



**Missing  
Children  
Europe**



**The Voice of the Child**  
**in**  
**International Child Abduction Proceedings in Europe**

**Work Stream One: Survey Results**

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## **Executive Summary**

### **Background**

This report presents the results of Work Stream 1 from the Voice--project, a study focusing on the family context and family resilience in relation to the wellbeing of the child, in the context of parental abduction.

Parental child abduction is an experience that heavily impacts the entire family and the consequences may linger for years. Families need to be sufficiently resilient to deal with the strain that is caused by the abduction and to improve the child's wellbeing.

Family resilience is measured by the following indicators:

- parenting stress,
- parents' mental wellbeing (in terms of anxiety and depression),
- parents' life satisfaction,
- openness of the parent-child communication,
- financial strain, and
- parents' social support.

This study analyses whether parents differ on these indicators of resilience according to their role in the abduction and the child's place of residence, and whether the child's wellbeing is related to family resiliency. Additionally, it investigates the wellbeing of the parent in relation to the support they received from professional stakeholders, such as the mediator, the central authority and the attorney, during and after the child's abduction. Finally, the report addresses whether mediation and the hearing of the child influence the child's wellbeing. Ultimately, the goal of this Work Stream is to formulate recommendations regarding the procedures that are followed in the case of a parental child abduction, and regarding the training of legal professionals, so that the child's and the parents' wellbeing are improved.

### **Data and Participants**

Quantitative data is used from an online survey among parents who have been involved in an international parental abduction of their child. The survey was administered among parents in Belgium, France and the Netherlands. In the participating countries, administrative data of parental abduction cases were collected by Child Focus (Belgium), Centre Français de Protection de l'Enfance-Enfants Disparus (CFPE-Enfant Disparus, France), the French Central Authority, and Centrum Internationale Kinderontvoering (Centrum IKO, the Netherlands). The data gathered is part of project eWELL - Enhancing the Well-being of Children in Cases of International Child Abduction (Van Hoorde et al., 2017) which focused on the ways in which an international parental abduction affects the wellbeing of the child.

Three-hundred fifty-three from a total of 2404 eligible respondents participated in the online survey resulting in a response rate of 14.7%. A non-response analysis based on the administrative data showed that, to a limited extent, respondents with a less positive outcome were less likely to be



reached by the survey. Overall, however, there is no evidence of selective non-response. Therefore, the survey data are valid, and the results can be applied to all the parents that were in the target group.

The analysis is drawn from 353 valid questionnaires. Questions regarding the child's wellbeing were completed only by those parents with whom the child resided at least part-time. In total, 157 respondents (44.5%) indicated that the child never resides with them. Thus, when the child's wellbeing is the outcome variable, data is used from a subsample of 196 respondents.

## **Research Questions and Methodology**

The nine research questions formulated for the study and the respective results are discussed below

### Family resilience

Research Question 1: Do families who have been involved in an international parental abduction differ from families from a general population in terms of family resiliency?

Parents who participated in the survey scored significantly higher on anxiety and depression, lower on satisfaction with life, higher on financial strain, and lower on social support as compared to scores achieved in general population samples.

Research Question 2: Is there a difference in family resilience according to whether the child resides in the family?

Parents with whom the child does not reside scored lower on indicators of resilience as compared to parents with whom the child resides. They were more anxious, more depressed, less satisfied with life, and felt less supported by their immediate social environment.

Research Question 3: Is there a difference in family resilience between abducting versus left-behind parents?

There were no statistically significant differences between the abducting and left-behind parents on any indicator of family resilience. This could be because resilience was measured several years after the ending of the abduction. There was no difference in resilience between abducting versus left-behind parents who have (at least partial) child custody when parents were grouped according to their role in the abduction and to where the child was residing. However, left-behind parents with no child custody, were clearly less resilient.

Research Question 4: Is family resilience related to the child's wellbeing?

Children experienced more socio-emotional and behavioral problems as the parents experienced an increase in parenting stress, anxiety and depression; less satisfaction with life; more financial strain, and when communication between parent and child was less open. Only parenting stress, anxiety and open communication remained significant as predictors of child wellbeing when considering all the variables.



### Parents' perceived support by professional stakeholders

Research Question 5: Is the use of mediation related to the parent's wellbeing?

The results found that parents were significantly less anxious and less depressed when mediation was used.

Research Question 6: To what extent is the contact with professional stakeholders during and after the abduction perceived by parents as supportive, and is this support related to the parent's wellbeing?

During the abduction, the respective role played by the mediator, the central authority, the police, the attorney and the embassy was given attention. Parents experienced most support from the attorney, followed by the central authority. The mediator and the embassy were experienced as the least supportive actors. After the abduction, felt support by social services, attorney and mediator were included. Again, the attorney was perceived as being most supportive while support from the mediator was considered low. This difference could be explained by the fact that the mediator is a neutral professional who aims to work with both parents on an equal basis, while the attorney offers services to one parent only. Contact with the attorney also tends to be more frequent as compared to that with the mediator. Perceived support by the attorney, during as well as after the abduction, was especially related to better wellbeing (less anxiety and depression). To a lesser extent, perceived support by the central authority and by the police during the abduction were also related to better parental wellbeing.

### Mediation and the hearing of the child

Research Question 7: Does mediation have an effect on the child's wellbeing?

Research Question 8: Does hearing of the child during mediation have an effect on the child's wellbeing?

Research Question 9: Does the hearing of the child during the judicial procedure have an effect on the child's wellbeing?

There were no significant differences in the wellbeing of the child, whether mediation was used, or whether the child was heard during the mediation procedure or heard during the court procedure. Hence, the answer to the three above mentioned research questions is negative.

### **Conclusion**

The results of the survey clearly indicate that the wellbeing of children who have been involved in an international parental abduction is linked to the resiliency of their parent(s). There are also indications that the respondents in the Voice-survey score less on indicators of family resiliency as compared to the scores that are retrieved from general population samples. There are no differences in resiliency between abducting versus left-behind parents. What matters, however, is whether the child resides with the parent. Parents with whom the child resides scored better on these indicators than parents



with whom the child does not reside. It is not clear whether parents scored better because the child is residing with them, or that the more resilient parent tends to be granted custody rights.

Parents' wellbeing was higher when mediation was applied. Nevertheless, parents indicated that the support coming from the mediator during and after the abduction was low. The contact with the attorney, on the other hand, was perceived as supportive and felt support from the attorney was also positively related to the parent's wellbeing.

While parents appear to benefit from mediation in terms of better wellbeing, the same was not found for the child's wellbeing. Neither mediation nor the hearing of the child were related to a higher sense of child wellbeing. The implications of this finding should be treated with caution and does not imply that mediation and the hearing of the child are not good practices. The lack of significant outcomes is possibly explained by the complexity of these situations, which could not be taken into account in the analyses and which makes it difficult to establish clear patterns.

## **Recommendations**

There is a need for more structural, long-lasting and multidisciplinary support for parents who have been involved in a parental child abduction. The mediator could play an important role in this regard by setting up structural collaborations with, e.g., social services.

It is crucial that best practices in mediation procedures are inventoried for a better understanding of any affect related to mediation practice among the parents and the children involved.

In future studies, it might be interesting to increase our understanding of the conditions under which the hearing of the child is beneficial but also when it may have adverse outcomes in terms of child wellbeing.





## **Work Stream One: Survey Results**

### **Introduction**

This report presents the results of Work Stream 1, the Voice-project, a quantitative analysis conducted among parents who have been involved in an international parental abduction of their child. The survey is part of project eWELL - Enhancing the Well-being of Children in Cases of International Child Abduction (Van Hoorde et al., 2017) which is focused on the ways in which an international parental abduction affects the wellbeing of the child. The report thus reflects how the parent may have heightened risk or protection factors with regard to the child's wellbeing before, during and after the abduction.<sup>1</sup> Work Stream 1 of the Voice-project builds on project eWELL findings and is focused on the role of the family context in relation to the child's wellbeing. Parental child abduction is an experience that heavily impacts on an entire family and the consequences may linger for years. It is important that families are sufficiently resilient to deal with the strain that is caused by the abduction and in order to improve the child's wellbeing. Ultimately, the goal of this Work Stream is to formulate recommendations regarding the procedures that are followed in the case of a parental child abduction, and the training of legal professionals, so that the wellbeing of both child and parent is improved.

The first section of this report presents the background and design of the project and gives an overview of the research goals. In the second section, the methodology is discussed. This includes an overview of the survey procedure and the participants. A non-response analysis was performed to know, importantly, which parents did or did not participate. The methodology section also includes an overview of the measurement of the study variables. The third section discusses how relevant characteristics of the abduction are related to the child's wellbeing, such as the duration and whether the child returned. The results responding to the study goals are presented in sections four to six. This includes the importance of family resilience in relation to the child's wellbeing (section four); the perceived support felt by parents from professional stakeholders during and after the abduction (section five); and the relationship between mediation and the hearing of the child on the one hand, and the child wellbeing on the other hand (section six). In section seven, general conclusions are drawn. In a final section, recommendations are formulated regarding the training of legal professionals who work with parents involved in parental child abduction cases.

### **Background**

An international parental child abduction refers to a situation in which a child is taken to or retained in another country by one parent without the consent of the other parent. Every year, thousands of children in the EU and more than 100,000 throughout the world become victims of a wrongful removal to or retention in another country by a parent due to situations arising from cross-border marriages and the changing institution and function of families (Cancedda, Day, Dimitrova, & Gosset, 2013; Paul & Kiesewetter, 2014). Little is known about the wellbeing of children who have been involved in an international parental abduction. Some qualitative research has been done on this topic, both with children and with adults who were parentally abducted in childhood (Freeman, 2006, 2014; Van Hoorde et al., 2017). These studies suggest that being abducted by one's parent may have far-reaching

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<sup>1</sup> The results from the eWELL-project are accessible through the Missing Children Europe portal.



and long-lasting negative effects on mental wellbeing and that family re-unification is often unsuccessful.

The quantitative study, executed as part of the Voice-project, aims to facilitate improved understanding about the wellbeing of parentally abducted children, and accords particular attention to the wellbeing of the parents and the role of family resilience in relation to the child's wellbeing. These topics and the formulation of concrete research goals are further discussed below.

### **1.1 Family Resiliency**

Family resilience and its relationship with child wellbeing has so far not been studied in families that have experienced child abduction. Families can be resilient just as individuals in the face of certain challenges. Family resilience is defined as the family's resources to cope with stressors and to foster positive outcomes for the children.

Benzies and Mychasiuk (2008) defined family resilience as follows: "Resilience is fostered by protective factors and inhibited by risk factors. Protective factors modify or transform responses to adverse events so that families avoid possible negative outcomes. Conversely, risk factors are circumstances that increase the probability of poor outcomes" (p. 104). Family resilience has mainly been studied in light of understanding why some families are able to cope with challenges, such as raising and supporting a child with an impairment, while other families do not. A look at the interplay between protective and risk factors illustrates positive and negative poles. For example, a parent's good health is a protective factor that supports family resilience whereas a parent's poor health facilitates increased risk and renders less resiliency to the family. Such an interplay between protective and risk factors is found on different levels: the individual, the family and the neighborhood. Resilience in broken, unstable or single-parent families is generally lower than in stable, two-parent families, and this negatively affects the child's wellbeing (Waldfogel, Craigie, & Brooks-Gunn, 2010). For example, a single parent has low access to parental resources that could otherwise be invested in the child, both in terms of time and money. Another example is that single parents may face higher risks of mental wellbeing linked to suffering from a divorce.

In this study, family resilience is observed through six risk and protective factors which are situated on the level of the parent, the family, and the environment. These are discussed below and summarized in Figure 1.

#### Factor 1: Parenting Stress

The concept of parenting stress departs from the notion that parenting is a complex task whereby the demands towards the parent may exceed the parent's personal and physical resources (Abidin, 1990). Parenting stress has especially been studied in challenging contexts, such as having a disabled or chronically ill child. While high parenting stress is seen as a risk factor for both parent and child wellbeing, longitudinal research demonstrates that the relationship between parenting stress and child behavior is reciprocal (Neece, Green, & Baker, 2012). Thus, parenting stress is both a predictor and a consequence of child behavior. Further, parenting stress can also serve as a buffer against the negative effects of adverse experiences in childhood. For example, in younger children, parenting stress is found to mediate between exposure to psychological interparental violence on the one hand



and internalizing problem behavior on the other hand (Renner & Boel-Studt, 2013). In other words, this means that exposures to violence result in parenting stress, which in turn lead to internalizing problem behavior of children. Parenting stress does not only increase when the demands to parenting are elevated but also when the parent's personal resources are limited. For example, depression is found to increase parenting stress while social support is believed to act as a buffer against parenting stress (Ammerman et al., 2013).

#### Factors 2 and 3: Affective and Cognitive Components of the Parent's Subjective Wellbeing

The affective component of subjective wellbeing (the second factor) refers to one's pleasant and unpleasant affect such as a joyful or depressed mood. Longitudinal research suggests that the parent's affective wellbeing has an effect on the child's wellbeing, and that this relationship is mediated by a disruption of the interparental and parent-child relationship (Shelton and Harold, 2008). Hence, parent's distress and mental wellbeing is affective and can be transmitted onto the children. The cognitive component of subjective wellbeing (the third factor) refers to satisfaction with life and is based on an individual's assessment of the quality of their lives based on the person's own set of criteria. Satisfaction with life is understood as reflecting a more long-term perspective as compared to affective reactions, which are often responses to immediate factors (Pavot and Diener, 1993). While research tends to focus on strain experienced by parents, and its negative effects on children, parents may also possess certain strengths that will have a positive effect on the children. A study on the wellbeing of children with disability found a positive relationship between parents' satisfaction with life and the child's social and school functioning (Johansen, Dammann, Andresen & Fagerland, 2013).

#### Factor 4: Financial Hardship

This factor is related with children's and youth's mental, emotional and behavioral wellbeing (Yoshikawa, Aber & Beardslee, 2012). There are many different pathways through which poverty may affect the child's wellbeing. For example, economic hardship is related to factors which negatively affect the child's wellbeing such as parents' depressed mood and parental conflict (Ponnet, 2014; Ponnet, Wouters, Goedemé, & Mortelmans, 2016).

#### Factor 5: Family Communication

It is a major dimension of family functioning, and the quality of the parent-adolescent communication is linked with other dimensions including family cohesion, family adaptability and family satisfaction (Barnes & Olson, 1985). The quality of the communication between the parent and the adolescent is positively related to adolescent adjustment, e.g. in terms of higher academic achievement and higher emotional wellbeing (Hartos and Power, 2000). An open-parent child communication is also found to foster the development of empathy, appreciation for the adolescent perspective (Heller, Robinson, Henry, & Plunkett, 2006), and diminished adolescent problem behavior (Ponnet, Van Leeuwen, Wouters, & Mortelmans, 2015)

#### Factor 6: Social Support

Social support can be defined as "the perception or experience that one is cared for, esteemed, and is part of a mutually supportive social network" (Taylor, 2011, p. 189). Social support can be received from different sources such as one's family, partner, friends or the community, and it functions as an individual's resource for dealing with stressful situations. The protective role of perceived social



support has been established for a diverse range of traumatic events, such as losing a child to illness (Kreicbergs, Lannen, Onelov, & Wolfe, 2007) and suffering a serious motor vehicle accident (Robinaugh et al., 2011). Research among parents with an abducted child shows that perceived social support from friends can be especially helpful in lowering parents' stress levels (Spilman, 2006). It is plausible that the beneficial effects of parents' perceived social support, will spill over to the children. Research on the effects of parents' perceived social support on child wellbeing is scarce, however. One older study found that social support is positively related to child behavior and wellbeing (Dunst, Trivette, & Cross, 1986).

Four concrete research questions regarding family resilience are formulated based on the above:

Research Question 1: Does the resiliency of families who have been involved in an international parental abduction differ from families from a general population?

Research Question 2: Does it make a difference to family resiliency whether the child resides in the family?

Research Question 3: Is there a difference in family resiliency between abducting versus left-behind parents?

Research Question 4: Is family resilience related to the child's wellbeing?

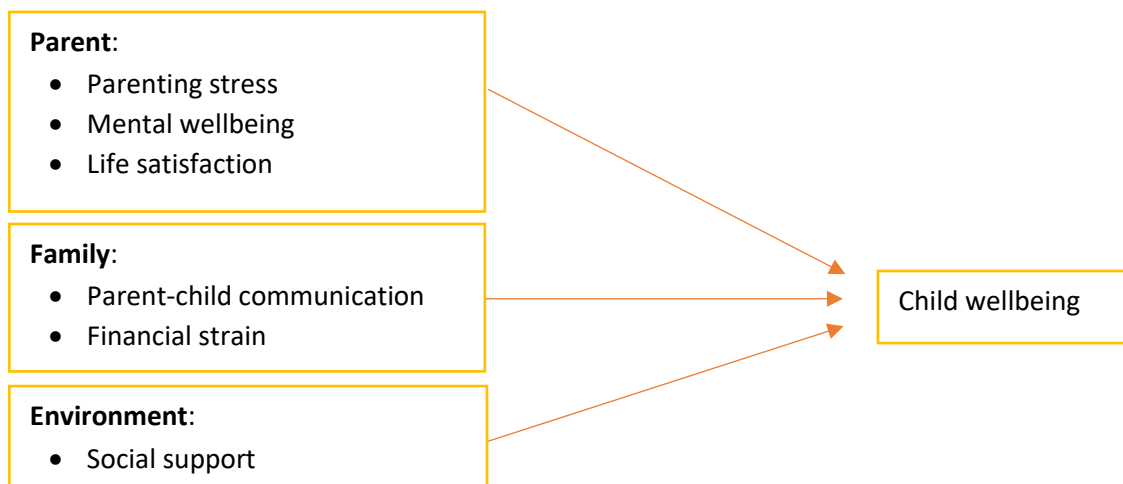


Figure 1. Overview of selected indicators of family resiliency in relation with child wellbeing



## **1.2 Parents' Perceived Support by Professional Stakeholders**

When a child is parentally abducted, a whole range of professional stakeholders come into action such as attorneys, the police, official authorities and mediators. Ideally, these stakeholders play a supportive role to the parent and this support may continue until a substantial period after the abduction. There is no information, however, on how parents experience their contacts with these stakeholders and to what extent they feel supported by them. It may be expected that parents who feel supported during and after the abduction will be more resilient than parents who do not feel supported. The following two research questions are formulated to explore this further:

Research Question 5: Is the use of mediation related to the parent's wellbeing?

Research Question 6: To what extent is the contact with official instances during and after the abduction perceived by parents as supportive, and is this felt support related to the parent's wellbeing?

## **1.3 Mediation and Hearing of the Child**

The 1980 Hague Convention on the Civil Aspects of International Child Abduction seeks co-operation between Central Authorities and a rapid procedure for the return of the child to the country of habitual residence. According to Article 7 of the 1980 Hague Convention, Central Authorities must, directly or through any intermediary, take all appropriate actions for ensuring the safe and voluntary return of the child, or for facilitating an amicable solution. Similarly, Article 10 of the 1980 Hague Convention invites the Central Authority to take every possible measure to organize the voluntary return of the child. It is only if a parental agreement is not possible that the Central Authority will seek a judicial settlement of the dispute (Kruger, 2011). There is growing enthusiasm for the use of mediation procedures to resolve cases arising under the 1980 Hague Convention. The use of mediation is also specifically endorsed in the Practice Guide for the application of the new Brussels II Regulation. Nevertheless, there is a clear dichotomy between the support for mediation and the current limited practice of the procedure (Vigers, 2011). Another aspect to consider is the hearing of the child as Article 13(2) of the 1980 Hague Convention states that return may be refused if the authorities find that 'the child objects to being returned and has attained an age and degree of maturity at which it is appropriate to take account of [his/her] views'.

While measures such as mediation and the hearing of the child are considered good practices for ensuring the best possible outcome for the child involved, it remains unclear whether these practices are in fact positively related to the child's wellbeing. Therefore, the following three research questions are formulated:

Research Question 7: Is there an effect of mediation on the child's wellbeing?

Research Question 8: Is there an effect of the hearing of the child during mediation on the child's wellbeing?

Research Question 9: Is there an effect of the hearing of the child during the judicial procedure on the child's wellbeing?



## **Methodology**

### **2.1 Survey Procedure**

The survey was part of project eWELL and detailed information on the procedure can be found in the corresponding research report (Van Hoorde et al., 2017).

The survey was administered among parents in Belgium, France and the Netherlands. Administrative data of parental abduction cases were collected by Child Focus (Belgium), Centre Français de Protection de l'Enfance-Enfants Disparus (CFPE-Enfant Disparus, France) and the French Central Authority, and Centrum Internationale Kinderontvoering (Centrum IKO, the Netherlands). Eligibility for participation was defined by having a child that had been involved in an international parental abduction between the ages of 6 and 18, and where the abduction took place between January 2005 and December 2014. Parents that met the eligibility criteria were recruited by Child Focus, CFPE-Enfants Disparus, the French Central Authority, and Centrum IKO. All potential respondents received an invitation letter which explained the aim of the research activity and the added value of their voluntary participation. The letter also contained a link to an online questionnaire and a personal, unique login code. Data were collected between December 2016 and May 2017. The study was conducted in accordance with the ethical standards of the American Psychological Association and the study protocol was approved by the Ethics Committee of the Faculty of Social Sciences of the University of Antwerp (SHW/16/17/02).

### **2.2 Response and Non-Response**

From a total of 2404 eligible respondents<sup>2</sup>, 346 respondents participated in the survey which results in a response rate of 14.7%. Table 1 gives an overview of the participation rates in each country. Note that for seven respondents no administrative data were recorded ( $n = 1$  for Belgium)

	Participated		Did not participate		Total
	<i>N</i>	%	<i>N</i>	%	
Belgium	58	11.1%	465	88.9%	523
France	136	10.7%	1139	89.3%	1275
the Netherlands	152	25.1%	454	74.9%	606
Total	346		2058		2404

Table 1: Participation rate per country

It is important to know exactly who participated when targeting hard-to-reach groups in research, such as parents who have been involved in an international child abduction case. International abduction cases vary widely in terms of characteristics such as: the type of abduction (international abduction or retention); the course of the abduction (e.g. where was the child taken, for how long, by whom and where to?); the person affected (mostly the mother or father); and the situation of both parents (e.g. what type of relationship did the parents have before the abduction?). Ideally, respondents' participation is random, with no meaningful differences between those who did versus did not

<sup>2</sup> Note that this number is lower than what is reported in the eWELL report ( $N = 3001$  eligible respondents). This is due to the identification of  $N = 597$  duplicate cases in the administrative data, which were eliminated for this report.



participate. Participation can also be non-random with participants being different from non-participants on important characteristics. Evidently this would severely affect the quality of the data and limit the validity of the results. A thorough non-response analysis was performed, of which the results are discussed below.

### 2.2.1 Participation According to the Parent's Gender

It is possible that there is a difference between mothers and fathers in their willingness to participate in the survey. Table 2 presents which person was affected, meaning the person who contacted the organization or for whom the organization was contacted. It is also this person who was invited to participate in the survey. In most cases (93.1%), the person affected and who or for whom the organization was contacted, refers to the left-behind parent. In each country, fathers were more likely to be the person affected than mothers. Chi-square tests did not find a difference between mothers and fathers in their willingness to participate, with overall 15.4% of the fathers and 13.0% of the mothers participating (the categories 'grandparent' and 'other' were not included in this analysis).

	Belgium		France		the Netherlands	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Father	316	60.4%	756	59.8%	381	63.3%
Mother	204	39.0%	493	39.0%	221	36.7%
Grandparent	2	0.4%	4	0.3%		
Other	1	0.2%	11	0.9%		
Total (missing/unknown)	523 (0)		1264 (11)		602 (4)	

Table 2. Person affected and who was invited to participate in the survey

### 2.2.2 Participation According to Type of Abduction and the Respondent's Role

An 'international parental child abduction' could refer to a situation in which a child was taken to another country by a parent without the consent of the other parent, or to a situation in which the parent's visitation rights are breached while the child resides in another country. In the majority of cases, however, the organization was contacted for a situation in which the child was taken to another country without the parent's consent (89.3% of the cases in Belgium, 99.0% in France, and 92.6% in the Netherlands). Due to the low number of cases in which it concerned a breach of the visitation rights, no analyses were performed for testing differences in participation rates according to this variable.

Another aspect that might affect the parent's willingness to participate, is the role that the parent held in the abduction, being the abducting parent either the left-behind parent. Table 3 shows the distribution of abducting versus left-behind parents for the three countries. As indicated above, the organizations were mostly contacted by (or for) the left-behind parent. Chi-square tests did not find a difference in participation rate between abducting versus left-behind parents.



	Belgium		France		the Netherlands	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Abducting parent	22	4.3%	16	1.3%	126	20.9%
Left-behind parent	495	95.7%	1232	98.7%	476	79.1%
Total (missing)	517 (6)		1248 (27)		602 (4)	

Table 3. Role of the parent in the abduction

### 2.2.3 Participation According to Characteristics of the Contact with the Organization

It may be relevant to consider how long the contact between the organization and the affected parent lasted, and how this contact has ended, since respondents were contacted through the respective national organizations. The duration of the contact ranged from one day to 3744 days ( $M_{\text{days}} = 299.8$ ;  $SD = 379.64$ ). The administrative data for France and the Netherlands indicated that respondents were more likely to participate when the duration of the contact took place over a longer period of time ( $t(1261) = -2.27$ ,  $p < .05$  for France;  $t(435) = -3.32$ ,  $p < .01$  for the Netherlands). Such difference was not found in the Belgian data.

The reasons for ending the contact may be diverse, but can be grouped under the following categories:

- a mutual agreement between the parents was achieved,
- civil or criminal proceedings were undertaken,
- the child was found or brought back, or
- the collaboration was ended (e.g. due to loss of contact, because the organization decided to end the collaboration, or because the parent was referred to another organization).

Further, the administrative data contained a non-specified category ‘other’. Table 4 gives an overview of how the contact with the organization was ended for the three countries. Note

	Belgium		France		the Netherlands	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Mutual agreement between parents	162	32.1%	83	6.7%	50	11.4%
Civil or criminal proceedings	140	27.8%	388	31.1%	64	14.6%
Child found or brought back	21	4.2%	276	22.1%	70	16.0%
End of collaboration	106	21.0%	9	0.7%	199	45.4%
Other	75	14.9%	491	39.4%	55	12.6%
Total (missing)	504 (19)		1247 (28)		438 (168)	

that for the French data, the category ‘other’ is the biggest category.

Table 4. Reason for ending the contact with the organization

For the data from France and Belgium, chi-square tests showed no significant differences in participation rates according to how the contact with the organization had ended. Significant differences were found for the Netherlands ( $\chi^2(4) = 16.78$ ,  $p < .01$ ). Parents were most inclined





to participate when the child was found or brought back (45.7% participation rate in this category).

#### 2.2.4 Participation According to the Parents' Nationality

A more difficult to reach group of parents would be those who hold a second nationality other than the country in which the organization is located. Tables 5 and 6 respectively show the number of left-behind versus abducting parents who hold a nationality belonging to a country other than the country of the organization. In about half of the cases, the left-behind parent holds the same nationality as the country of the organization, but abducting parents were more likely to hold another nationality. When looking at the participation rate according to nationality, chi-square tests revealed no differences for the left-behind parent. Concerning the nationality of the abducting parent, chi-square tests found no differences in participation rates for the data for Belgium and the Netherlands. A small difference was found in the French data ( $\chi^2(1) = 5.75, p < .05$ ) with a higher participation rate found when the abducting parent holds a nationality other than French (14.4%) as compared to when the abducting parent is a holder of French nationality (9.6%).

	Other nationality		No other nationality		Total (unknown/missing)
	<i>N</i>	%	<i>N</i>	%	
Belgium	149	57.5%	110	42.5%	259 (264)
France	565	49.0%	588	51.0%	1153 (122)
the Netherlands	261	48.2%	281	51.8%	542 (64)

Table 5. Left-behind parents who hold a nationality other than the country of the organization

	Other nationality		No other nationality		Total (unknown/missing)
	<i>N</i>	%	<i>N</i>	%	
Belgium	281	81.2%	65	18.8%	346 (177)
France	749	66.6%	375	33.4%	1124 (151)
the Netherlands	345	64.0%	194	36.0%	539 (67)

Table 6. Abducting parents who hold a nationality other than the country of the organization

#### 2.2.5 Participation According to the Region to which the Child was Taken

It is possible that the willingness of parents to participate is affected by the complexity of the abduction. One factor that may affect the complexity is the country to which the child has been taken. The registration data indicate that most children have been abducted from the country in which the organization resides (hence Belgium, France or the Netherlands). There is great diversity, however, in the countries to which the child was taken. Table 7 gives an overview of the continent to which the child was taken. For the data from Belgium and the Netherlands, chi-square tests did not find any difference in participation rate according to the region to which the child was taken. For France, however, participation differed significantly according



to this variable ( $\chi^2(4) = 15.25, p < .01$ ). Specifically, participation rate was lowest in France among parents whose child had been taken to the African continent (6.6%).

	Belgium		France		the Netherlands	
	<i>N</i>	%	<i>N</i>	%	<i>N</i>	%
Europe	326	63.7%	697	54.7%	382	63.2%
Africa	101	19.7%	364	28.6%	57	9.4%
Asia	48	9.4%	109	8.6%	87	14.4%
Americas	34	6.6%	102	8.0%	75	12.4%
Oceania	3	0.6%	2	0.2%	3	0.5%
Total (missing)	512 (11)		1274 (1)		604 (2)	

Table 7. Region to which the child was taken

### 2.2.6 Participation According to How the Abduction Ended

Parents' willingness to participate might be affected by the way in which the abduction has evolved and how it ended. In Belgium, the child returned in 80.3% of the cases, 63.9% in France, and 55.5% in the Netherlands. For the Belgian and the French data, chi-square tests did not find a difference in parents' participation rate according to whether the child returned. The data gathered in the Netherlands did show a significant difference ( $\chi^2(1) = 11.69, p < .01$ ), where the participation rate was higher when the child returned (41.0%) as opposed to when the child did not return (22.0%).

### 2.2.7 Conclusion

A non-response analysis was warranted considering that only 14.4% of 2404 eligible respondents participated in the survey. Respondents and non-respondents were compared on a range of characteristics in order to understand which parents participated and which were left out. The non-response analysis shows that the survey participation rate was, in general, equally distributed over the characteristics that were taken into consideration. To a limited extent, respondents with a less positive outcome were less likely to be reached by the survey. This was the case in the Netherlands where parents were more inclined to participate when the child returned as when the child did not return. Overall the conclusion of the non-response analysis is that the survey data are valid, and therefore the results of the study are applicable beyond the specific group of parents that participated in the survey.

## 2.3 Description of the Participants Included in the Voice-project

The eWELL-survey resulted in a dataset with 354 parents who have been involved in an international parental abduction. After the exclusion of another invalid respondent, the Voice-project makes use of 353 valid questionnaires. The breakdown of respondents according to gender and country in which the data were gathered is presented in Table 8.

	Mothers	Fathers	Total
Netherlands	102	56	158



France	74	64	138
Belgium	40	17	57
Total	216	137	353

Table 8. Respondent breakdown according to gender and country

Questions regarding the child's wellbeing were completed only by those parents with whom the child resided at least part-time. In total, 157 respondents (44.5%) indicated that the child never resides with them. Thus, for the analyses in this report and when the child's wellbeing is the outcome variable, data are used from a subsample of 196 respondents. Of these 196 respondents, 80.1% ( $n = 157$ ) were left-behind parents and 19.9% ( $n = 39$ ) were abducting parents. In 71.9% ( $n = 141$ ) of the cases the child returned to the left-behind parent, and in 25.5% ( $n = 50$ ) the child did not return. For five respondents there was no information on the return of the child.

The duration of the abduction varied greatly. Table 9 gives an overview of the duration of the abduction for the subsample of 196 respondents, and this according to whether the child returned to the left-behind parent.

	Child did not return	Child returned
Less than one week	1	2
One week to one month	1	13
One to two months	0	8
Two to three months	0	10
Three to six months	2	32
Six months to one year	2	29
One to two years	5	22
Two to three years	3	16
Three to five years	5	7
More than five years	26	2
<b>Total</b>	<b>45</b>	<b>141</b>
Missing	5	0

Table 9. Duration of the abduction according to return to left-behind parent

Finally, there was great variation in the time that had elapsed since the abduction, ranging from 1 to 19 years ( $M_{\text{time}} = 6.10$ ,  $SD = 3.01$ ).

## 2.4 Measurement of the Variables

The univariate results of all the variables that are discussed below, are presented in table 9.

### 2.4.1 Child Wellbeing

Wellbeing was measured with the Strengths and Difficulties Questionnaire (SDQ) (Goodman, 1997). The SDQ is a behavioral screening instrument for children aged six to 18 years. More specifically, it consists of four subscales which allows the evaluation of four types of problematic behavior in youth:



1. Conduct problems, which reflect antisocial, aggressive, and oppositional behavior;
2. Hyperactivity or inattention, which corresponds to impulsive behavior reflected by agitation and distraction;
3. Peer problems, which reflect poor relationships with other children such as loneliness or victimization; and
4. Emotional symptoms, which reflect anxiety and sadness. These four areas can be combined to provide a 'total difficulties score', which can then be used as a predictor of mental ill-health.

The SDQ is available in two versions: an informant-rated version that can be completed by parents or teachers and a self-report version that can be completed by adolescents (Goodman, Meltzer, & Bailey, 1998). The former was used for this study and the respondent was asked to complete the questionnaire with the target child in mind. The SDQ was completed by respondents who resided with the child at least partially (full-time, part-time or less than part-time). For boys, a total SDQ score of 9.45 was obtained, against 7.8 for girls. This difference was not statistically significant, as tested by an independent samples t-test.

#### 2.4.2 Support by Professional Stakeholders

Parents were asked to indicate to what extent they experienced their contact with a range of professional stakeholders as supportive. This was indicated on a five-point Likert scale, going from "not at all supportive" (score 1) to "very supportive" (score 5). For the period during the abduction, the following instances are included:

- mediator,
- the central authority,
- the police, an attorney, and
- the embassy.

For the period after the abduction, perceived support by social service, an attorney, and a mediator is included.

#### 2.4.3 Parenting Stress

Parenting stress was measured by the Parenting Stress Index – short form (Abidin, 1992). It contains four items such as "Being a parent is harder than I thought it would be". Items are answered on a five-point Likert scale going from "totally do not agree" (score 1) to "totally agree" (score 5). For the analyses the mean score on the four items is used.

#### 2.4.4 Parental Mental Wellbeing

Mental wellbeing was measured by the "Hospital Anxiety and Depression" (HASD) scale developed by Zigmund and Snaith (1983). The scale consists of two subscales, one measuring anxiety and the other measuring depression. Each subscale consists of seven items, such as "I feel tense or 'wound up'" for anxiety and "I still enjoy the things I used to enjoy" for depression. The response categories differed between items, e.g. referring to how often a certain statement applies or to what extent the respondent agrees with a statement. All items are



answered on a four-point scale. For the analyses, the sum scores on the two subscales are used.

#### 2.4.5 Parent's Satisfaction with Life

Satisfaction with life was measured by the 'Satisfaction with life scale' by Diener, Emmons, Larson, and Griffin (1985). The scale consists of five items referring to satisfaction with past, current and expected experiences in the future. It measures global satisfaction rather than satisfaction with specific life domains. Items include for example "My living conditions are excellent" and "If I could revive my life, I would hardly change a thing". Respondents could indicate on a five-point Likert scale to what extent they agreed, going from "totally not agree" (score 1) to "totally agree" (score 5). For the analyses the mean score on the four items is used.

#### 2.4.6 Financial Strain

Financial strain was measured by a scale developed by Ponnet (2014) which refers to the experience of financial need and insecurity. The scale measures subjective or felt financial need, and consists of seven items such as "It is difficult to afford much more than the basics with our current income" and "I am worried that I will not be able to pay my bills in the near future". The items were answered on a five-point Likert scale going from "totally not agree" (score 1) to "totally agree" (score 5). For the analyses, the mean score for the ten items is used.

#### 2.4.7 Open Parent-Child Communication

A subscale of the parent-adolescent communication scale was used, developed by Barnes and Olsen (1985). Four items were used which refer to an open communication style, e.g. "I am very satisfied about the way we talk together". The items were answered on a five-point scale going from "totally disagree" (score 1) to "totally agree" (score 5). Use is made of the mean scores.

#### 2.4.8 Social Support

The 'Multidimensional scale of social support' was applied (Zimet, Dahlem, Zimet, & Farley, 1988). The scale consists originally of twelve items, of which four measured support from 'a special person', friends, and family respectively. In order to shorten the questionnaire, the items referring to friends and family were merged, which resulted in eight items in total. Items include for example "There is a special person who is around when I am in need" and "I get the emotional help and support I need from my family or friends". Items were answered on a five-point Likert scale going from "totally disagree" (score 1) to "totally agree" (score 5). Use is made of the mean scores.

	<i>N</i> (missing)	Range	Mean	<i>SD</i>	Cronbach's alpha
SDQ <sup>i</sup>	196 (157)	0 – 36	8.70	6.81	.864
Parenting stress <sup>i</sup>	196 (158)	1 – 4.75	1.76	0.91	.773
Anxiety	325 (29)	0 – 19	7.67	4.87	.873
Depression	325 (29)	0 – 19	5.69	4.56	.858
Satisfaction with life	327 (27)	1 – 5	3.19	0.97	.850
Financial strain	322 (32)	1 – 5	2.53	1.07	.914



Open parent-child communication	196 (158)	1 – 5	4.12	1.01	.914
Social support	324 (30)	1 – 5	3.82	1.03	.924

Table 10. Univariate results of the study variables – these variables were only completed by parents with whom the target child resides (full-time, part-time or less than part-time)

### **Child Wellbeing According to Characteristics of the Abduction**

An investigation took place before answering the research questions to observe whether some key characteristics of the abduction itself can be related to the child's wellbeing. Those include the duration of the abduction, whether the child returned to the left-behind parent, and the duration since the end of the abduction. Factors that are found to be relevant should be taken into account in any further analyses.

The average score on the SDQ was 8.21 for children who returned ( $n = 141$ ) against 10.08 for those who did not return ( $n = 50$ ). An independent samples t-test indicated that this is not a statistically significant difference ( $t(66.53) = 1.41, p = .16$ ). There was no significant correlation between the duration of the abduction and the child's SDQ-score ( $r(190) = -.03, p = .72$ ). Also, the time elapsed since the abduction did not correlate in a statistically significant manner with the child's SDQ-score ( $r(196) = .03, p = .70$ ). As these aspects of the abduction could not be linked to the child's current wellbeing, they are not further taken into account in the analyses.

### **Results: Family Resilience**

RQ1: Differences with outcomes from population samples

The question was asked how the respondents in the survey differ from the general population regarding the study variables. However, it was not possible for each variable to find comparable data from a general population sample. This is due to the fact that most studies on family resilience and family strain are done with specific target groups, such as families with a chronically ill family member, families who experienced a traumatizing event, or specific demographic subpopulations. Comparable data from general population samples were found for the following variables: anxiety, depression, satisfaction with life, financial strain, and social support. The results are presented in table 11. One-sample t-tests were performed to test for the difference between the score retrieved from the group of respondents from the VOICE-survey versus the score retrieved from the population sample. In some cases, the general population data are only available according to gender. The results were recalculated to compensate for slight differences in number of items or scales of measurement.



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The results indicate that the parents who participated in the VOICE-survey score significantly higher in anxiety and depression, lower in satisfaction with life, higher in financial strain, and lower in social support as compared to scores achieved in general population samples.



Scale	Sample	Population	Country	Items	Scale	Score	One-sample t-test
Anxiety	Voice			7	4-point	Sum_mothers = 8.53 Sum_fathers = 7.12	$t(127) = .25^{***}$ $t(197) = .18^{***}$
	Youth Online! <sup>i</sup>	N = 708	Belgium	7	4-point	Sum_mothers = 6.62 Sum_fathers = 5.07	
Depression	Voice			7	4-point	Sum_mothers = 5.66 Sum_fathers = 5.70	$t(127) = 3.85^{***}$ $t(196) = 4.31^{***}$
	Youth Online!	N = 708	Belgium	7	4-point	Sum_mothers = 4.09 Sum_fathers = 4.31	
Satisfaction with life	Voice			5	5-point	Mean = 3.19 $((3.19/5)*7) = 4.47$	$t(326) = 12.05^{***}$
	Arrindell et al. 1999 <sup>ii</sup>	N = 1742	Netherlands	5	7-point	Sum = 26.9 Mean (26.9/5) = 5.38	
Financial strain	Voice			7	5-point	Mean_mothers = 2.58 $((2.58/5)*7) = 3.61$	$t(124) = 7.91^{***}$
	Youth Online!	N = 708	Belgium	6	7-point	Mean_fathers = 2.51 $((2.51/5)*7) = 3.51$ Mean_mothers = 2.60 Mean_fathers = 2.39	$t(196) = 10.20^{***}$
Social support	Voice			8	5-point	Mean_mothers = 4.06 $((4.06/5)*6) = 4.87$	$t(126) = 2.03^*$
	Jackson 2006	N = 373	USA	12	6-point	Mean_fathers = 3.67 $((3.67/5)*6) = 4.40$ Sum_female = 56.08 (Mean_female = 4.67) Sum_male = 55.17 (Mean_male = 4.60)	$t(197) = -2.23^*$

Table 11. Indicators of family resilience among parents in the VOICE-survey and parents in populations samples

<sup>i</sup> The Youth Online! sample consists of 708 respondents in a two-parent family (Symons, Ponnet, Walrave, & Heirman, 2017; Symons, Ponnet, Emmery, Walrave, & Heirman, 2017).

<sup>ii</sup> Dutch study by Arrindell, Heesink, & Feij (1999) is reported in a study by Pavot and Diener (2008).





RQ2: Differences according to residence of the child

It was tested whether parents with whom the child resides at least partially have different outcomes on the selected variables as compared to parents with whom the child does not reside. The variables that were included are anxiety, depression, satisfaction with life, financial strain, and social support. The variables parenting stress and parent-child communication were not included as these were not completed by parents with whom the child does not reside. For each of the variables included, except for financial strain, it was found that parents with whom the child does not reside score significantly lower on indicators of resilience as compared to parents with whom the child resides. Concretely, these parents are more anxious, more depressed, less satisfied with life, and feel less supported by their immediate social environment. The question is, then, whether these parents are less resilient because their child is not residing with them, or that the child is simply more likely to reside with the more resilient parent.

	Child resides with parent (N = 193)	Child does not reside with parent (N = 132)	Independent samples t-test
Anxiety	6.68	9.12	4.45***
Depression	4.50	7.42	5.72***
Satisfaction with life	3.41	2.87	- 5.08***
Financial strain	2.44	2.67	1.91
Social support	3.92	3.68	-2.06*

Table 12. Differences according to the target child's residence with respondent, mean scores \*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$

RQ3: Differences between abducting versus left-behind parents

There were no statistically significant differences between the abducting and left-behind parents on any of the study variables, including anxiety, depression, parenting stress, parent-child communication, satisfaction with life, financial strain and social support. It should be kept in mind, however, that these results are based on a measurement that took place several years after the abduction ended. It is possible that abducting parents do differ from left-behind parents in terms of their resilience at the time of the abduction.

Additional analysis was done whereby parents were grouped according to the child's place of residence and their role in the abduction, hence combining research questions two and three. As such, the following four groups of parents emerged:

- abducting parents who have (full or partial) child custody ( $n = 39$ ),
- abducting parents who do not have child custody ( $n = 11$ ),
- left-behind parents who have child custody ( $n = 157$ ), and
- left-behind parents who do not have child custody ( $n = 146$ ).

It was tested whether parents belonging to these groups differed from each other in terms of family resilience. Note that the variables parenting stress and quality of communication with the child are not included because these questions were only completed by parents who have



custody over the child. Due to the low number of abducting parents who do not have child custody, this group is not taken into consideration.

Table 13 presents the differences between the three groups of parents on anxiety, depression, satisfaction with life, financial strain and social support. For each variable, except for financial strain, significant differences were found. The mean scores on the variables show that left-behind parents who have child custody do not differ significantly from abducting parents with child custody. Post-hoc Bonferroni tests confirm that the minor differences between these two groups are not significant. Parents who were left-behind and who do not have child custody, however, score significantly higher on anxiety and depression, and significantly lower on satisfaction with life as compared to parents who were left behind but who do have child custody, and as parents who abducted the child and who have child custody. Left-behind parents with no child custody also score significantly lower on social support although here the differences are smaller. It can be concluded that in terms of resilience, left-behind parents who do not have child custody are particularly vulnerable.

	Left-behind parent, child not in custody	Left-behind parent, child in custody	Abducting parent, child in custody	<i>F</i>
Anxiety	9.04	6.71	6.58	9.26***
Depression	7.43	4.56	4.24	17.00***
Satisfaction with life	2.89	3.41	3.40	11.74***
Financial strain	2.62	2.42	2.51	1.08
Social support	3.68	3.85	4.19	3.68*

Table 13. Differences between parents according to their role in the abduction and child custody \*  $p < .05$ ; \*\*\*  $p < .001$

#### RQ4: Family Resilience in Relation to the Child's Wellbeing

To understand how the selected indicators of family resilience affect the child's wellbeing, use is made of data that was retrieved from respondents with whom the child resides at least partially ( $n = 196$ ).

Table 14 presents the bivariate correlations between all the study variables. As the child's age and gender correlate with the SDQ score, these variables are not included in the analyses. Children have a higher SDQ-score – indicating that they experience more socio-emotional and behavioral problems – when parents experience more parenting stress, more anxiety and depression, less satisfaction with life, more financial strain, and when the communication between the parent and the child is less open. While the experience of social support by the parent is not directly associated with the child's wellbeing, social support is associated with less anxiety and depression, and less financial strain.



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	Child SDQ	Parenting stress	Anxiety	Depression	Satisfaction with life	Financial strain	Open communication	Social support
Child SDQ	1							
Parenting stress	.37** *	1						
Anxiety	.36** *	.27***	1					
Depression	.26** *	.16*	.70***	1				
Satisfaction with life	- .30** *	-.30***	-.43***	-.56***	1			
Financial strain	.25** *	.21**	.42***	.44***	-.60***	1		
Open communication	- .34** *	-.25**	.19*	-.15*	-.14*	-.07	1	
Social support	-.05	-.07	-.26***	-.44***	.30***	-.16*	.10	1

Table 15 presents the results of the multivariate regression analysis with the indicators of family resilience as independent and the child’s SDQ-score as the dependent variable. All independent variables were inserted simultaneously. The variable social support was not included because this variable did not correlate with child wellbeing. While significant ( $F = 11.43, p < .001$ ) the model did not prove to be a good fit to the data. The total variance explained is 27.0% and the standard error in predicting the outcome variable is 5.71 (with the total range of outcomes from 0 to 36). The results in the table show that only parenting stress, anxiety and open communication remain significant as predictors of child wellbeing. The parent’s depression score, satisfaction with life and financial strain did not have an effect on the child’s wellbeing when taking into account the other study variables. In additional analyses, interaction effects were included to test for possible differences according to whether or not mediation was used. No significant interaction effects were found.

	Unstandardized B	95% CI
Parenting stress	2.04***	1.06 – 3.03
Anxiety	0.32*	0.05 – 0.59
Depression	-0.01	-0.34 – 0.32
Satisfaction with life	-0.15	-1.45 – 1.14
Financial strain	0.46	-0.51 – 1.43
Open communication	-1.19**	-2.05 - -0.33

Table 15. Multivariate regression analysis with the child’s SDQ-score as the outcome variable \*  $p < .05$ ; \*\*  $p < .01$ ; \*\*\*  $p < .001$



Caution is warranted when interpreting these results as the causal direction of these effects can not be tested. As discussed in section 1.2, parenting stress is bidirectional with parents affecting their children and vice versa children affecting their parents. It is plausible that parenting stress is more elevated precisely because the child's wellbeing is low. Likewise, the quality of the communication between parents and their children is not only parent-driven but also results from the behavior of the child.

### **Results: Parents' Perceived Support by Professional Stakeholders**

RQ5: Parent wellbeing according to the use of mediation

Making use of independent t-tests, it was tested whether parents scored lower in anxiety and depression depending on whether or not mediation was used for finding an agreement on parental authority. The results found that parents were significantly less anxious ( $t(299) = -2.16, p < .05$ ) and less depressed ( $t(299) = -2.35, p < .05$ ) when mediation was used. For anxiety, parents who received mediation scored on average  $M = 6.78$  against  $M = 8.05$  for parents who did not receive mediation. For depression, parents who received mediation scored on average  $M = 4.74$  against  $M = 6.05$  for parents who did not receive mediation.

RQ6: perceived support from professional stakeholders and parent wellbeing

Parents are in contact with a range of stakeholders who can play a supportive role during and after the abduction. In the case of the former, support was provided by the mediator, the central authority, the police, an attorney and the embassy. After the abduction, support by social services, the attorney and the mediator were included. Table 17 presents the univariate results for these variables. During the abduction, most support came from the attorney followed by the central authority. The mediator and the embassy were experienced as the least supportive. After the abduction the attorney was again the most supportive while support from the mediator was recorded as being low. This difference could be explained by the fact that the mediator is a neutral professional who aims to work with both parents on an equal basis, while the attorney offers services to one parent only. Contact with the attorney also tends to be more frequent as compared to contact with the mediator.

The perceived support during the abduction differed according to the country in which the data were gathered. One-way ANOVA tests showed significant differences for perceived support by the police ( $F(2) = 4.79, p < .01$ ) and by the central authority ( $F(2) = 11.57, p < .001$ ). Perceived support by the police was highest in Belgium ( $M = 2.63$ ), followed by France ( $M = 2.06$ ) and the Netherlands ( $M = 1.96$ ). Perceived support by the central authority was highest in Belgium ( $M = 3.44$ ) followed by the Netherlands ( $M = 3.09$ ) and France ( $M = 2.40$ ).

With regard to perceived support after the abduction, a significant between-country difference was found for support from the mediator ( $F(2) = 5.10, p < .01$ ). Thereby, perceived support from the mediator post-abduction was highest in the Netherlands ( $M = 1.97$ ), followed by Belgium ( $M = 1.33$ ) and France ( $M = 1.24$ ).



Score 1 (not at all supportive) to 5 (very supportive)	Number of respondents who completed the question	Mean (SD)
Felt support during the abduction by:		
Mediator	277	1.85 (1.31)
Central authority	322	2.88 (1.54)
Police	318	2.12 (1.40)
Attorney	318	3.12 (1.53)
Embassy	302	1.87 (1.37)
Felt support after the abduction by:		
Mediator	91	1.52 (1.06)
Social services	116	2.34 (1.60)
Attorney	125	3.20 (1.55)

Table 16. Univariate results – felt support by professional stakeholders

Pearson correlations were applied in order to test whether the perceived support by professional stakeholders could be related to the parent’s wellbeing, and this in terms of current levels of anxiety and depression. A negative correlation score implies that parents who report more support, are less anxious or depressed. Table 17 shows the results for these Pearson correlations. The results show that perceived support by the attorney during and after the abduction is especially related to a better current wellbeing (less anxiety and depression). To a lesser extent, perceived support by the central authority and by the police during the abduction are related to better parent wellbeing.

	Parent anxiety	Parent depression
During the abduction, felt support by		
Mediator	-.062	-.113
Central authority	-.128*	-.067
Police	-.132*	-.141*
Attorney	-.167**	-.267***
Embassy	-.047	-.113
After the abduction, felt support by		
Mediator	-.188	-.018
Social services	-.148	.001
Attorney	-.178*	-.078

Table 17. Pearson correlations between felt support and parent wellbeing

## **Results: Mediation and the Hearing of the Child**

This section discusses the last three research questions.



RQ7: Is there an effect of mediation on the child's wellbeing?

RQ8: Is there an effect of the hearing of the child during mediation on the child's wellbeing?

RQ9: Is there an effect of the hearing of the child during the judicial procedure on the child's wellbeing?

Mediation was used in 33.0% ( $n = 101$ ) of the cases of which one child in three (33.3%,  $n = 29$ ) was heard. A similar number of children were heard during a court procedure (30.0%,  $n = 87$ ). Independent samples t-tests were used to investigate whether mediation and the hearing of the child both in the mediation procedure and in the judicial procedure are associated with the child's current wellbeing.

The results showed no significant differences in current wellbeing, depending on whether or not mediation was used ( $t(181) = 0.16, p = .87$ ), whether or not the child was heard during the mediation procedure ( $t(57) = 0.16, p = .87$ ), and whether or not the child was heard during the court procedure ( $t(178) = 1.15, p = .25$ ). Hence, the answer to the above mentioned three research questions is negative: it cannot therefore be concluded that mediation and the hearing of the child have a positive effect on the child's wellbeing based on the data gathered.

## **Conclusion**

Work Stream 1 of the Voice-project was set up to understand how the wellbeing of children who have been abducted by a parent can be improved. The results of this report build on previous results taken from the eWELL-project which investigated how the wellbeing of parentally abducted children is affected by characteristics of the abduction as well as of the conflict resolution process. In this Work Stream of the Voice-project, the focus went to the role of family resilience in relation to the child's wellbeing. The family is the most important social context of the child and it is well-known that vulnerabilities on the level of the parents may spill over to the children. Therefore, supporting families and parents in becoming more resilient, may have positive effects on the children's wellbeing. Children who have been abducted by a parent do not necessarily manifest a lower overall wellbeing as compared to children in the general population. This was illustrated in the report of project eWELL (Van Hoorde et al., 2017).

The research questions that were formulated are grouped around three topics. The first topic refers to family resilience in relation to the child's wellbeing. Family resilience is measured by the following indicators:

- parenting stress,
- parents' mental wellbeing (in terms of anxiety and depression),
- parents' life satisfaction,
- openness of the parent-child communication,
- financial strain, and
- parents' social support.

Attention also went to differences in resilience between parents according to their role in the abduction and according to whether they had (at least partial) child custody.



Second, it was investigated whether parents' wellbeing could be related to the support that parents received from professional stakeholders such as mediators and lawyers.

Third, whether the child's wellbeing could be related to mediation and the hearing of the child was investigated.

Regarding the first topic, it was found that respondents in the Voice-survey tend to score worse on indicators of family resilience as compared to what is found in general population samples. Furthermore, parents with whom the child resides score better on indicators of resilience than parents with whom the child does not reside. It is not clear whether parents score better because the child is residing with them, or that the parent with most resilience tends to be granted more custody rights. There are no differences between abducting versus left-behind parents in terms of resilience. Finally, family resilience is positively related with the child's wellbeing.

When simultaneously considering all indicators of family resilience, the most important factors related to child wellbeing are:

- parenting stress,
- open parent-child communication, and
- parent's anxiety.

This implies that it would be to the benefit of the child if parents who have been involved in an international parental child abduction are supported in resilience and coping with distress.

Regarding the second topic, the use of mediation seems to have a positive impact on the parent's wellbeing. Specifically, parents who indicated that mediation took place were significantly less anxious and less depressed as compared to parents who indicated that no mediation took place. At the same time, parents indicated that the support coming from the mediator during and after the abduction was low. This is, in fact, a good sign because mediators are not supposed to offer support to one parent alone. Instead, they function as a neutral stakeholder. The contact with the attorney, on the other hand, was perceived as supportive and felt support from the attorney was also positively related to the parent's wellbeing. Again, this is not surprising considering that the attorney does work for one parent alone.

Regarding the third topic, it could not be established that mediation and the hearing of the child are related to the child's wellbeing. There may be several reasons why – against the expectations – mediation and being heard during mediation or during the judicial procedure does not have a positive effect on the child's wellbeing.

First, there are methodological considerations. The measurement of wellbeing is based on indicators relevant to the time of the survey, thus several years after the abduction took place. It is possible that the potential beneficial effects of mediation and being heard are undetectable in the longer term.

Second, as explained by Krappmann (2010) there may exist large variation in the way in which the hearing of the child is implemented during mediation and during the judicial procedure. As he phrases it "it is crucial that children are not only heard, but their views are given weight" (p. 501), and thus that the child can also participate in the decision-making. The survey does not reflect that information was





gathered on the way in which the child was heard, and the weight that was given in the decision-making to what the child had said.

Third, the experience of being heard may be very different across children which may explain why “being heard” is not a predictor of the child’s wellbeing. Having to voice their personal preferences and opinions may create the feeling that the child’s loyalty towards the parents is being tested, and therefore this practice may be harmful to the child’s wellbeing (Mosk, 2018). Findings from qualitative interviews which were done with children who have been abducted by one of their parents also point in that direction. The qualitative part of the eWELL study indicated that being heard is not necessarily a positive experience for the child and much depends on the way in which the hearing is organized as well as on the personal preferences of the child (Van Hoorde et al., 2017). These results do not imply that mediation and the hearing of the child are not good practices in terms of improving the child’s wellbeing. Rather it means that quantitative analysis is not appropriate for demonstrating the significance of these factors.

### **Recommendations**

The following recommendations have been formulated based on the results:

First, there is a need for more structural, long-lasting and multidisciplinary support for parents who have been involved in a parental child abduction. The mediator could play an important role in this regard by setting up structural collaborations with, e.g., social services. Professional stakeholders need to be aware of the impact of factors such as social support on the parent’s wellbeing.

Second, more attention towards understanding how mediation practices affect the parents and the children involved is needed. While generally considered a ‘good practice’, its actual impact is not straightforward. It is crucial that best practices in mediation procedures are inventoried.

Third, the ways in which the child is involved in the mediation and judicial procedure also merits more attention. More knowledge is needed on the conditions under which the hearing of the child is beneficial but also when it may have adverse outcomes in terms of child wellbeing.

Recommendations will be added after the steering group meeting on 6 June 2019. Particular focus needs to go to recommendations regarding the training of legal professionals.



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