

Like family service providers, legal professionals experienced ethical dilemmas and logistical challenges associated with COVID-19 lock-downs and the switch to remote provision of services (Kaur & Behre, 2020; McBratney, 2020; Weinberg, 2021). Separated parents reported delays in filing or finalizing their divorces, while parents who were already divorced faced challenges obtaining court dates to modify parenting arrangements or financial support, particularly in the event of job loss (Goldberg et al., 2021). Notably, there was a reported uptick in custody disputes due to fears of COVID-19 risks (McBratney, 2020; Pazaratz, 2020).

Moreover, the legal ethical standard of the best interest of the child, particularly concerning parenting time and co-parenting schedules (Goldberg et al., 2021), led to most jurisdictions prioritizing the child's COVID-19 exposure risk, regardless of lost parenting time with either parent (Goldberg et al., 2021; Kaur & Behre, 2020; McBratney, 2020; Rankin, 2021; Scott, 2020; Wilke et al., 2020). In some cases, parents could not comply simultaneously with

court-ordered parenting plans and public health directives that limited the size of families' "bubble." (Goldberg et al., 2021; Kaur & Behre, 2020; McBratney, 2020; Rankin, 2021; Scott, 2020; Wilke et al., 2020). Thus, parents working in essential occupations, exempt from COVID-19 lockdown isolation and residing in hotspots with high infection rates were at the greatest risk of losing parenting time with their children (McBratney, 2020; Rankin, 2021). In some court applications, parents' claims that the other parent's occupation, location, or adherence to COVID-19 precautions exposed children to increased risk of infection were upheld, resulting in loss or reduction of parenting time (Lebow, 2020; Lee, 2020; McBratney, 2020; Rankin, 2021).

The case of *Riberio v. Wright* (March 24, 2020, as cited in McBratney, 2020) involved parents with joint custody, where the mother filed an urgent motion to suspend all in-person access to their son. She argued that the father would not adequately maintain social distancing during his parenting time. At the time a judicial decision was made, court operations were suspended except for urgent or emergency matters (McBratney, 2020; Pazaratz, 2020). The judge denied the mother's motion due to a lack of evidence but emphasized zero tolerance for parents who recklessly expose their child to COVID-19. The judge also urged parents to "renew their efforts to address vitally important health and safety issues for their child in a more conciliatory and productive manner" (Pazaratz, 2020, p.1). These judicial recommendations signify the stress the Ontario courts faced amid the COVID-19 crisis, particularly in the context of HCD/HCC cases where parents experience impasse and view one another as enemies.

There is limited evidence of parents in HCD exploiting stay-at-home orders and COVID-19 transmission fears to gain full custody of their children. Family law varies by state in the United States, complicating custody matters during the pandemic as stay-at-home orders and lockdown regulations differed across states. In the New York case of *A.S. v. H.R.* (2020), a

couple battled over custody for ten years and faced new conflict at the pandemic's start. The father filed for a motion for full custody. His relocation request to California was approved on the premise that this state was safer for the child as disease transmission risk was low, yet high where the mother resided. The courts approved the father's notion, with the mother continuing supervised visits every second weekend via video conference. However, the court noted that the father had filed a motion to relocate to California before the pandemic, suggesting that he may have been using COVID-19 to justify his pre-existing goal (A.S. v. H.R., 2020).

Compromised Co-Parenting Arrangements

Lockdowns in pandemic contexts induce stress from isolation and the threat of disease, which take a toll on the emotional and mental health of families, which, in turn, impact their parenting (Thompson & Rasmussen, 2020). Brooks and colleagues (2020) reviewed 24 studies on quarantine (SARS). They found that most individuals experienced negative, lasting impacts on their mental health and behaviour (i.e., PTSD symptoms, depression, avoidant behaviours, substance abuse). Similarly, Bailey and colleagues (2020) provided evidence that parents in HCC experienced heightened perceptions of threats, leading to communication breakdowns and increased stress responses. Moreover, Klapper and colleagues (2024) reported that COVID-19 policies disrupted parenting schedules and daily routines, escalating co-parenting conflicts and complicating parents' ability to manage disputes and support their children effectively. These findings indicate that disruptions to family services and routines, along with the stress from isolation and the threat of disease, worsen parental stress, particularly in families who experience HCD/HCC (Bailey et al., 2020; Fontanesi et al., 2020; Thompson & Rasmussen, 2020). Moreover, the importance of therapeutic interventions to help address heightened stress responses, communication breakdowns and co-parenting conflicts throughout and following

crisis contexts (Adams et al., 2021; Fontanesi et al., 2020; Sahithya et al., 2020; Zacher & Rudolph, 2020).

Mixed Findings

However, despite the apparent trends described above, research on how parents experienced HCC in the context of COVID-19 is minimal, and what evidence exists shows mixed results. There is some evidence of parents “rising to the occasion” during the COVID-19 pandemic (Rivette, 2020; Salin et al., 2020; Zhang et al., 2023). Russel and colleagues (2020) found that while parents with anxiety often adopted new parenting practices to address pandemic challenges, reporting increased closeness and reduced conflict. Rivett (2020), who resides in the U.K., described occurrences of divorced parents finding creative solutions, such as modifying parenting plans and using virtual mediation, to manage co-parenting challenges during the pandemic.

Some have suggested that mothers, especially those of cultural minorities, who valued social connection were at greater risk of compromised functioning during the pandemic (Gunther-Bel et al., 2020; Lau, 2020; Lee, 2020; Russel et al., 2020; Wilke et al., 2020; Zacher & Rudolph, 2020). Indeed, Low and colleagues (2023) found that factors such as working status, educational background, and marital status significantly predicted maternal stress levels in the context of COVID-19 and affected mothers' emotional availability. Moreover, Seo and Kim (2022) confirmed that parenting stress, parenting efficacy, depression, and spouse's support influenced maternal burnout during the pandemic. However, in contrast, Bernhardt and colleagues (2022) found that working from home during the pandemic was linked with positive changes in co-parenting dynamics, reducing work-to-family conflicts and enhancing responsive parenting among single mothers. Another contrasting finding occurred from a study on Latina

mothers, who reported their stress levels decreased over time in the pandemic, leading to more positive parenting emotions, particularly when they received less support from their partners (Hibel et al., 2021). This diversity of findings suggests that the evidence is not clear.

Conclusions

A complex interplay of individual and environmental factors influences the perpetuation and mitigation of HCD/HCC. Specifically, parents' experiences of conflict result from the interplay of individual stressors, such as trauma and psychological vulnerabilities (Alcântara Mendes & Bucher-Maluschke, 2018; McGoldrick et al., 2016), and contextual stressors, including life events, social networks, systemic barriers, economic issues, and sociocultural norms (Bosch-Brits et al., 2018; McGoldrick et al., 2016).

At worst, systemic barriers exacerbate individual challenges, hindering parents' ability to cope with co-parenting and preventing them from developing essential life skills, such as self-management and interpersonal skills (McGoldrick et al., 2016). At best, access to well-structured treatment programs that treat the entire family system and teach vital co-parenting skills can significantly reduce conflict. Moreover, these programs are most effective when they create non-judgmental environments, allowing parents to feel emotionally safe and reappraise their situations, facilitating perceptual shifts that enable them to co-parent more amicably (Barth et al., 2019; Treloar, 2018).

Accordingly, the question guiding the current study is how do parents interpret their experiences of high-conflict co-parenting throughout the COVID-19 pandemic?

HCD/HCC is best explained via an ecological framework (Polak & Saini, 2015). Therein, I will explore this question utilizing the interpretive phenomenological analytic (IPA) method, a framework which investigates how a person makes sense of their experiences of a particular

phenomenon within their embodied, interpersonal and social context (Cuthbertson et al., 2019; Smith & Osborn, 2014).

Analysis of how parents make sense of their experiences of HCC in the context of COVID-19 can further illuminate the depth and complex interplay of individual and environmental factors in systemic shifts and crisis. Particularly the impact policy shifts have on the resources parents have access to and how these changes impact HCC dynamics. Results can also point toward further directions and curiosities in research, which can help guide specific areas of focus for intersectional analysis for families who experience HCC/HCD. Importantly, for policy makers, legal and mental health professionals, results can further attenuate the importance of considering HCD/HCC as a complex phenomenon that is not best explained by any single-factor theory or stereotype thinking; instead, it is a phenomenon that warrants critical thinking and curiosity. The next chapter describes the methodology I used to address these questions.

Chapter 3: Methodology

In this chapter, I describe how I implemented Smith and colleagues' (2009) six-step method of interpretive phenomenological analysis (IPA). Firstly, I provide a general overview of the IPA phenomenological, hermeneutic and ideographical philosophical tenets, situating them within their historical context. Then, I discuss the role of researcher intersectionality in IPA research, incorporating my reflective statement. Next, I outline the data collection process, covering participant recruitment, interview preparation, data storage, and the interview procedures. Finally, I review the process of data analysis and interpretive commentary, concluding with a discussion of the study's limitations.

IPA Philosophical and Theoretical Tenets

IPA is a widely used and accessible approach to qualitative inquiry in health research that is particularly well-suited for novice researchers (Denzin, 2016; Smith et al., 2022; Van Manen, 2014). This approach is participant-oriented, collaborative, and inductive in nature (Creswell & Poth, 2018). The theoretical underpinnings of IPA are grounded in phenomenological, hermeneutic, and ideographic philosophical paradigms (Cuthbertson et al., 2019; Smith et al., 2010; Van Manen, 2014).

Phenomenology

Phenomenology is a branch of study that focuses on understanding an individual's experiences and perceptions of the world (Smith et al., 2010). Phenomenology and IPA are significantly influenced by the works of Edmund Husserl (1989), Martin Heidegger (1962), Maurice Merleau-Ponty (1962), and Jean-Paul Sartre (1957) (Smith et al., 2022). Husserl (1859-1938) sought to uncover the intrinsic characteristics that define an experience, a concept he coined *Desean*, the *essence* of an experience (Finlay, 2013; Moran, 2002; Smith et al., 2010). According to Husserl (1989), knowing the essence of experience enables researchers to gain a comprehensive understanding of its meaning. He also believed that to retain the essence of experience, the researcher must identify and remove their worldviews (values, attitudes, beliefs) from each stage in the analysis, a practice known as *Epoche*, or bracketing (Chan et al., 2015; Moustakas, 1994; Palangas et al., 2017; Yee, 2018).

Heidegger's phenomenological philosophy diverged from Husserl's emphasis on the total exclusion of researchers' fore projections (Smith et al., 2010). Rather, Heidegger (1962) contended that one's perspective is inherently biased since individuals' experiences are constructed through their socio-historical and cultural lenses. Therein, Heidegger emphasized the

role of researchers' preconceptions in the interpretive process as a process which enables individuals to make sense of their experiences (Eatough & Smith, 2017; Spiegelberg, 1971). Merleau-Ponty (1962) acknowledged the significance of Heidegger's view of the importance of one's socio-historical context in the phenomenological interpretation process (Eatough & Smith, 2017). However, Merleau-Ponty (1962) expanded upon Heidegger's contextual emphasis by asserting that every individual's in-body experience is distinct, thereby rendering it impossible to fully comprehend the essence of another's experience (Finlay, 2013; Smith et al., 2022). Merleau-Ponty (1962) also posited that a researcher's recognition of this impossibility cultivates a vital humility essential to the phenomenological analytic endeavour.

Sartre's (1957) contribution to phenomenology centred on the developmental nature of humans, with the existential focus on the concept of 'becoming' as opposed to 'being' (Eatough & Smith, 2017; Finlay, 2013; Smith et al., 2010, p. 20). Sartre integrated the tenets of Husserl, Heidegger, and Merleau-Ponty's phenomenological foci, providing a multi-faceted approach to interpretive phenomenological analysis (Eatough & Smith, 2017; Finlay, 2013; Smith & Flowers, 2022). Specifically, Sartre opined that phenomenological analysis focuses on cognition, affect, existential, and relational aspects of how both researcher and participant make sense of their embodied experiences in their context (Finlay, 2013; Smith et al., 2010).

In sum, phenomenological inquiry in IPA facilitates understanding how humans derive meaning from their experiences through their perspectives and interactions with others. IPA is not exclusively rooted in phenomenology, as the method also incorporates elements of hermeneutic and ideographic philosophical tenets. As such, the interpretive process of IPA

enables individuals to imbue their experiences with meaning.

Hermeneutics

Hermeneutics is a philosophical approach to interpretation that traces its origins to the method of interpreting historical and religious texts (Heidegger, 1962). The primary goal of hermeneutics is to comprehend as accurately as feasible the written or expressed ideas of another individual (Finlay, 2013; Smith et al., 2022). Notably, the meanings of written text are not fixed but instead remain open to new insights, interpretations, and revisions of previous interpretations (Heidegger, 1962; Smith et al., 2022). Noteworthy philosophers who have made significant contributions to the development of hermeneutics include Friedrich Schleiermacher, Martin Heidegger, and Hans-Goerg Gadamer (Eatough & Smith, 2017; Smith et al., 2010).

Heidegger (1962) posited that a crucial aspect of comprehending experience is through the process of hermeneutic interpretation. Notably, phenomena can only be adequately observed when individuals integrate their prior knowledge, preconceptions, and assumptions, collectively referred to as *forestructures*, into how they make sense of these experiences (Heidegger, 1962; Tuffour, 2017). Further, these fore projections do not impede analysis with bias but rather contribute to the practice of researcher reflexivity (Palaganas et al., 2017), enriching the understanding of the text itself (Creswell & Poth, 2018).

The IPA method integrates Gadamer (1900-2002) and Schleiermacher's (1768- 1834) philosophies (Smith & Flowers, 2022). Gadamer's contributions to IPA involve his focus on the fusion of horizons, whereby the researcher's prior knowledge interacts with the participant's account, and the hermeneutic circle, an iterative process of analyzing parts and the whole to refine understanding (Gadamer et al., 1960). Gadamer emphasized openness and dialogue in analysis, viewing analysis as a co-created process where researchers actively listen, remain open

to unexpected findings, and revise interpretations as needed (Gadamer et al., 1960). Gadamer also highlighted the temporal and contextual dimensions of interpretation, shaped by the participant and researcher's historical, personal, and social environments (Gadamer et al., 1960).

Schleiermacher's contribution to IPA emphasizes the linguistic analysis of literary texts (Smith et al., 2009). Schleiermacher (1998) proposed that the interpreter's primary objective is to attain a more profound comprehension of the speaker than the speaker himself processes. He opined that the context was the primary determinant of the intention behind the text's meaning rather than its literal interpretation (Schleiermacher, 1998). Therein, like Gadamer (1960), Schleiermacher purposed that the texts are moulded by the context in which they are created, which includes the time and place, social conventions, and the individual's linguistic usage (Eatough & Smith, 2017; Smith et al., 2022). In sum, IPA analysis is the textual, iterative, grammatical and psychological interpretation of participant accounts and the researcher's analytic fore-projections (pre-understandings and worldviews) (Pietkiewicz & Smith, 2014).

Ideography

IPA is grounded in idiographic thought, emphasizing understanding the unique interpretations of unique individual experiences in specific contexts (Smith et al., 2022; Tuffor, 2017). Idiographic philosophy is demonstrated through the in-depth and detailed analysis of how people made sense of their lived realities and what their main concerns were within these experiences in their contexts (Smith et al., 2022). To capture the depth and detail of the analysis, a small number of participants are selected to gain a proximal understanding of their experiences, thus providing a narrative of how they came to understand them. It is important to note that in IPA, experiences are viewed as relational and cannot be solely attributed to an individual (Smith et al., 2022). Therefore, the primary function of IPA research lies in the manner of analysis rather

than attributing experiences to a single individual (Eatough & Smith, 2017; Finlay, 2013; Tuffor, 2017; Smith et al., 2022).

Researcher Positionality in IPA Analysis

My lived experiences, educational background, and intersectional identity shaped both my research focus and methodological approach, influencing how I engaged with participants, interpreted data, and navigated power dynamics. Experiences of interpersonal and systemic trauma—particularly within educational settings—motivated my pursuit of psychology and specialization in trauma-informed research, training, and practice. These same experiences, coupled with my identity as a cisgender, neurodiverse, single parent who is also white, affluent, educated, and able-bodied, presented both strengths and challenges throughout the research process.

While my intersectionality fueled a commitment to social justice, it also required careful reflexivity to avoid over-identifying with participants, particularly as a woman navigating divorce and parenting two children. A late diagnosis of dyslexia added complexity, intensifying self-doubt within a hierarchical academic environment. Past educational trauma had instilled a fear of misunderstanding and led to mistrust toward authority, which shaped how I collaborated with my supervisor and approached research tasks—often avoiding hierarchical interactions and withholding concerns.

The COVID-19 pandemic further amplified these tensions by intensifying role saturation, trauma responses, and emotional overwhelm, complicating both personal and academic responsibilities. My learned avoidance of help-seeking, rooted in early academic experiences, compounded these challenges, at times hindering perspective-taking and critical analysis.

Despite these vulnerabilities, I maintained a rigorous reflexive stance to uphold the

ethical integrity of the study. I prioritized participant-centred engagement, transparency, and reciprocal knowledge-building aligned with social justice values. Bracketing practices were refined through pre-planned interview protocols, journaling, mindfulness (guided by Schopenhauer's axioms: attention, intention, attitude) (Beck et al., 1959), and ongoing supervisory and peer consultations. A detailed research journal captured analytic decisions, field notes, and coding processes. Personal psychotherapy, reflective practices, and diverse life engagements further supported my capacity to mitigate bias and maintain clarity throughout the research.

Data Collection

Participants and Recruitment

I utilized a snowball sampling method to select six participants; it was a homogenous, small, purposeful sample (Smith et al., 2010) recruited from co-parenting social media platforms (i.e., Facebook co-parenting groups). To protect their identity in this study, I provided all six participants with pseudonyms. Participants were 30 years of age or older, had been divorced or separated for a minimum of two years, defined their co-parenting relationship as high-conflict, had at least one child, and experienced COVID-19 restrictions in the North American context.

Pat, Zeeya and Sarah had children under 11, and Jen, Angela, and Laura had children in their teens and early twenties, ranging from 13 to 20. Specifically, Pat, Laura, Angela and Zeeya had two children, while Jen had four children, and Sarah had one child, under the age of two. Three participants, Pat, Angela and Zeeya, resided within Canada, in the province of Ontario. Three other participants resided within the U.S.A., with Laura residing in Minnesota, Jen in North Carolina, and Sarah in Oregon. Pat, Laura, Angela, and Sarah had more than 50% parenting time of their children, while Zeeya had 50% and Jen less than 50%.

Interview Preparation

I used semi-structured interviews to elicit detailed, evocative descriptions of participants' psychological and social worlds (Glesne, 2016; Smith et al., 2022; Winnicott, 1988). Further, I adapted questions to follow the flow of the interview (Smith, 2014), offering participants the space to speak freely.

I prepared my semi-structured interview protocol by outlining questions and probes for participants based on my research question. I constructed broad questions to participants' key concerns (i.e., relationships, places, processes, events, values, and principles) (Gardner, 2018; Smith et al., 2010). (See Appendix A). I also outlined probes to inquire into the participant's

meaning of those concerns and the context in which they arose (Smith, 2014), specifically (a) how their body experienced the phenomena, (b) the emotions they felt, (c) the choices they had to make, (d) concerns of how they live their lives, and (e) their relationships with others (Smith et al., 2022). I shared and received approval to use this interview schedule from my supervisor and the Athabasca Research Ethics Board.

Before our meeting, I provided each participant with a consent form to familiarize themselves with the project's parameters (i.e., project roles, consent form, deadline to withdraw). Following the initial meeting, I arranged and interviewed participants who completed the consent form. I capped each interview at one hour and thirty minutes to ensure the time frame was available to review matters of confidentiality, provide ongoing informed consent, clarification(s), and engage in a post-interview debrief.

Data Storage

I conducted virtual interviews on the confidential Zoom platform and analyzed data using NVivo qualitative software. I stored interview videos, transcripts, field notes, and journal entries on an external hard drive that was password protected, which only I had access to. Recordings and transcripts will be safeguarded for five years before destruction.

Interview Process

I contacted interested candidates to schedule an initial meeting over Zoom, during which I screened them to ensure they met the study criteria. I also explained the informed consent process, confidentiality, the research process, the purpose of the study, and their role as contributors, and then I scheduled an interview. Prior to and throughout the interview, I engaged in bracketing practices. In my bracketing practice, I scribed my fore projections in my research journal, fostering my awareness of personal biases and providing analytic space to process and

get curious about participant's accounts.

At the start of the interview, I again reviewed informed consent, receiving their verbal and written consent. I began the interview by asking broad, open-ended questions. As the interview progressed, I gave prompts to elicit more detailed descriptions of their experiences (Smith et al., 2010). In the event a participant became emotional, I paused, normalized their experience, and checked to see if they felt comfortable, reminding them that participation was voluntary and that they could quit at any time. At the end of the interview, I reiterated confidentiality, informed consent, and the follow-up timeline. Once I had completed all the interviews, I transcribed them, uploaded the transcripts to NVivo, and coded them.

Data Analysis

I analyzed participant data in accordance with Smith and colleagues' (2010) systematic IPA six-step method. Prior to and throughout analysis, I committed to IPA ethics in fostering my reflexive awareness and use of (a) rhetoric, (b) contextual descriptions, (c) cautious inference, (d) emphasis of theoretical transferability vs. empirical generalizability, and (e) sensitivity to intersectional issues (Cuthbertson et al., 2019). To start, I selected the case I felt had the most depth, detail, and complexity. Then, I engaged in an iterative, line by line analysis whereby I read and re-read the transcripts. In my process of analysis, I intentionally slowed down my habitual reduction process to recall and annotate portions of the interview when the participant became engulfed by their emotions (Smith et al., 2010).

In the second step, I engaged in initial noting, using phenomenological descriptive and linguistic codes (Smith et al., 2010). I used descriptive codes to outline participants' key concerns in each context and linguistic codes to analyze what these key objects of concern meant

for them (Smith et al., 2010). Then, I made interpretive notes to connect common and unique aspects of participants' concerns and the meaning they ascribed to them.

In the third step, I did an iterative analysis to organize and segment the data into themes. Then, I compared, contrasted, and critiqued the segments in relation to the gestalt to generate patterns, connections, and relationships among these themes. Then, in NVivo, I constructed a table to organize my themes in clusters under super-ordinate and sub-ordinate themes, along with their identifiers.

In step four, I conducted an intuitive analysis to map connections across themes. I considered several mapping methods, such as clustering (abstraction), sub-comparison, polarization (opposing relationships), contextualization (contextual/narrative elements in the analysis, opposing relationships), numeration (frequency), function, or explorative methods. Ultimately, I decided to use the clustering method.

Step five entailed repeating steps one to four for subsequent cases (Smith et al., 2009). Then, in step six, I engaged in a conceptual theory-level analysis, comparing and contrasting patterns to seek higher-order conceptualizations across cases. Amid this process, I remained mindful that participants have their own idiosyncrasies despite sharing higher-order qualities (Smith et al., 2010).

Interpretive Commentary

In my analytic write-up, I integrated themes from my NVivo analytic notes, research journal, and table of grouped ordinate and super-ordinate themes, then grounded my interpretations and any tentative theoretical assertions in participants' words (Larkin et al., 2006). I constructed a narrative composite description of *how* parents interpreted their experiences of HCC amid shifting contexts. First, I wrote a concise summary of findings to give

the reader a sense of the gestalt. Then, I described in chronological order the objects of concern essential to parents' experiences and how participants assign meaning to what is important to them. Then, I discussed the contextual implications of the similarities and differences in parents' phenomenological experiences (Larkin & Thompson, 2012).

Limitations

This study includes limitations related to methodology, recruitment, and project timeline. Firstly, researcher subjectivity potentially limits analytic rigour since the researcher is inherently prone to bias (Cuthbertson et al., 2019). My bias as a researcher shifted and changed due to delays caused by COVID-19 restrictions, role saturation (homeschooling, working from home), illness and other life events. I began this study in September 2020; I completed my thesis in December 2024. This time frame may have affected my analysis of participants' accounts, as IPA studies represent a snapshot in time. The time gap between initial data analysis and completion of data analysis may have influenced my interpretation of participants' experiences. However, adhering to the steps of the IPA process may have mitigated this limitation to a degree.

Generalizability, sample diversity, language, and cultural barriers were also evident (Larkin & Thompson, 2012; Pietkiewicz & Smith, 2014). IPA's ideographic epistemology elicits a small, homogenous sample size (Wirihana et al., 2018). The small sample size lacked diversity (i.e., size and participant intersectionality), which makes it impossible to generalize findings (Leung, 2015).

Conducting interviews online has inherent obstacles. Audio issues, such as muffled sound or inaudible segments, can interfere with data collection. Non-verbal body language, such as distinctive eye movements, body posture adjustments, and fidgeting, which are more evident in-person, can also go unnoticed (Seikkula, 2020). Fortunately, no issues occurred amid interviews

other than minor occasional technical glitches which easily resolved.. In the next chapter, I report the results.

Chapter 4: Results

In this chapter, I present my analysis of the distinct and shared ways in which six participants made sense of their experiences of HCC throughout the COVID-19 pandemic. I begin by describing their experiences of maltreatment in HCD, particularly how this maltreatment occurred in recurring patterns over time in both their immediate and extended families and reinforced their sense of no resolution in sight. Next, I explore the commonalities and differences in their descriptions of the legal, interpersonal, and personal barriers they encountered in setting and maintaining healthy boundaries. I also examine how these barriers impacted their emotions and behaviours within the co-parenting they experienced with their ex-partners. Following this, I discuss the participants' perspectives on navigating COVID-19, highlighting both the systemic and personal barriers they faced, as well as the moments of opportunity they identified for setting and maintaining boundaries within this unique context. I then address participants' expressions of exasperation and futility, emphasizing their articulated exhaustion and concerns for their children in the ongoing dynamics of HCD and HCC. Finally, I conclude with the participants' recommendations for change, including advice they offered to other parents in HCD/HCC dynamics, suggestions for court reform, and their continued advocacy for social justice to mitigate the challenges of HCD and HCC.

HCC Dynamics: The Experience of Maltreatment

Patterns of Maltreatment Over Time

All participants described experiencing physical, emotional, and psychological forms of maltreatment while residing with the father, and post-separation, both before and throughout the

COVID-19 pandemic. Moreover, they all expressed that maltreatment escalated over time and occurred in patterns, with the abuse being at its worst when they attempted to assert their boundaries. Zeeya stated: *“He was so nice in the beginning... [but later in the relationship] he responds intensely negatively when I demonstrate any boundaries...”* Sarah also described physical maltreatment from the father when she attempted to set boundaries, which occurred later in the relationship: *“He would jump through my car window when I was trying to get space [in a disagreement].”*

All participants reported challenges with noticing they were experiencing psychological and emotional maltreatment from their partner. Sarah, a paralegal, recounted the subtlety of the maltreatment she experienced, stating he *“peppered in”* verbal maltreatment and would engage in *“moment-to-moment monitoring of my reactions to him.”* Zeeya recalled that she realized she was experiencing maltreatment when the father began physically abusing her in front of their children: *“He is yelling at me in front of our kids... minor physical abuse [would occur] when we would fight.”* Notably, all participants reported being the initiators of the divorce and indicated that physical abuse worsened when they started to separate from the fathers.

Sarah noted that several factors helped her identify maltreatment, including the father’s seasonal work as a fire prevention authority, her experience as a paralegal, and her access to support groups for women in HCD/HCC, who validated her experiences. Jen, a mother of four, reported it was the compounding emotional and physical toll of unequal labour from the father’s refusal to share parenting responsibilities that helped her realize she was experiencing maltreatment: *“He would get home, cut the grass...I would pick the kids up, cook, clean...man, could I get some help?”*

Ripple Effect: Familial Patterns of Maltreatment

Six out of six participants noted that harmful socio-cultural values, attitudes, and beliefs, such as gender stereotypes, were evident in the treatment they experienced from the father and his family. However, alongside gender stereotyping, Jen, who identified as a person of colour (POC), noted how the father's family projected internalized racial biases onto him, which he, in turn, passed onto their children: *"It is not slavery days anymore...he grew up getting hit...he told our children that he used to get whipped too."* Notably, Jen's account highlights how harmful racial attitudes, values, and beliefs intersect with gender stereotypes, intensifying the experience of maltreatment.

All women surmised that their experiences of maltreatment from the father's family involved misogynistic gender biases and values. Zeeya, who described herself as a progressive feminist, recalled the father and his family's normalization of the maltreatment of women: *"[His family] is very pro-conservative... [they will say things like] ...take her for what she is worth...grab her by the pussy."* Angela also described her experience of misogynistic objectification, explaining that after helping and caring for him and his family for more than two decades, she felt discarded and underappreciated: *"I knew his family for 21 years and cared for his dying father...they do not talk to me anymore... it's a bit of a misogynistic world that we live in."* Laura cited how she felt *"punished"* by the father's family for ending their marriage, as they defended his refusal to provide child support and health insurance to their children, who experience a genetic disease: *"He fought me on child support even though his lawyers told him he couldn't...His parents also served me [legal papers] on my birthday..."* Notably, Laura resides within the U.S.A., a country without publicly funded health care.

Zeeya, Angela, and Jen's accounts may reflect a gender-based assumption that women must be self-sacrificing in their marriages. Moreover, Angela and Laura explained that deviating from their traditional gender roles and leaving their marriages led to punishment from both the fathers and their families. Interestingly, half of the participants expressed compassion toward the fathers despite the maltreatment. For example, Zeeya noted: *"100%, [the father's] behaviour is coming from a place of hurt...his mother was crazy, and he went through a lot."*

No End in Sight

All participants expressed their disillusionment over their partners' inability to change despite their efforts to foster collaborative, healthy co-parenting relationships. Sarah described herself as naive to think the father would change: *"I had grand hopes for him...but that was naive of me."* Indeed, all participants reported ongoing maltreatment even after they separated from and/or divorced the father. For instance, Zeeya noticed the father's ongoing resistance to her autonomy, which persisted throughout their marriage, separation, divorce, and post-divorce. She opined that his family's deeply engrained misogynistic values were reflected in his continual attempts to justify and engage in maltreatment toward her and their children. Similarly, Angela described how the father, a police officer, would consistently disregard her boundaries when dropping off the children: *"He still does things that he knows bothers me...at drop-off, he always blocks my driveway...for me it was a safety boundary."* Laura also recalled facing unannounced visits, intimidation and sexual harassment from the father: *"Whenever he wanted to [he would] break into my house, steal my mail...touch me...call me dear."*

Zeeya, Pat, Angela, and Laura, who all had at least two children over the age of six, expressed their fear that maltreatment would not end until their children were at least eighteen years of age. However, Angela, who had two older teenagers, feared maltreatment would

continue into her children's adult lives: *"I don't see things changing much... my kids are going to get married and have kids...I don't want this to continue for them...do I just roll over and do whatever he wants to do? I can't do that either, obviously."*

Barriers to Boundary Setting in HCC

Participants described numerous challenges in setting and maintaining healthy boundaries with their children's fathers following separation and/or divorce. They attributed these challenges to factors such as the father's intimidation, entrenched gender stereotypes (i.e., the father and the fathers' family), their hopes for a positive relationship, and disparities in resources like finances and childcare. Five participants identified vexatious litigation by the fathers as the primary obstacle to establishing and maintaining boundaries that would protect themselves and their children from maltreatment. Participants noted that vexatious litigation would occur in the father's exploitation of legal loopholes via their continual engagement in litigation, false allegations, delaying and running out the clock on cases to avoid accountability (i.e., requests for additional paperwork, switching of lawyers), and their encouragement and use of misappropriated terms, like PA, to describe the other parent's behaviour.

Impossible Boundaries: Desperation for Peace

Participants reported complying with the fathers' demands for different reasons. All voiced that while their compliance temporarily decreased conflict, it did not resolve long-term issues, leading to feelings of violation and loss of autonomy. Angela, who divorced a police officer, stated: *"The only way to decrease conflict is to just do what he wants...nothing really changes in the long-term though."* Zeeya reflected on how her internalization of gender stereotypes made her more submissive, saying: *"I was always willing to make myself smaller... I didn't have boundaries."* Despite being aware of the father's resistance to her boundaries, she

often sought co-parenting collaboration, hoping for change: *"I see times where we can still agree on things...maybe we can get along and do this."* Sarah echoed her experience of wishful thinking and how thinking this way got her: *"Sucked back into [a relationship with] him."* However, unlike Zeeya, Sarah admitted that financial and childcare needs played a significant role in her hopes for reconciliation: *"Maybe this is a chance for us to work things out and be a family."* Sarah also recalled her counsellor informing her that *"it takes an average of seven tries to leave an abusive relationship."*

Participants described the challenges of setting and maintaining healthy boundaries with their former partners. Whether they had access to financial resources or social support, all recalled their difficulty in maintaining emotional distance, often feeling responsible for the father's emotions. Furthermore, they identified that socialized gender role expectations, specifically that women should be self-sacrificing and submissive, were central to their sense of responsibility to the fathers' demands.

Legal Barriers: No Social Justice

Five participants noted that the lack of legislation criminalizing coercive control left them vulnerable to the father's exploitation of legal loopholes, which further exacerbated financial and legal imbalances. Jen, a mother of four living in the U.S.A., reported how she began her divorce with shared parenting time and described how the father manipulated the legal process. Specifically, she said that he falsified his financial disclosures, which led to her being ordered to pay him child support, which undermined her ability to afford proper legal representation for herself. Jen recalled: *"Saying he only makes 1200 dollars a month, so I am paying him child support as well, 1600 dollars, and so with all that compiled, even without the money and stuff like that, all of that has been just stressful on me, in addition to you know the kids and stuff too."*

She then reported how, without legal counsel, she felt silenced, as she was unable to effectively present her side to the court, particularly regarding her experiences of maltreatment. She said the father's lawyer submitted evidence that ultimately led the court to conclude that Jen was engaging in parental alienation syndrome (Gardener, 1998), resulting in the father being granted majority parenting time, with her having supervised visitations every second weekend.

Similarly, Laura, a mother of two children with genetic disorders, reported facing severe financial strain due to ongoing litigation from the father and his family. Living in the U.S.A., where healthcare is not publicly funded, Laura struggled to secure child support and health insurance for her children. Moreover, both Jen and Pat highlighted the prohibitive cost of a trial as a significant barrier to presenting evidence of the father's maltreatment. Pat recalled: "[The lawyer] *told me that to present evidence, he must be found in contempt, or go to trial, which costs \$120k or more.*"

For most participants, the cost of legal proceedings was unaffordable, especially when they were already burdened with legal, therapeutic, and childcare expenses. Even participants like Zeeya and Sarah, who had legal knowledge, stable incomes, and access to support networks, reported financial challenges. Zeeya expressed frustration and concern: "*There is nothing shitty about my life on paper...it's crazy hard...therapists are \$160 per hour, the lawyer is \$600... I don't know what people do if they can't afford support.*" She reported feeling especially troubled by how much she had to spend on these services for their children.

Five participants also voiced how the slow legal process further intensified their financial disparities, limiting their ability to advocate for themselves. Jen described the distress of waiting for a court date to appeal a parenting time decision, as gathering documents and evidence took significant time. Similarly, a teacher, Pat noted that her ex-husband, a successful entrepreneur,

delayed his financial disclosure for three years by switching lawyers, requesting paperwork, and refusing to follow court orders, forcing her to rely on her parents financially to support herself and her children. Pat recalled: *“he [ex-husband] makes 250 0000 a year, he’s retained all of our family money for all these three years and that made it extremely hard on me... to be able to find suitable housing, because he wasn’t paying child support..., he chose not to until it was court ordered... even though I was making a good salary, and I could pay the rent it wasn’t good enough.”*

In contrast to the five participants, Sarah, a paralegal, did not report experiencing legal challenges with navigating her separation from the child’s father. She expressed that with her legal knowledge and understanding of her rights, she recognized that she had full custody of their one-year-old son because the father had not established paternity. Additionally, Sarah was aware that Oregon laws allow for the termination of a lease where domestic violence is evident, further supporting her ability to navigate the situation effectively.

Fear of Authority

Three participants reported avoiding contacting the police or legal authorities regarding the father’s maltreatment due to fear of retaliation from the father, his extended family, or legal authorities. Jen recalled her fear of reporting the father’s physical assaults, noting the futility of her previous attempts to protect herself and the fact these attempts worsened her parenting outcomes: *“I tried my best to fight for my kids, but it just got worse...this lady [the judge] has the power of her pen to say you can’t see your kids no more...[she] traumatized me.”* Similarly, Angela explained that the father’s occupation as a police officer and her residence in a small township prevented her from speaking out about his maltreatment.

Three participants cited embarrassment for not reporting the father's behaviour. Laura shared how her shame and fear delayed her decision to report the father's harassment after he broke into her home: *"I think it took me a year before I filed a police report... I was embarrassed..."* She also cited her fear of retaliation from legal authorities, as the father's family had previously filed a police report against her in retaliation for her trying to protect her children.

In contrast, two participants felt their access to social and legal support boosted their self-advocacy confidence. Like Laura, Sarah said she experienced the embarrassment of the father's public harassment but still reported it. She credited her confidence to her strong support network and legal knowledge as a paralegal. Zeeya, on the other hand, attributed her ability to advocate for herself in the court to her feminist values and supportive network, which included her father, a retired judge, and her sister, a therapist. Sarah's and Zeeya's experiences demonstrate how access to social and legal support can empower women to confidently advocate for themselves.

COVID-19 Barriers and Opportunities

The Benefits of COVID-19 Restrictions

For three participants, pandemic restriction policies provided a beneficial structure, enabling them to establish clear boundaries to protect their children from what they perceived as potential harm. This newfound control sharply contrasted with their pre-pandemic experiences. However, for two participants, the fluctuating COVID-19 restrictions meant that external protective boundaries were less consistent, highlighting how policy changes can significantly impact the systemic supports needed to manage HCC dynamics.

Angela and Pat had more than 50% parenting time and reported co-parenting was easier during the pandemic. Angela explained that her recent completion of legal proceedings, combined with her teenage, introverted children, allowed for a relaxed environment, making

home-schooling manageable: *"The pandemic was perfect timing for us emotionally...we just finished the legal proceedings and stuff...it gave everyone time to reset and relax."* Additionally, she noted that the father's move to a location further away, and his role as a police officer, which obliged him to follow COVID-19 social distancing rules, minimized their exposure to his harassment, as he could not freely visit them. Pat, a child educator and reading specialist, reported that school lock downs allowed her to support her child's learning, who experienced dyslexia. She also recalled how travel restrictions neutralized the father's previous threats to take their children out of the country, threats he had made before the pandemic. Jen reported that school closures increased her parenting time, as the father had to work and struggled to find childcare. However, Jen recalled that while she cherished the increased time with her children, she also remembered how shifting pandemic restrictions and the father finding other childcare options meant her child's access returned to the pre-pandemic schedule.

Slowed Courts

Two participants reported that the slowed court processes did not affect their experience of HCC. For example, Sarah stated that she felt more secure legally during the pandemic:

"Delays in the pandemic maintained our status quo...he didn't have established paternity, and I had 100% custody." Angela also noted the absence of distress due to slowed court proceedings,

disclosing that her legal proceedings had concluded before the pandemic.

However, three participants were concerned that delayed court proceedings due to COVID-19 would worsen their preexisting legal challenges. Zeeya recalled: *"Courts were bad...everything was slow and a pain in the ass...law offices [wondered] 'How do we do this working from home?'"* The three participants feared prolonged court proceedings would lengthen their legal proceedings, limiting their access to the financial resources necessary to care for their

children. For instance, Laura, who resided in the U.S.A., expressed worry that further court delays would prevent her from obtaining health insurance for her children from the father. Alternatively, Pat feared that her case might be dismissed altogether, leaving her and her children without the father's financial disclosure and child support.

One participant, Jen, expressed her fear that slowed court proceedings would delay her court application to increase her parenting time: *"Can we at least go back to every other weekend? Because I wasn't even able to see them?"* She also expressed that her main concern was the children's exposure to the father's maltreatment and that increased parenting time with her would protect them.

In hindsight, participants reflected that access to financial and legal support was crucial to navigating the slowed court proceedings. Additionally, factors such as their experience with court delays before the pandemic, their country of residence, their children's health, and the amount of parenting time they had all contributed to their heightened fears of the pandemic court delays.

COVID-19: Maltreatment in a New Context

Three participants indicated that COVID-19 health policies (i.e., testing, mask-wearing, hand washing, social distancing) exacerbated their experiences of the father's. Zeeya recalled: *"It wasn't really about COVID...it's just a new opportunity for him to be abusive...the only thing COVID did was make logistics a difficult hassle...logistics with high conflict are already a hassle."*

Pat and Laura vocalized how the father's disregard for their rules and boundaries extended into the COVID-19 context. For example, Laura stated that the father's disregard for COVID-19 infection risked harm to their two children who experienced genetic vulnerabilities:

"He doesn't listen to professionals or anybody... His irresponsibility was going to expose our kids [to COVID-19] who have a genetic disorder." Similarly, Pat recounted how the father refused to follow COVID-19 school testing protocols, risking exposure to her, their children, their school, and a family member undergoing cancer treatment. Pat recalled how she had to keep her children home, with them missing school and her missing a day of work.

Two participants noted that COVID-19 policies increased their exposure to the father's maltreatment and worsened HCC. Zeeya, who lived near the father, described how school closures meant more in-person interactions for their child drop-offs and pick-ups. She also explained how homeschooling became another context for the father to criticize her parenting: *"He would email teachers and say [that I] forgot the kid's homework again."* Zeeya also mentioned how the father ignored her during transitions of care and refused her request to travel with the children, even though she had allowed him to do so. Sarah shared that the closure of daycares, combined with her mother's illness, compelled her to increase the father's involvement in their child's care. Sarah noted how this increased exposure to the father and her legal knowledge and awareness of other living and daycare situations motivated her to set firmer boundaries. She stated that she eventually moved away with her son and filed a protective order against the father.

Exasperation and Futility

Futile Efforts

Some participants reported the COVID-19 context provided them with opportunities to establish healthier boundaries. However, most expressed that the fathers used COVID-19 precautions and the threat of disease as another excuse to overstep their boundaries, impacting

both the participants and their loved ones. Many felt that their efforts to protect themselves and their children were futile before or after the pandemic.

Participants reported their diligent efforts in documenting their experiences of the father's maltreatment. Despite her efforts to document communications with the father, Pat described how court delays hindered her ability to bring what she considered crucial documentation before the court. She expressed her desperation to provide evidence that she believed would demonstrate the father's physical maltreatment of their children and his refusal of her contact with them.

Three participants experienced barriers to presenting their evidence due to court delays, trial and legal costs, and emphasized the need to reform the family justice system. For example, Zeeya opined: *"The court system, on top of their not understanding power dynamics and abuse...have no baseline for equality of feminism... they are like fifteen fucking years behind."* She mentioned that instead of systemic reforms, lawyers in the U.S. and Canada often recommended using the Our Family Wizard (OFW) app, a smartphone app to facilitate communication between parents, which Zeeya found was an ineffective stopgap: *"In the US and Canada [lawyers and judges push for us] to use the 'Our Family Wizard' app...The app just provides another portal [for him to] abuse me... [The father's] abuse comes from a deep place of hurt...and it doesn't make a fucking difference in the dynamic."* The three participants cited how they relied on the courts to mitigate what they saw as fathers' continual maltreatment, given their efforts to hold the father accountable and protect themselves were ineffective. Laura expressed her hopelessness about the likelihood of change: *"I don't think [the courts] will do anything to 100% stop his erratic behaviour or him not following court orders or filing more stuff."*

Exhausting Full Time Job

Participants described their exhaustive efforts to mitigate what they deemed were the fathers' relentless cycles of high-conflict litigation and maltreatment toward them and their children. They shared how trying to hold the fathers accountable became another thankless task, going unrecognized and invalidated by both the fathers and legal authorities. For example, Laura expressed anger and resentment over being forced to hold the father accountable in court, feeling that the legal system failed against the father's coercive acts: *"My ability to just be able to do it all and know that I cannot rely on him for anything... knowing the number of things [parents] have to go through to be the present parent...then for the courts to allow the toxic parent to continue to abuse that present parent through the courts is shocking that they would add that on top of everything else that present parent has to do."*

All participants, regardless of the financial, social and legal support they had, recalled how their continual efforts to hold the father accountable negatively impacted their emotional, financial, occupational, social, and psychological well-being. Laura, Pat, and Angela reported diagnoses of PTSD. Pat and Angela mentioned that their PTSD symptoms necessitated leaves from work. Four participants recalled the emotional strain of mitigating HCC affected their relationships, notably Jen, recounting how stress and sadness led them to socially withdraw: *"I would lay in my bed and not go out... it's not good, I know, but sometimes that's how to deal with the stress."* Even Sarah, with more legal knowledge and financial leverage, still experienced significant health challenges as she tried to protect herself and her son from the father's maltreatment, describing the experience as a *"full-bodied stress."*

Concern for Children

All participants voiced their deep concerns about the immediate and lasting effects of their children's exposure to the father's maltreatment and their own psychological and emotional distress. Pat expressed: *"They just get away with whatever they want, and it doesn't just affect the other parent; it also ends up affecting the kids in the long run, and that's where the issue lies."*

Laura reported significant financial and legal power imbalances and voiced her concern for the moral example the courts set for her children: *"[My son] said, 'I don't understand why you respect the court so much when you see what they do to us.'" All participants expressed concerns about exposing their children to their emotional distress. Jen, who experienced limited parenting time, financial restrictions, and less legal support compared to other participants, reported experiencing intolerable stress: "I'll break down in front of my youngest...he was crying...I tried to hold it in...they can see it...he said he wished he could sacrifice himself...I knew he was talking about suicide."* Zeeya echoed concerns about her children's loss of resources due to the costs of ongoing litigation, therapy, mediation, and other services, saying: *"You know who would benefit from this money? The children!"*

Six out of six participants expressed concern about their children's exposure to their fathers' maltreatment. Participants expressed their main concern was that their children would model their father's behaviour in their relationships. In their attempts to quell the effects of the father's maltreatment on their children, Sarah and Zeeya reported relying heavily on their social networks with their goal of raising their children in healthier social environments.

Participants reported fears that their children's exposure to their distress, their father's maltreatment, and the lack of effective court intervention could impede their children's ability to regulate emotions, engage appropriately in relationships, and trust in moral authority. Jen's

account highlights how resource disparities compromise the ability to manage distress. At the same time, Sarah and Zeeya's rich social networks were driven by their desire to model healthy social behaviours and relationships, which helped them cope with stressors in HCC dynamics.

Something Needs to Change

Participants advised other parents embroiled in HCC, recommended reforms to the family justice system, and described their ongoing advocacy for changes to facilitate social justice for parents and children in HCD and HCC dynamics.

Advice to Other Parents

Most participants recommended that parents facing HCC not attempt to befriend or engage the father but rather seek immediate legal and psychological help from professionals who understand HCC dynamics. For example, Zeeya noted the importance of seeking therapy as early as possible to learn ways to assert and maintain boundaries with the father: *"Don't try to be friends with him... don't give up, don't give in... establish boundaries even if it makes you uncomfortable... lawyer up because you will need support in all ways, legal and emotional."* Sarah echoed the challenges of resisting emotional entanglement with the father, which she found harder than managing the legal aspects: *"I didn't know not to go to couple therapy with an abusive person... they will use therapy as a weapon in court."* Pat reported the negative emotional impact of court delays and challenges presenting her evidence in court, recalling how early trauma therapy, particularly eye-movement desensitization and reprocessing (EMDR), helped her to handle her emotional distress and communicate effectively in court proceedings. Moreover, Angela, Laura, and Pat recommended that parents plan to anticipate changes in the external environment, like COVID-19, which would delay court processes. Angela noted: *"It's*

important to prepare ahead [for slowed courts] ... get your lawyer and streamline a co-parenting plan... this will save you time and money."

Parents' Recommendations for Court Reform

Parents shared recommendations for legal safeguards to detect, address and mitigate HCC dynamics, highlighting systemic failures and promoting reforms. They expressed concerns about the absence of a bill to criminalize coercive control, legal education among legal professionals about HCD and HCC, and how legal counsel can sometimes worsen HCD and HCC dynamics by providing unhelpful guidance. Pat expressed: *"The courts have a lot of power... They don't use it for good... they let [litigation] drag on and go on for years...we do not have a parenting or separation plan or agreement, we're not divorced, and we are over three years into this...the only way that I will stop being abused in the courts is for them to put an end to it."*

Pat advocated that courts enlist immediate penalties, like monetary fines and reduced parenting time, to hold the father accountable for failing to follow court orders. Zeeya alluded to courts' outdated knowledge of coercive power dynamics in family systems and recommended these systems embed psychological supports to counter the adversarial nature of court proceedings. Moreover, like Jen, Pat, Angela and Laura, Zeeya advised against having judges as sole decision-makers, going so far as to recommend the inclusion of juries to decrease bias. Angela recommended binding arbitration to streamline proceedings.

Overall, parents' recommendations underscored the vital need for systemic reforms to the administration of justice and protect families from the enduring financial and emotional harm to them and their children that result from HCC dynamics.

Ongoing Fight for Social Justice

Participants shared their ongoing efforts to advocate for justice amidst the challenges of HCC. The women exemplified diverse approaches to advocacy, from grassroots organizing and public outreach to leveraging legal processes. Importantly, they expressed a collective purpose to reform an unjust system that fails to protect families from the detrimental effects of HCC.

Jen felt that part of overcoming her fear of authority was finding safe spaces, such as connecting with other women experiencing HCC and joining organizations like the Women's Coalition and Child U.S.A. She expressed a desire to tell her story and to gather other women to join her in advocating for court reform: *"If we unite, we can do something! I joined the women's coalition for all women who experienced trauma [in the courts] ... we are having a rally in Washington, D.C., for family court reform... we need some boots on the ground!"*

Sarah found that participating in an HCC Facebook group helped normalize her experience and educate her on unhealthy relationships, giving her the knowledge and confidence to assist others. While not permitted by law in Canada or in most US jurisdictions, Pat and others emphasized the importance of public awareness and social media coverage to increase the public's understanding of HCC, hoping to drive systemic change.

In contrast, Sarah focused on using the legal system to hold the father accountable. Equipped with legal knowledge and representation, she prepared for trial and actively engaged in legal proceedings to strengthen her position and counter the father's evidence. In the next chapter, I will summarize and discuss these findings and make policy, practice, and research recommendations.

Chapter 5: Discussion

This study aimed to explore how six participants' made sense of their lived experiences of HCC throughout the COVID-19 pandemic. This analysis illuminated both the shared and distinctive ways participants experienced maltreatment, their challenges in boundary setting, and how these dynamics evolved in the context of the pandemic. In this discussion, I compare this study's results with the existing literature on HCD/HCC and the impact of the pandemic on co-parenting dynamics.

Summary of Findings

Overall, all participants recounted how they experienced maltreatment from the father in any context in which they would try to set or maintain a boundary, decreasing their autonomy and exacerbating conflict. Participants' experiences of maltreatment from the other parent in this study align with the existing literature on HCD/HCC dynamics (Garber, 2020; Sullivan et al., 2023; Polak & Saini, 2019) since maltreatment was both overt and covert (Eddy, 2010, 2007; Garber, 2020; Polak & Saini, 2020; Sullivan et al., 2023). While participants reported physical abuse and harassment were easier to identify, they all described challenges in identifying emotional and psychological abuse. Notably, participants indicated that having the time and space to reflect on the father's behaviour, along with access to social, economic, and legal support, was crucial in helping them understand and acknowledge the maltreatment they were experiencing.

Awareness of Maltreatment

The finding that emotional and psychological maltreatment is hard to detect aligns with the existing literature on HCD/HCC co-parenting dynamics. These forms of maltreatment are particularly challenging to identify within the inherently adversarial legal context (Target et al., 2017; O'Hara et al., 2019). There was also evidence in their accounts that lesser financial

resources and therefore less access to justice can exacerbate power imbalances in legal disputes, which can obscure maltreatment from the other parent. Moreover, their accounts highlighted how the adversarial nature of the legal system was often exploited by fathers to prolong conflicts, exhausting the mothers financially and emotionally and adversely impacting both them and their children. This finding aligns with the current literature (Hertzman et al., 2017; O'Hara et al., 2019).

Male Privilege in Maltreatment

Consistent with Treloar (2018; 2019), who applied feminist, critical and developmental lenses to HCD, misogyny and male privilege were evident in all participants' accounts. Many participants expressed a need to make themselves feel "smaller" or be responsible for their ex-partner's emotions, aligning with Treloar's (2018; 2019) feminist analysis of these dynamics. Also, all participants initiated their separations, aligning with the finding that divorce in North America is most often initiated by women (Bruning, 2022). Furthermore, participants described how the father's aggression toward them, and their children increased following their separation and divorce. Particularly how legal proceedings provided the father with a new means to exert control and limit their autonomy, regardless of their access to financial resources.

The current study illustrates a more nuanced view of how gender role stereotypes and misogynistic values contribute to HCD/HCC. Moreover, this finding potentially expands on research that suggests men are more likely to perceive heightened threats and utilize legal and financial resources as strategies to cope with divorce impasse (Treloar, 2018, 2019).

Systemic Power Imbalances

Participants' accounts illustrate how systemic power imbalances exacerbate HCD/HCC dynamics, making it more difficult to set and maintain healthy interpersonal boundaries post-separation. Participants reported significant financial strain due to their ex-partner's relentless litigation, particularly so for participants who had been less connected with family support and had less money prior to their separation and divorce. The finding that systemic power imbalances in HCD/HCC hinder women's ability to maintain boundaries post-separation aligns with research showing that women face more significant financial and occupational vulnerability during divorce, which contributes to poorer overall parental outcomes (Amato, 2010; Cano & Garcia, 2022; Leopold, 2018; Van den Eynde et al., 2019; Carter & Herbert, 2012).

Calls for Change

Participants often cited their exasperation with the lack of safeguards in the legal system to detect the power dynamics at play, which seems inherent in family courts (Carter & Herbert, 2012; Leblanc, 2023; Pritchett, 2018). Indeed, participants expressed frustration and embarrassment at being perceived by judges as equally culpable for parental conflict. Participants expressed frustration over court applications for basic needs like child support, spousal support, and health insurance (in the U.S.), as judges failed to consider the fathers' boundary violations and controlling behaviours. Research has documented similar patterns of gender-based discrimination against women in legal proceedings (Bailey et al., 2020; Cano & Garcia, 2022; Park & Rosen, 2013).

Fears for the Children

Participants universally expressed concerns about the impact of maltreatment and HCD/HCC on their children's emotional and psychological well-being, with one parent reporting that their child experienced suicidal ideation. Others worried about shared parenting time, fearing

that exposure to the fathers' behaviours would lead their children to emulate them. Research has documented the immediate and long-term effects of HCD/HCC on children (Polak & Saini, 2018; Houston et al., 2017; Sullivan et al., 2010; 2023). A child-focused approach that considers family systems, boundaries, and interactional patterns rather than solely parental pathology is essential for addressing these challenges (Sullivan et al., 2010; Van Der Wal et al., 2019).

Effect of the COVID-19 Pandemic

Participants reported that the COVID-19 pandemic catalyzed increased conflict while creating opportunities for boundary setting. Notably, participants with greater access to legal, financial, and social resources found the pandemic allowed them to hold the fathers more accountable due to restrictions. Alternatively, participants who experienced financial, social support and legal challenges found that travel restrictions and social distancing regulations helped.

Some participants recalled that legal delays due to the pandemic worsened their power-imbalances and exacerbated their stress, a finding consistent with the literature on the impacts of COVID-19 related legal delays (Goldberg et al., 2021; Kaur & Behre, 2020; McBratney, 2020; Rankin, 2021; Scott, 2020; Wilke et al., 2020), exacerbated in some cases by the lack of publicly funded health insurance among some American participants. This is consistent with the literature on contextual impacts on HCD/HCC dynamics (Adams et al., 2021; Sahithya et al., 2020; Wilke et al., 2020; Menendez et al., 2024; Zacher & Rudolph, 2020). However, one participant reported that COVID-19 precautions supported their efforts to establish and maintain boundaries.

Generally, the current study findings are consistent with research that found correlations between heightened stress with increased risk of and incidence of family violence during the pandemic (Adams et al., 2021; Sahithya et al., 2020; Wilke et al., 2020; Menendez et al., 2024;

Zacher & Rudolph, 2020).

Male Privilege in COVID-19 Co-Parenting

Participants noted experiencing male privilege and misogyny in their ex-partner's values during the COVID-19 pandemic. For example, their accounts evidenced how the fathers prioritized their own needs over health guidelines, refusing to follow protocols and using the crisis for personal convenience, including one participant whose ex-partner was a police officer. Further, participants related that fathers would subtly break COVID-19 regulations and precautions, such as not informing about COVID-19 test results or lying about the precautions they were taking. Participants reflected on whether to report conflicts, risk escalating tensions, or ignore the issue to avoid further disputes. While courts have generally supported and encouraged parents' adherence to COVID-19 precautions, controlling behaviors that come "up to the line" but do not cross it, or violations that are not provable would occur; this was more difficult to manage, in this crisis context. Therein, these participants' accounts provided additional dimensions to the challenges in maintaining boundaries in this context. These accounts also echo broader discussions within the literature on misogyny in familial settings (Emery, 1994; Sullivan et al., 2023).

Vexatious Litigation

Another key finding in this study is how most participants reported the fathers would manipulate the legal system, often with accusations of their emotional instability, in their attempt to paint the mothers in a negative light. This finding aligns with previous research (Polak & Saini, 2019) on the adversarial nature of HCD/HCC, where fathers would utilize litigation as a form of coercive control. The mothers were frustrated with the barriers they experienced to putting their evidence properly before the court, a financially burdensome endeavour. This

finding highlights the limitations of the North American family court system in addressing the complexities of HCD/HCC. It underscores the need for legal reforms that consider the psychological impact of ongoing litigation on both parents and children.

Conclusion

This study offers important contributions to the literature on HCD/HCC, particularly in illustrating how coercive control, misogyny, and systemic power imbalances intersect to exacerbate maltreatment in post-separation contexts. While existing literature documents post-separation conflict and aggression, this study underscores the role of systemic barriers and the manipulation of the legal system by one parent to prolong conflict and disempower women and children. Moreover, this study further contributes to understanding how these dynamics affect not only mothers but their children.

Implications for Practice

The following recommendations integrate systemic change at both the individual and institutional levels, advocating for reforms that address both the immediate needs of individuals in HCD/HCC and the broader social institutions and policies that perpetuate power imbalances.

Implications for Legal Professionals

A key finding in this study is the critical need for systemic change in how the justice system handles HCD/HCC. Participants' experiences underscore the importance of creative solutions that provide timely, accessible, and affordable interventions and services for individuals caught in these dynamics. Further, psychological knowledge must be accurately represented so as not to be misused in ways that inadvertently harm marginalized populations. Notably, legal professionals must recognize and account for inherent biases that influence their decision-making, particularly implicit gender, racial, or other stereotypes.

Specific recommendations for legal professionals and policies include the implementation of early dispute resolution mechanisms that are tailored to HCD/HCC dynamics and cases, including affordable legal representation and psychological services for all family members in HCD/HCC. Also, while respecting the inherently adversarial nature of the judicial system and the need for evidentiary processes, existing training for judicial officers, lawyers, and court personnel on the specific dynamics of HCC should be enhanced. Finally, it is necessary to develop streamlined processes to address manipulative tactics that prolong litigation.

Implications for Counsellors

Navigating HCD/HCC presents unique challenges for counsellors due to the complex mix of psychological, legal, cultural, and systemic factors. To provide adequate support, counsellors need specialized training, interdisciplinary collaboration, and advocacy for systemic change. Without the proper knowledge and resources, they may struggle to identify and address the ongoing nature of HCD/HCC, especially when coercion or abuse is involved. This section offers key recommendations for professional development, systemic reform, community advocacy, and prioritizing children's safety and well-being.

Effective Use of Self

Fostering Awareness and Curiosity

Counsellors must approach each case with openness and a commitment to understanding the complex dynamics of HCD/HCC. Implicit biases, legal constraints, and systemic power imbalances all shape these conflicts and can heighten trauma responses (Lux et al., 2024). To prevent burnout and vicarious trauma, counsellors should establish strong psychological and emotional support systems, including peer consultation and ongoing supervision (Ordway et al., 2020)

Professional Development

Specialized training is essential for integrating trauma-informed approaches, intersectionality, legal knowledge, and coercion dynamics (Campbell, 2017; Lux et al. 2024). Counsellors must be able to recognize coercive control, understand how cultural norms influence perceptions of abuse and identify manipulative tactics often used in high-conflict disputes (Sheehy & Boyd, 2020). Since coercion is rooted in entitlement and control, perpetrators may attempt to divert attention to issues like parental alienation to mask their behaviour (Bancroft et al., 2011). Developing the ability to discern these patterns is key to effective intervention (Tabibi et al., 2021).

Mandatory domestic violence training should be gender-sensitive and intersectional, ensuring counsellors assess for abuse before evaluating broader family dynamics (Bancroft et al., 2011, Lux et al., 2024). Unchecked coercion can distort narratives in high-conflict cases, making it crucial to critically evaluate training programs and their effectiveness—many of which lack thorough assessments of their impact (Lapierre & Côté, 2016; Lux et al., 2024; Neilson, 2018; Zaccour, 2018).

Advocacy for Court Reform and Fostering Hope

Counsellors play a crucial role in helping families navigate custody disputes by informing them about ongoing court reforms and encouraging advocacy, which fosters a sense of agency and hope. To strengthen this support, counsellors must ensure families understand their rights and available resources, empowering them to make informed decisions (Bancroft et al., 2011). Counsellors may also advocate for children's safety beyond individual cases, involving broader efforts such as supporting legislation prioritizing child well-being, promoting trauma-informed training for legal professionals, and fostering interdisciplinary collaboration to handle high-

conflict custody cases. These combined efforts provide children with a safer, more supportive environment during custody disputes (Lux et al., 2024).

Challenging Cultural Norms and Addressing Coercive Control

Counsellors must actively challenge cultural narratives that minimize or normalize coercion and abuse by shifting both professional and societal perspectives to name and address abuse in all its forms explicitly (Bancroft et al., 2011; Lapierre & Côté, 2016; Milchman et al., 2020). Challenging coercive narratives entails counsellors using open-ended questions with men and women to explore behavioural patterns, clearly outlining the legal consequences of coercive actions, and recommending long-term participation in quality abuse intervention programs (Bancroft et al., 2011; Lux et al., 2024).

Supporting survivors means fostering empowerment rather than reinforcing self-blame. Instead of dictating decisions, counsellors can encourage survivors to think critically about their options, use descriptive language rather than labels when discussing coercion and abuse, and recognize manipulative tactics in legal proceedings and custody disputes. (Bancroft et al., 2011; Bancroft, 2003). Ensuring survivors receive strong community support helps reduce isolation and strengthens their ability to navigate legal and personal challenges (Bancroft et al., 2011; Treloar, 2018; 2019).

Encouraging and Promoting Interventions

Counsellors endeavor to effectively address coercion and systemic inequalities requires their proactive advocacy for education, and systemic policy change (Bancroft et al., 2011; Bancroft, 2003; Lux et al., 2024). Counsellors can support public awareness campaigns that highlight coercion and abuse while also advocating for more excellent representation of women in policy-making bodies focused on coercion in interpersonal relationships. Counsellors

encouragement of men to engage in anti-abuse efforts and model respectful behaviours can actively help to shift societal norms (Bancroft et al., 2011; Bancroft, 2003). Moreover, counsellors challenging victim-blaming narratives in education, media, and public discussions is essential in changing perceptions around coercion and abuse (Bancroft, 2003; Milchman et al., 2020). Counsellors advocating and presenting their knowledge to schools can play a crucial role in prevention, through teaching children about healthy relationships and abuse awareness, which can help break cycles of violence earlier (Bancroft 2003). Additionally, counsellors advocating for economic policies that promote financial stability for survivors can reduce dependency on abusive partners and empower individuals to regain control over their lives (Bancroft, 2003).

Treatment Programs, Therapy Considerations, and Prioritization of Children's Well-Being

Abuse intervention programs must include dedicated support for victims to prevent reinforcing abusive dynamics. Before starting individual or couples therapy, counsellors must assess for coercion, as abusers can manipulate therapy to maintain control (Bancroft, 2003). Abuse should be treated separately from mental health and addiction issues to ensure accountability and encourage genuine behavioural change (Bancroft, 2003).

High-conflict divorce and co-parenting can overshadow children's needs, exposing them to ongoing stress and emotional harm (Neilson, 2018; Tabibi et al., 2021). A child-centred approach is crucial to protecting their well-being (Tabibi et al., 2021). Counsellors must engage in training that allows them to identify and counteract manipulative tactics in custody disputes, especially in cases involving domestic violence.

Ultimately, by implementing the later strategies, counsellors are in a better position to help families break cycles of conflict, support healthier co-parenting dynamics, and advocate for systemic changes that prioritize safety and equity for all family members.

Recommendations for Future Research

Future research should explore the role of systemic reform in addressing these power imbalances, and how supportive networks can help mitigate the effects of HCD/HCC on both parents and children. Accordingly, research which addresses trauma and reflexivity in family systems is essential, as this investigative focus can examine how interpersonal trauma impacts relationship dynamics in this population. Moreover, the trauma experienced in these relationships often activates responses such as emotional withdrawal or hypervigilance, which can perpetuate conflict and hinder the healing process and skill acquisition. Future studies should also investigate how trauma-informed interventions, particularly those focused on self-examination, the ability of individuals to reflect on their own emotional experiences and responses, can help reduce these defence mechanisms. A trauma-informed approach can aid in fostering environments that help parents understand themselves and express their experiences in the context of an objective way, without confrontation, which can prove invaluable in reducing conflict.

Further, given that individuals involved in HCD/HCC dynamics are unlikely to experience empathy or understanding from their co-parents, it is essential to explore how therapeutic practices can model this reflexivity and validation. Interventions aimed at reducing trauma responses embedded in these systems could also provide crucial insights into effective therapeutic strategies that mitigate the risks of retraumatizing individuals and reinforcing defensive behaviours.

It is also essential to investigate the impact of socialized gender stereotypes and power imbalances on HCD/HCC dynamics. Much of the literature has focused on individual psychological pathology, often neglecting the broader societal forces that shape these dynamics.

Exploring how gender stereotype attitudes and coercion in interpersonal relationships contribute to economic, social, and legal power imbalances, and how these imbalances shape the dynamics of HCD/HCC, would provide deeper insight into how these families function. Additionally, the influence of intersectional identities on HCD/HCC situations, is worthy of examination. Moreover, the intergenerational transmission of gender stereotypes and conflict behaviours, particularly how children raised in HCD/HCC environments internalize these dynamics and carry them into their own adult relationships, can be explored.

The contribution of systemic factors, such as legal systems and social support structures, in the context of HCD/HCC dynamics is ripe for investigation. Such research could illuminate how HCD/HCC dynamics could be mitigated or exacerbated. For example, researchers could examine how legal and programmatic reforms improve affordability and timeliness. Another potential research focus could be the impact of social and psychological support networks on the well-being of parents, including their ability to set and maintain boundaries. Potentially, the benefits of alternative dispute resolution processes can mitigate the adversarial nature of interactions in the legal system.

In conclusion, future research must take a multifaceted approach, combining insights from trauma, intersectionality/intersectional location, gender studies, legal studies, and family systems to gain insights that help inform the effectiveness, importance, and need for more holistic interventions for HCD/HCC families, in their legal, familial, parenting, and personal contexts. Further, in focusing on the intersection of trauma, systemic power imbalances, and socialized gender stereotypes, future research can illuminate new pathways for helping families break out of cycles of conflict and move toward more cooperative and healthy co-parenting practices.

Personal Transformation

Throughout this research study, I learned that hermeneutics complement the iterative IPA approach to analysis. I became more aware of my biases and natural tendencies toward selective attention with each analytic loop. Therein, in this analytic process, I learned that hermeneutic thinking encourages reflexivity, helping me to recognize my own biases while allowing space for the perspectives of others. Further, this reflexive space enhances my understanding and appreciation of the complexity of others' intersectional experiences, as with each iteration, I learned new information expressed by participants, fostering fresh insights and curiosities.

As a psychotherapy practitioner, I found the concept of hermeneutic loops, bracketing, and acknowledging my biases akin to mindfulness practice. I connect this analytic process to mindfulness practice and consider bracketing as part of the repertoire for best practices to work with families in HCD/HCC since working with these families requires a balanced, grounded perspective and openness. Moreover, if this reflexive practice can benefit researchers' understanding of themselves and others, it will likely benefit other professionals working with families in HCD/HCC to decrease stigma.

If I were to do things differently to equalize power with my participants, I would have taken a more collaborative, participant-centred approach. I would have ensured transparency and accountability by sharing findings with participants before presenting them to supervisors or during my oral thesis defence. Participants would have had the authority to approve, request revisions, reject, or correct any misrepresentations of their narratives, reinforcing their autonomy and control over how their experiences were represented.

In the informed consent process, I would have addressed power imbalances by openly discussing and acknowledging how power operates at individual, interpersonal, and systemic levels and its impact on the research process. To ensure participants felt safe and empowered, I

would have maintained ongoing consent discussions, normalized trauma responses, and collaborated on check-in methods throughout the study.

To challenge systemic oppression and bias, I would have acknowledged how implicit cultural biases shape research and contribute to discrimination, particularly for those with multiple marginalized identities. By actively reflecting on my privilege and biases, I would have invited participants to identify and address any biases in the research process, fostering social justice and awareness in my approach. Ultimately, I would have prioritized participant agency, ethical rigour, and balanced power dynamics, ensuring that findings authentically represented participants' experiences in a way that empowered rather than extracted.

I also learned that my life experiences of oppression, misdiagnosis, learning differences and systemic barriers shaped my approach to data interpretation, as these experiences instilled within me an innate heightened awareness of complexity and nuance.

My lived experience of undiagnosed/misdiagnosed learning differences and dissociation in educational and familial contexts helped me understand that surface-level narratives do not fully capture underlying experiences. Recognizing that understanding experiences requires a beginner's mind helped me stay open to multiple interpretations instead of relying on automatic assumptions.

My experiences of dyslexia influenced how I approached interviews and data analysis. For example, in the interview process, I could utilize my strong verbal skills to facilitate a balanced conversation, flowing and ebbing between broad and probing questions. Moreover, I visualized, mapped, and diagrammed the data in my analytical approach to identify patterns and universal elements across participants' accounts.

The challenges from my experiences of systemic and interpersonal trauma and co-parenting in the context of COVID-19 helped me persist through personal and systemic challenges, reinforcing my motivation to amplify marginalized voices. Moreover, my experiences of interpersonal and systemic trauma heightened my vigilance in my ability to detect verbal and non-verbal cues in others, which helped me recognize signs of distress to check in on participants, fostering a collaborative interview process. Addedly, my lived experiences positioned me as an ally with participants rather than one who would prioritize an authoritative stance for my gain. I honoured participants' voices and agency as an ally while maintaining a critical, reflexive stance on my interpretations.

Additionally, I learned that while individual experiences may appear to share commonalities, they still require deeper examination. Each person's experience contains unique elements shaped by their specific lived reality. Moreover, this curiosity about other's experiences must be paired with humility to maintain reflexivity and openness. Another insight I gleaned from this process is understanding how texts can represent a snapshot in time. Looking back at my notes from 2020 compared to 2023, I can see the evolution of my insights, shaped by the practice of bracketing throughout the iterative process.

A main transformative element in this research project for me was the participants' gift of their time and openness to express their stories and emotional experiences, despite how raw the emotional experience was for them at times throughout the interview. Another aspect of their accounts which touched my heart related to their expressed compassion toward the maltreatment the fathers experienced despite the hardships they experienced co-parenting with them. Moreover, their persistence to advocate for court reforms and connect with and advocate for other parents experiencing the hardships of HCD/HCC, despite their ongoing feelings of

futility in their efforts to do so. Ultimately, their accounts conveyed leaps and bounds of their strength and grit in the face of the chronic maltreatment they experienced.

Another transformative element of this experience for me entails my working partnership with my thesis supervisor, Dr. Jeff Chang. Throughout this process, I experienced personal setbacks, delaying my completion of this research study. Moreover, I discovered that I experienced an undiagnosed learning difference. Throughout my challenges with these factors, Dr. Chang did what other educators did not, which is, not give up, seek to understand, encourage, offer learning strategies, and guide me through this process. Moving forward in my career and personal life, I will remember Jeff's belief in me, kindness, and the strategies he bestowed on me and offer such qualities as patience, encouragement, and the seeking to understand others.

Plans to Disseminate Research Results

I plan to host community workshops and talks at libraries, social service agencies, and community centers to present key research insights in an engaging and accessible way. These interactive discussions will create space for dialogue, helping participants connect with complex findings in a way that feels relevant to their experiences. To further extend the reach of this knowledge, I plan to offer free or low-cost webinars for counsellors, social workers, and frontline professionals, ensuring they can integrate research into their practice and make an immediate impact on those they serve.

For individuals who prefer quick, digestible information, I will create easy-to-read infographics and fact sheets to simplify complex findings, making them more accessible for clinics, counselling centers, and social media platforms. I will also use platforms like Instagram, Twitter, and LinkedIn to share bite-sized insights, real-world applications, and interactive discussions, engaging a broader audience beyond traditional academic spaces. Additionally, I

plan to record podcasts and short videos to break down research findings into relatable, everyday examples that resonate with counsellors, families, and the general public, ensuring valuable knowledge is not confined to written reports.

To maximize outreach among professionals, I will collaborate with organizations such as the Canadian Counselling and Psychotherapy Association (CCPA) to disseminate findings through newsletters, conferences, and training sessions. I will also implement train-the-trainer sessions to equip professionals with the knowledge they need to share research insights within their networks, ensuring the sustainability and continued expansion of research-based practices. To enhance public awareness, I will engage with the media by publishing op-eds, contributing to professional magazines, and collaborating with journalists to position research insights within mainstream discourse. Additionally, I will develop an online resource hub featuring downloadable guides, case studies, and FAQs to ensure that research findings remain accessible to non-academic audiences over time. Lastly, I plan to form partnerships with legal and mental health professionals to integrate findings into practice, policy discussions, and intervention strategies, bridging the gap between research and real-world applications to drive meaningful change.

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Appendix A: Interview Schedule

How do divorced parents interpret their experiences of high-conflict co-parenting throughout the COVID-19 pandemic?

Briefing

I will debrief the parameters of confidentiality, offer participant the space to ask questions/seek clarification, and elicit the participant's consent.

Initial question:

How do you define high conflict?

Low communication disagreeing on almost anything, acrimonious: using the kids to manipulate and hurt her.

Co-parenting before the COVID-19 pandemic

What did conflictual co-parenting mean to you in this context?

Describe what co-parenting with your ex was like for you before the pandemic (listen for key concerns)?

What issues concerned you the most while co-parenting at this time and why?

How did high conflict co-parenting affect your relationships with other people? Partner, family, friends, work colleagues?

What does less conflict in co-parenting look like?

What do you wish your co-parenting to be like?

Probe key concerns

- How did you manage?
- What was important to you?
- What was it like for you to experience _____?
- tell me more about _____
- what do you mean by _____?
- what choices did you have to make/ how did you respond?

POST-SEPARATION PARENTING IN THE FACE OF COVID-19

- what emotions did you notice and how did you experience them in your body?

Co-parenting at the onset of the March 2020, COVID-19 pandemic

What was co-parenting with your ex like at the onset of the pandemic (listen for key concerns)?

With the threat of disease and all the shifting/immediate changes (homeschooling, lockdowns, remote work, etc.) what co-parenting issue(s) stood out to you as the most important?

What did conflictual co-parenting mean to you in this context?

How did the kids respond to the parenting?

How did high conflict co-parenting affect your relationships with other people? Partner, family, friends, work colleagues?

How did you divide/negotiate parenting time?

What surprised you about co-parenting in this context?

What were some areas of growth and challenge that you experienced in your co-parenting journey? What surprised you about co-parenting in this context?

Probe key concerns:

- How did you manage?
- What was important to you?
- What was it like for you to experience?
- tell me more about _____
- what do you mean by _____?
- what choices did you have to make/ how did you respond?
- what emotions did you notice and how did you experience them in your body?

Co-parenting throughout the COVID-19 pandemic

Describe what co-parenting with your ex was like throughout the pandemic? (listen for key concerns).

What co-parenting issues concerned you the most in this context?

what was that like for you? How did you manage?

How did high conflict co-parenting affect your relationships with other people? Partner, family, friends, work colleagues?

What did less conflictual co-parenting look like to you in this context?

POST-SEPARATION PARENTING IN THE FACE OF COVID-19

What were some areas of growth that you experienced in your co-parenting journey? What surprised you about co-parenting in this context?

Women's coalition

Closing question

If you could think of one significant change in your co-parenting throughout this time, what would it be?

What co-parenting advice would you tell your past self (pre-COVID-19 pandemic)?

what

Probe key concerns

- How did you manage?
- What was important to you?
- What was it like for you to experience _____?
- tell me more about _____
- what do you mean by _____?
- what choices did you have to make/ how did you respond?
- what emotions did you notice and how did you experience them in your body?

Debrief

Thank the participant for their time, engage in a wellness check and provide them with mental health resources if needed. I will inform the participant that I will follow-up with them in two weeks to seek their approval of the transcript.

Appendix B: Certification of Ethical Approval



CERTIFICATION OF ETHICAL APPROVAL - RENEWAL

The Athabasca University Research Ethics Board (REB) has reviewed and approved the research project noted below. The REB is constituted and operates in accordance with the current version of the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (TCPS2) and Athabasca University Policy and Procedures.

Ethics File No.: 24670

Principal Investigator:

Melanie Fuller, Graduate Student
Faculty of Health Disciplines/Graduate Centre for Applied Psychology

Supervisor/Project Team:

Dr. Jeff Chang (Supervisor)

Project Title:

Reflections of high conflict, co-parenting before, during and throughout COVID-19

Effective Date: February 2, 2024

Expiry Date: February 02, 2025

Restrictions:

Any modification/amendment to the approved research must be submitted to the AUREB for approval prior to proceeding.

Any adverse event or incidental findings must be reported to the AUREB as soon as possible, for review.

Ethical approval is valid for a period of one year. An annual request for renewal must be submitted and approved by the above expiry date if a project is ongoing beyond one year.

An Ethics Final Report must be submitted when the research is complete (*i.e. all participant contact and data collection is concluded, no follow-up with participants is anticipated and findings have been made available/provided to participants (if applicable)*) or the research is terminated.

Approved by:

Date: February 02, 2024

Paul Jerry, Chair
Athabasca University Research Ethics Board

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