

Dr. Benna Strober, Licensed Psychologist

71 Smith Avenue, Mount Kisco, NY 10549

(914) 329-5355 • docbenna@gmail.com • www.bennastrober.com

Reunification therapy is one of the most challenging and difficult therapies for many reasons. Common challenges include parents who may be angry with each other, one or both parents and/or the child(ren) may be wary of the reunification process, children often do not want to attend the therapy, and parents may want the therapy to go “their way.” Because of the common problems that occur in many reunification therapy cases this outline describes the role of each party. I require each party sign and agree to follow these guidelines.

Role of custodial parent: This is the parent who currently lives with the child(ren) and typically has a good relationship with the child(ren). This parent is often having to manage their own, as well as their children’s concerns about the process. This parent plays an important role in the success of the therapy. This parent is expected to provide their support for the process by:

1) Scheduling the child(ren)’s appointments in a timely manner, at the frequency recommended by the therapist, and/or as ordered by the court.

2) Not engaging in discussions with the children about therapy. This is an important “rule” because often, children, especially those who are very much against participating in the therapy, may not be accurate in their recounting of the therapy.

§ If your child initiates a discussion about therapy, one simple thing to remind them of is that therapy is for them and best if they keep it private.

§ If your child is resistant to attending sessions, I will work with you to brainstorm solutions and update you as needed about the progress of the therapy and what you can do to help.

3) Scheduling an appointment to discuss any concerns you may have with me versus discussing the concerns with your children.

4) Telling the child(ren) they need to follow all recommendations of the therapist, and trust that the reunification therapist is going to ensure their emotional well-being, safety, and happiness.

5) Following the reunification therapist’s recommendations and allow the therapist to follow the RT process.

Role of estranged parent: This is the parent who has often not seen his or her child(ren) in some time and is using reunification therapy as a tool to rebuild the relationship (and resume visitation in most cases). This parent is usually very eager for therapy to begin and sometimes wants to

pressure the therapist to move faster and ‘tell the other parent’ what they should or shouldn’t do. This parent also sometimes struggles to accept feedback from the child(ren) and apologize or make amends when needed. You are more likely to achieve success if you:

1) Understand that the problems took a long time to occur, and that therapy cannot change things overnight. The parent must be patient and trust Dr. Strober will move things along at a pace appropriate given the specific circumstances of the case. Accept feedback from the child(ren) about what the parent has done to contribute to problems or hurt the children. Follow Dr. Strober’s recommendations about when to send written communication or be available for phone, Doxy, or in-person sessions.

This process will take longer if you:

1. Tell Dr. Strober what to do about the other parent (e.g. expecting the therapist to “make” the other parent do something).
2. Are defensive and blame the child or the other parent.
3. Do not, when necessary, apologize sincerely and reassure the child(ren) he or she wants to make amends and earn back their trust.
4. Do not follow the recommendations of the therapist regarding interactions with your children.

Role of the child(ren): 99% of children do not want to attend reunification therapy. They have often been hurt by the other parent, and sometimes have been told negative things about the other parent (or misleading things). They often do not have the “full picture” of what has happened between their parents and are often adamant that they do not want or need a relationship with the other parent. Therapy will be successful if the children do the following:

- 1) Attend therapy when their parent tells them they have a session.
- 2) Come to therapy with an open mind, ready to consider that the other parent is not “all bad” in the same way that their custodial parent is not “all good.” Be open to thinking about the situation from a new perspective and be open-minded about therapy helping to heal past hurts.
- 3) Trust that Dr. Strober has their best interest at heart and will only make recommendations when the therapist thinks they are ready (the child may not feel that way, but that’s where the trust comes in). Follow all therapist’s recommendations, knowing it will be “baby steps” of monitoring the progress, and no drastic changes.
- 4) Respect the confidentiality and privacy of your therapy sessions. Your parents have been advised not to discuss the therapy with you, because this often leads to problems for several reasons. It’s best if you focus on your individual relationship with your other parent.

Dr. Strober's role: The therapist is not on "team mom" or "team dad." Dr. Strober is also not going to only empathize with and validate the child's feelings. While Dr. Strober will do that at times, her role is to challenge the child(ren) to think and behave differently, and to gently move the process forward while taking note of: the estranged parent's behavior, the custodial parent's support, and the child(ren)'s well-being. As Ordered by the Court and/or applicable, Dr. Strober will provide updates to the Court or attorneys about the progress of therapy and everyone's adherence to these guidelines and recommendations.

If these guidelines are not followed, your case will be subject for review to determine an appropriate course of action, including but not limited to, sending a progress update to the Court and/or referral to an alternative provider.

FAQ's

1. How often do we meet?

The typical structure is:

Phase 1: One meeting with custodial parent, one with noncustodial parent, approx. 2-4 individual meetings with the child(ren), and review of materials.

Phase 2: Begin sessions with the child and parent together to improve communication, heal past hurts, establish goals for healthy relationship, and re-establish a positive and fun connection.

These sessions can vary from 6-20+ all depending on how severe the problems are and how supportive the other parent is of the process.

Phase 3: Sessions are spaced out or are scheduled "offsite" at fun locations, so the parent and child can have more natural interactions (at parks, museums, restaurants etc.).

Phase 4: Dr. Strober can help provide feedback to parents, attorneys, or judges regarding visitation and custody, and whether RT is needed anymore.

2. How much does it cost and will insurance cover it?

RT is \$375 per hour. Collateral time (reviewing documents, reading emails, phone calls to parents or collaterals is also billable time). Insurance coverage depends on your benefits. I am considered out of network for all plans, but many plans have reimbursement for out of network providers. I will give you a receipt with the appropriate codes for reimbursement.

3. Does it work? The situation might seem hopeless If RT has been ordered or recommended, it is typically because there are some significant problems between the parents, and between the parent and child(ren). Although challenging therapy, I have had successful outcomes with very complex cases. I have found the key to success is the custodial parent's encouragement and insistence on attendance in therapy, as well as the estranged parent's willingness to "start over" and make amends.

4. If I have concerns, what do I do?

Because of the nature of RT, I will not engage in email discussions with you. If you have concerns, you may email me to request a time to meet or to schedule a phone call. (Note: Even if your agreement is that one parent pays for RT services, I typically bill each individual parent for their own time spent in responding to emails, phone calls or check in sessions).

5. Who decides when RT is not working, and we can quit?

Although both parents and children have valued opinions, RT only works if Dr. Strober makes decisions about treatment (e.g. how often meetings occur, when meeting progress from in office to out of office, when another visitation is appropriate). In many cases, there is also a court order which has ordered RT and designated Dr. Strober as the one to direct the sessions and recommend further contact. If one parent unilaterally decides to quit RT before it has been recommended by Dr. Strober, I will write a summary letter to the Court and attorneys explaining the circumstances causing the RT to cease.

Other guidelines: (Please initial)

I understand both parents are required to sign releases for both attorneys at the outset of treatment

Dr. Strober will always cc the other parent in email communications with me, and I understand I am also to cc the other parent in email communications with Dr. Strober (no "one-sided" communications)

I understand Dr. Strober will not engage in clinical discussions or provide recommendations through email. If I have concerns between sessions, I can schedule a phone call or schedule a separate appointment.

I agree that RT clients must keep a credit card on file so that collateral contacts with phone, email, or your attorney can be billed on a regular basis.

Custodial parent:

I have read the above and agree to follow the RT guidelines. I understand session notes will not be released, so that confidentiality can be ensured, and the details of the reunification therapy are protected. *Treatment summaries may be provided on a regular basis (fee is based on the time it takes to write).

I agree to follow the recommended steps listed above to help therapy succeed:

Name

Date

Non-Custodial/Estranged parent:

1. I have read the above and agree to follow the RT guidelines.

2. I understand session notes will not be released, so that confidentiality can be ensured, and the details of the reunification therapy are protected. *Treatment summaries may be provided on a regular basis (fee is based on the time it takes to write).

3. I agree to follow the recommended steps listed above to help therapy succeed:

Name

Date