

Comparing the Effectiveness of the Children of Divorce Intervention Program (CODIP) and the Parent Training Program Based on Assisting Children Through Transition (A.C.T.) on problematic beliefs of children of divorce

DOI: 10.22098/JPC.2025.17976.1337

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Abstract

Aim: This study aimed to compare the effectiveness of the Children of Divorce Intervention Program (CODIP) and the parent-based intervention Assisting Children through Transition (A.C.T) in reducing problematic beliefs of children of divorce.

Method: The research design was quasi-experimental with pretest and posttest and a control group. The statistical population of this study consisted of all 8–10-year-old students from divorced families in Sari, Iran, during 2024–2025. Using purposive sampling, 45 participants were selected and randomly assigned to two intervention groups and one control group. Children in the CODIP group attended fifteen weekly 45-minute sessions, while custodial parents in the A.C.T group participated in eight 90-minute sessions. The control group received no intervention. Data were collected using the Children's Beliefs About Parental Divorce Scale (Kurdek & Berg, 1987). The multivariate analysis of covariance (MANCOVA) test was used in the SPSS-22 software environment.

Findings: Results revealed no significant difference between the CODIP and A.C.T programs in reducing problematic beliefs of children of divorce ($P = 0.252$). Nonetheless, both interventions were effective in improving these beliefs ($F = 134.07$, $P < 0.001$).

Conclusion: The findings highlight the importance of preventive interventions in supporting the mental health of children of divorce. Both child-centered (CODIP) and parent-centered (A.C.T) approaches can be effective, and practitioners and policymakers could implement them to promote children's well-being and mitigate the negative effects of parental divorce.

Keywords: Children of Divorce Intervention Program (CODIP), Assisting Children through Transition (A.C.T), Problematic Beliefs, Children of Divorce.

Introduction

Divorce represents a highly complex and stressful life crisis with wide-ranging negative consequences for family members, particularly children psychologically, socially, and academically (Damotta, 2019). The divorce process is a significant life event and a catalyst for family unity and connectedness disruption. This disruption extends profoundly to parents and children, instigating a cascade of psychological, physiological, mental, and emotional challenges (Apata et al., 2023). Children of divorced often become victims of parental conflicts, financial difficulties, reduced parental attention, and loss of contact with one parent (Bhushan, 2022). Regardless of age, gender, or culture, these children experience more psychological problems than their peers (D'Onofrio & Emery, 2019). Research indicates that they are nearly twice as likely to suffer from mental health problems such as anxiety and depression (Galbraith & Kingsbury, 2022) and up to three times more likely to face academic decline (Kabyn, 2023). Social difficulties are also common, including peer rejection, shame about family status, self-blame or blaming parents (Reisi Sarteshneizy, 2023) and weakened emotional bonds with parents (Kunz, 2009). Such issues can severely impair their psychological adjustment (Nazri et al., 2019).

A critical factor influencing children's adjustment to divorce and their vulnerability to mental health problems is their problematic beliefs regarding parental divorce (Bernstein et al., 2012; Kurdek & Berg, 1987). Children's beliefs about parental divorce play a crucial role in their adjustment. While they use social-cognitive skills to make sense of divorce, they often develop problematic interpretations such as self-blame, expectations of reconciliation, or fear of abandonment. Since parents' reports are influenced by their own stress and may not accurately reflect children's perspectives, direct assessment of children's beliefs is essential, as these beliefs are strongly linked to their emotional and behavioral adjustment (Kurdek & Berg, 1987). These beliefs often include self-blame, unrealistic hope of reunification, blaming one parent, heightened fear of rejection or ridicule, and chronic fear of abandonment (Orgilés et al., 2020). Although relatively few studies have addressed cognitive factors in children of divorce, evidence suggests that problematic beliefs exacerbate symptoms of depression. For example, children who believe they are responsible for their parents' divorce are more prone to depressive symptoms than those without such beliefs (DeLucia-Waack & Gellman, 2007). Gender differences have also been reported: girls are more likely to endorse parental blame, whereas boys more often hold beliefs about hope of reunification. (Orgilés et al., 2020). These irrational beliefs, if left unaddressed, can lead to significant emotional and behavioral problems (Wolchik & Sandler, 2013). Thus, early identification and intervention targeting maladaptive beliefs is crucial to prevent the long-term negative consequences of divorce on children's mental health (Orgilés et al., 2020).

In response to the widespread cognitive and emotional challenges faced by children of divorce, numerous preventive educational programs have been developed in recent decades (Guyette et al., 2023). Some of these interventions are child-focused, aiming to strengthen children's personal resources (López-Larrosa, 2009), while others are parent-

focused, emphasizing improvements in parenting skills, reductions in interparental conflict, and enhanced parent–child relationships (Grych, 2005). Among child-focused interventions, the Children of Divorce Intervention Program (CODIP) is well-supported by evidence (Kress et al., 2019). The Children of Divorce Intervention Program (CODIP) is a preventive group intervention grounded in cognitive-behavioral play therapy, stress and coping theories, resilience-building, and prevention science. Its core objectives include providing a supportive peer group environment, facilitating the healthy expression of emotions, correcting misconceptions about divorce, and enhancing children's coping skills and self-concept (LeCroy, 2008; Pedro-Carroll & Jones, 2005). CODIP was selected due to its strong empirical support. Extensive research has demonstrated its effectiveness in improving children's understanding of divorce, fostering adjustment (Botha & Wild, 2013; Pedro-Carroll et al., 1992; Rhodes et al., 2021; Ramezanzadeh et al., 2023) increasing resilience (Bazargan, 2021; Hoseini Yazdi et al., 2021), enhancing psychological well-being (Klein Velderman et al., 2022), and reducing externalizing problems (Hoseini Yazdi et al., 2015).

Conversely, the Assisting Children Through Transition (A.C.T.) program represents a parent-focused approach (Grych, 2005). It is a multidisciplinary, educational prevention program grounded in risk and resilience models (Pedro-Carroll, 2010). It emphasizes teaching effective parenting skills while helping parents reduce harmful behaviors and strengthen children's resilience (Pedro-Carroll, 2010). A.C.T. is a multidisciplinary, educational, and preventive program designed to reduce the stress of separation for children and equip parents with skills to protect children from the toxic effects of ongoing conflict. Its goals include identifying and understanding children's unspoken emotions, reducing the negative impacts of divorce, and fostering resilience and constructive attitudes. Prior research indicates that A.C.T. increases awareness of the harmful effects of interparental conflict, improves parental strategies for protecting children, reduces conflict related to parenting, and enhances children's well-being, parent–child relationships, and overall functioning at home, school, and in social contexts (Pedro-Carroll & Frazee, 2001; Pedro-Carroll et al., 2001). Also, Klein Velderman et al. (2024) developed the “Divorce Atlas” program in the Netherlands based on A.C.T. Although it did not directly improve parent–child well-being, it enhanced perceived social support and parental awareness of parenting practices.

According to official statistics from the Statistical Center of Iran (2024), the divorce rate in the country has been steadily increasing up to 2024, while the marriage rate has concurrently declined. This trend, along with the cognitive and emotional challenges associated with divorce, may affect multiple domains of children's lives, including academic performance, peer relationships, family interactions, and mental health (Moen, 2023). Therefore, there is a pressing need for effective, evidence-based interventions that are tailored to the Iranian sociocultural context. Despite extensive evidence on the negative impacts of divorce on children's mental health, few structured and systematic interventions have been evaluated in Iran. To date, most child and family-focused interventions in Iran have targeted a single therapeutic or educational domain, such as positive psychotherapy (Salehi Kozani et al., 2024), group therapy based on acceptance and commitment (Zolghadri et al., 2024), child-focused mindfulness therapy (Gohari et

al., 2023), Clark parenting training (Quchani et al., 2021), and Bowen family therapy (Razavi & Livarjani, 2020). CODIP and A.C.T, in contrast, are comprehensive programs that simultaneously target both the child and family levels. CODIP directly addresses children's maladaptive cognitions and coping skills through cognitive-behavioral play therapy, while A.C.T enhances parenting skills, parent-child interactions, and the family environment. By integrating direct child-focused and environmental/family-focused interventions, these programs offer a systemic and culturally adapted approach, supporting sustained cognitive, emotional, and behavioral improvements in children of divorce. However, little is known about the comparative effectiveness of these interventions within Iranian cultural settings. This study aims to address this gap by examining and comparing the effectiveness of CODIP and A.C.T in reducing problematic beliefs among children of divorce. Specifically, it seeks to answer the following question: Do CODIP and A.C.T differ in their effectiveness in alleviating problematic beliefs related to parental divorce in children? By focusing on the Iranian context, the study intends to determine whether the two interventions vary in their impact on children's beliefs about parental divorce.

Methodology

This quasi-experimental study used a pretest-posttest design with a control group. The statistical population included children aged 8 to 10 years (corresponding to grades 2–4 of elementary school) from divorced families in Sari, Iran. A purposive sample of 45 participants was selected from this population. Recruitment was conducted through urban schools. Initially, children from divorced families were screened using the Children's Beliefs About Parental Divorce Scale (CBAPS), and those who obtained high scores were identified as eligible. From this pool, participants whose parents had experienced a consensual divorce and who provided written informed consent were purposefully included until the required sample size was reached. Sample size was determined via G*Power software based on the meta-analysis of (Stathakos & Röhrle, 2003), assuming a medium effect size (0.44), significance level of 0.05, and statistical power of 0.85. Inclusion criteria were: (1) obtaining a high score on the Children's Beliefs About Parental Divorce Scale (CBAPS), (2) parents' divorce finalized through mutual agreement and consensual custody arrangements regarding the child, and (3) Written and informed consent from parents and children. Exclusion criteria included: (1) custody by grandparents, (2) Diagnosis of mental disorders such as ADHD or autism based on parent report in uncertain cases, clinical psychologist of the research team 3) presence of a stepparent, and (4) concurrent participation in other psychological counseling programs. The CONSORT diagram of participant flow throughout the study is presented in Figure 1.

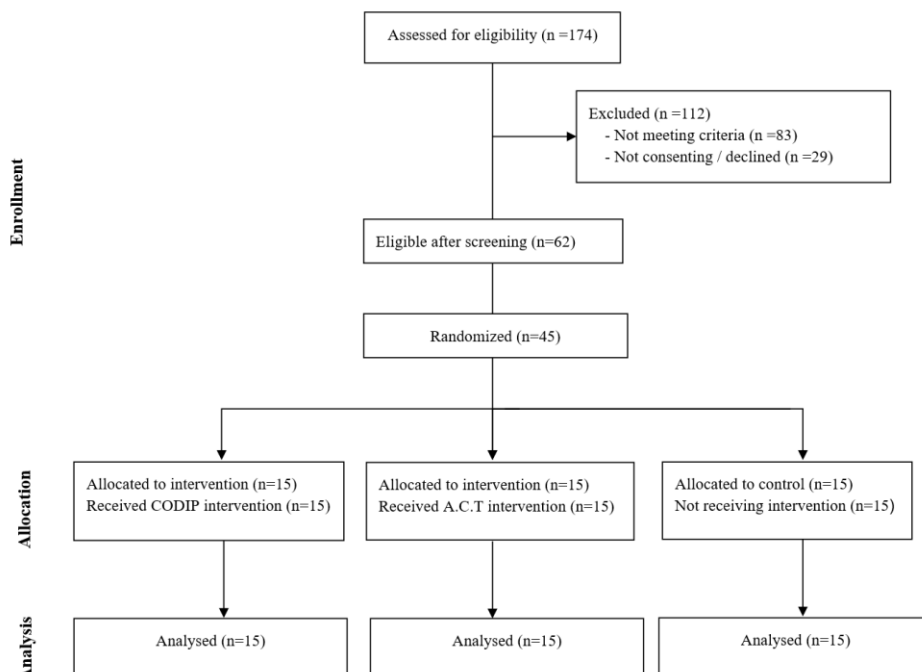


Figure 1: CONSORT diagram of participant flow

Procedure

Following approval from the General Directorate of Education of Mazandaran Province, the researchers visited schools in the city of Sari during the 2024–2025 year. Upon presenting an official letter to school principals, they reviewed the information of students from divorced families. Eligible participants were identified, and their parents were contacted. After providing a full explanation of the study objectives, parents who had custody of their children and consented to participate attended the sessions at the Etemad Counseling Center in Sari, together with their children. After conducting preliminary interviews and administering the research questionnaire to the children, the participants were randomly assigned to two experimental groups and one control group. The CODIP program was delivered by the first author, while the A.C.T-based parenting intervention was conducted by the second author. Both facilitators received formal training and demonstrated proficiency in implementing their respective intervention protocols. Additionally, two co-authors played a significant role in supporting the study by assisting with session coordination, ensuring fidelity to the intervention procedures, and providing logistical support to the research team during data collection .

The first experimental group, comprising children, participated in 15 weekly sessions of the CODIP program, with each session lasting 45 minutes (Pedro-Carroll & Jones, 2005). The second experimental group, comprising custodial parents, attended 8 weekly sessions of the A.C.T program, with each session lasting 90 minutes (Pedro-Carroll, 2010). The control group did not receive any intervention. After the interventions were completed, children in all three groups were administered a post-test. Data collection was conducted from July to November 2024. The interval between the pre-test and post-test was approximately three months, which allowed for the full implementation of the interventions and accurate data collection.

Data were analyzed using multivariate analysis of covariance (MANCOVA) with SPSS version 23. The pretest scores of Children's Beliefs About Parental Divorce Scale (CBAPS) were entered as covariates to control for baseline differences and to more accurately assess the effect of the intervention. All ethical principles were strictly observed. Interviews and questionnaire administrations were conducted individually. In addition to obtaining written informed consent from parents, children provided assent in line with ethical guidelines. Age-appropriate explanations were given regarding the purpose of the study, the voluntary nature of participation, and the confidentiality of responses. Children were assured that they could decline to answer any question or withdraw from the study at any time without any negative consequences. They were further informed that their responses would remain confidential and would not be disclosed to parents or teachers. Only children who verbally expressed willingness to participate after receiving these explanations were included in the study. The study was approved by the Ethics Committee of Islamic Azad University, Sari Branch (Ethics Code: IR.IAU.SARI.REC.1402.319) and was also registered in the Iranian Registry of Clinical Trials (IRCT Code: IRCT20190319043092N2).

Instrument

Children's Beliefs About Parental Divorce Scale (CBAPS): Problematic beliefs were assessed using the CBAPS (Kurdek & Berg, 1987), a 36-item dichotomous (yes/no) measure designed for children aged 6–17 years, covering six subscales: peer ridicule and avoidance, paternal blame, maternal blame, fear of abandonment, hope of reunification, and self-blame. Higher scores indicate more problematic beliefs. CBAPS has demonstrated a stable six-factor structure and satisfactory internal consistency in previous studies (Kurdek & Berg, 1987; Orgilés et al., 2020; Allahverdi, 2016; Mohseni-Moghadam & Mirza-Hosseini, 2015). In this study, the internal consistency of the total CBAPS scale was good ($\alpha = 0.85$). Other subscales were also reported to be favorable.

Intervention Protocols

The content summary of the intervention protocols for the Children of Divorce Intervention Program (CODIP) and the Assisting Children in Transition (A.C.T.) program is summarized in Tables 1 and 2, respectively. The sessions were conducted using interactive methods such as group discussions, role-playing, and homework.

Table 1. Summary of CODIP Sessions (Pedro-Carroll, 2005; Hoseini Yazdi et al., 2021,

Session	Objectives	Main Content
1	Establish a safe and supportive environment; introduce group goals	Group introduction and rules; group cohesion via naming the group and introducing a group puppet as a symbol; interactive activities and group discussions to build trust
2	Identify emotions and build emotional vocabulary	Introduction of universal emotional concepts; use of facial expression images, “feelings bag” game, and creation of an “emotions thermometer”
3	Explore the concept of family and its forms	Presentation on family types; promoting acceptance of divorced families; use of puppets to depict family situations; group discussion
4	Address children’s feelings about divorce	Expression of divorce-related feelings through storytelling and group discussion; clarification of common divorce concepts; correction of misconceptions
5	Teach social problem-solving steps	Introduction of four steps: problem identification, generating solutions, predicting consequences, and choosing solutions; practice through scenarios and visuals
6	Practice generating alternatives and predicting outcomes	Enhancing problem-solving skills with a tic-tac-toe game; group discussions on consequences and solution selection
7	Apply problem-solving to divorce-related issues	Use of divorce scenarios and puppets to practice problem-solving; group discussions on interpersonal problems
8	Differentiate between solvable and unsolvable problems	Teaching controllable vs. uncontrollable problems using the “red light-green light” game; group discussion
9	Reinforce problem-solving and anger management	Role-playing and games to practice problem-solving; teaching anger identification and expression via the “Stop and Think” game
10	Enhance ability to express feelings about parents	Storytelling about divorce; group discussions on feelings toward parents; focus on emotional expression and acceptance
11	Explore perceptions and feelings about parent–child issues	Use of puppets to depict parental and child emotions; group discussions on divorce-related family changes
12	Consolidate skills on divorce-related concepts	Use of board games for review; preparing children for group closure; group discussion on feelings about termination

13	Build self-esteem and awareness of positive family changes	Completion of a personal booklet on strengths, interests, and feelings; group discussion on positive post-divorce changes
14	Emphasize strengths and reinforce self-esteem	Identifying each child's positive traits through the "You Are Special" game; planning the closing celebration; group discussion
15	Terminate the group; encourage maintenance of supportive ties	Reflecting on group experiences; identifying supportive resources; holding a closing celebration; awarding certificates of achievement

Table 2. Summary of A.C.T Sessions (Pedro-Carroll, 2010)

Session	Objectives	Main Content
1	Orientation and acquaintance; creating a safe and cohesive environment; instilling hope and reducing resistance	Group introduction and establishment of rules; fostering hope with emphasis on children's capacities; addressing parental resistance and concerns about the effects of divorce
2	Training in recognizing children's silence and worries; teaching effective communication skills	Identifying children's hidden concerns and misconceptions; correcting parents' mistaken beliefs; training in active, empathetic, and supportive listening
3	Supporting children's adjustment; identifying risk and protective factors; designing child-centered parenting programs	Introducing risk and protective factors; teaching age-appropriate strategies for discussing divorce with children; designing stable, child-centered parenting plans
4	Training in conflict resolution, anger management, self-care, and effective post-divorce parenting styles	Managing parental anger and unresolved conflict; teaching cooperative co-parenting (shared decision-making) and parallel parenting (independent management under high-conflict conditions)
5	Enhancing children's resilience through external	Introducing resilience; identifying external support resources and internal

	supports and internal growth resources	growth resources (e.g., self-awareness and empathy skills)
6	Strengthening children's resilience through internal growth resources	Training parents to foster children's emotion regulation, problem-solving, self-soothing, and structured decision-making skills
7	Emotionally intelligent parenting; effective post-divorce parenting practices	Examining the effects of parenting styles on children's adjustment; training in emotionally intelligent parenting integrating empathy with clear and predictable boundaries
8	Preparing children for parents' new relationships; fostering realistic expectations and reducing anxiety	Exploring factors influencing stepfamily success; discussing realistic versus unrealistic parental expectations; understanding children's perspectives and preparing them for parental remarriage

Data analysis

Data analysis was conducted in two stages: descriptive and inferential statistics. In the descriptive stage, sample characteristics were summarized using frequency, percentage, mean, and standard deviation. For the inferential stage, a multivariate analysis of covariance (MANCOVA) was performed using SPSS (version 22). The pretest scores of the Children's Beliefs About Parental Divorce Scale (CBAPS) were entered as covariates in the model to control for baseline differences. Prior to conducting MANCOVA, statistical assumptions were assessed. The Shapiro–Wilk test confirmed normality of the distributions ($P < 0.05$). Linearity assumptions was acceptable despite a very weak covariate–dependent variable correlation ($r = 0.08$, $p = 0.574$) due to balanced group sizes. Although Levene's test indicated a violation of homogeneity of variances ($F = 3.44$, $p = 0.041$), this was not considered problematic given the approximately equal group sizes and the robustness of MANCOVA to such violations under balanced designs. The assumption of homogeneity of regression slopes was satisfied, as the interaction between group and pretest scores was nonsignificant ($F = 1.72$, $p = 0.191$). Multicollinearity diagnostics indicated no issues (tolerance = 1.00, VIF = 1.00). Effect sizes (partial η^2) were calculated to evaluate the magnitude of group differences, and Bonferroni corrections were applied for multiple comparisons to reduce the risk of Type I error. These considerations supported the appropriateness of MANCOVA for testing the study hypotheses.

Results

The total sample comprised 45 children from divorced families, who were randomly assigned to three groups: CODIP ($n = 15$), A.C.T ($n = 15$), and a control group ($n = 15$). The mean age of the children across all groups was 8.86 years ($SD = 0.81$; range = 8–10), and the mean age of their parents was 39.82 years ($SD = 4.44$; range = 28–46).

Table 3 presents the demographic characteristics of participants, including gender, child's educational level, child's age, and parental educational level, reported separately for each group. Chi-square analyses indicated no significant differences among the three groups in any demographic variable: gender, $\chi^2(2) = 0.72$, $p = .69$; child's educational level, $\chi^2(4) = 1.23$, $p = .87$; child's age, $\chi^2(4) = 1.23$, $p = .87$; parental educational level, $\chi^2(8) = 1.69$, $p = .98$. These findings suggest that the groups were comparable at baseline regarding key demographic characteristics.

Table 3: Demographic characteristics of the research participants

Variable	Category	Group			χ^2	p
		CODIP	A.C.T	Control		
Gender	Girl	6 (13.3)	6 (13.3)	8 (17.8)	0.720	0.698
	Boy	9 (20.0)	9 (20.0)	7 (15.6)		
	Total	15 (33.3)	15 (33.3)	15 (33.3)		
Child Education	Second grade	6 (13.3)	5 (11.1)	7 (15.6)	1.233	0.873
	Third grade	4 (8.9)	6 (13.3)	5 (11.1)		
	Fourth grade	5 (11.1)	4 (8.9)	3 (6.7)		
	Total	15 (33.3)	15 (33.3)	15 (33.3)		
Child Age	8 years	6 (13.3)	5 (11.1)	7 (15.6)	1.233	0.873
	9 years	4 (8.9)	6 (13.3)	5 (11.1)		
	10 years	5 (11.1)	4 (8.9)	3 (6.7)		
	Total	15 (33.3)	15 (33.3)	15 (33.3)		
Parent Education	High School	2 (4.4)	2 (4.4)	2 (4.4)	1.690	0.989
	Diploma	5 (11.1)	6 (13.3)	6 (13.3)		
	Advanced Diploma	2 (4.4)	2 (4.4)	1 (2.2)		
	Bachelor	4 (8.9)	4 (8.9)	3 (6.7)		
	Master	2 (4.4)	1 (2.2)	3 (6.7)		
	Total	15 (33.3)	15 (33.3)	15 (33.3)		

Table 4 presents the means and standard deviations of the total problematic beliefs and their subscales for the CODIP, A.C.T, and control groups at pre- and post-test. As shown, in both experimental groups (CODIP and A.C.T), the mean scores of all subscales including Peer Ridicule and Avoidance, Paternal Blame, Maternal Blame, Fear of Abandonment, Hope of Reunification, and Self-Blame—as well as the total problematic

beliefs, decreased from pre-test to post-test, indicating an improvement in children's maladaptive beliefs regarding parental divorce. In contrast, the control group exhibited minimal reductions in scores.

Specifically, in the CODIP group, the total problematic beliefs decreased from $M = 26.33$ ($SD = 3.35$) at pre-test to $M = 13.13$ ($SD = 2.55$) at post-test, while in the A.C.T group, the total score decreased from $M = 27.86$ ($SD = 1.68$) to $M = 12.20$ ($SD = 1.47$). The control group showed a small decrease from $M = 25.86$ ($SD = 2.55$) to $M = 24.26$ ($SD = 2.91$). Similar patterns of reduction were observed across all subscales. These findings indicate that both CODIP and A.C.T interventions were effective in reducing maladaptive beliefs in children of divorce, as reflected in lower post-test scores relative to baseline and compared to the control group. Multivariate analyses (Table 5) confirmed that these differences were statistically significant (all $p < .05$), supporting the efficacy of both programs.

Table 4 . Mean and standard deviation related to components of Problematic beliefs regarding parental divorce

Variable	Group	Pre-test		Post-test	
		<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Peer Ridicule and Avoidance	CODIP	4.40	0.98	2.13	0.74
	A.C.T	4.73	1.22	1.86	0.51
	Control	4.40	1.18	4.00	1.25
Paternal Blame	CODIP	4.26	1.38	2.13	0.83
	A.C.T	4.66	0.81	2.06	0.59
	Control	4.46	0.83	4.26	0.88
Maternal Blame	CODIP	4.26	1.09	2.06	0.88
	A.C.T	4.53	0.91	2.00	0.65
	Control	4.13	1.12	3.93	0.96
Fear of Abandonment	CODIP	4.53	1.06	2.13	0.63
	A.C.T	4.60	1.05	2.13	0.63
	Control	4.40	0.91	4.06	0.88
Hope of Reunification	CODIP	4.46	1.30	2.33	0.61
	A.C.T	4.73	0.59	2.06	0.70
	Control	4.40	0.91	4.13	0.83
Self-Blame	CODIP	4.40	1.05	2.33	0.72
	A.C.T	4.60	0.98	2.06	0.59
	Control	4.06	1.16	3.86	1.18
Total Problematic Beliefs	CODIP	26.33	3.35	13.13	2.55
	A.C.T	27.86	1.68	12.20	1.47
	Control	25.86	2.55	24.26	2.91

A multivariate analysis of covariance (MANCOVA) was performed to examine the effects of group condition (CODIP, A.C.T, control) on the problematic beliefs of children

of divorce, while controlling for pretest CBAPS scores. The results indicated a significant overall effect of group on the combined dependent variables, Pillai's Trace = .940, $F(12, 64) = 4.72$, $p < .001$, partial $\eta^2 = .47$. Similar results were observed with Wilks' Lambda, Hotelling's Trace, and Roy's Largest Root, confirming the robustness of the multivariate findings (see Table 5).

Table 5. Multivariate Test Statistics for Group Differences

Test Statistic	Value	F	P	Partial Eta Squared
Pillai's Trace	.940	4.72	0.001	0.470
Wilks' Lambda	.095	11.58	0.001	0.692
Hotelling's Trace	9.15	22.87	0.001	0.821
Roy's Largest Root	9.15	48.59	0.001	0.901

Follow-up ANCOVAs revealed significant group effects on all subscales of Problematic Beliefs (see Table 6). Specifically: Peer Ridicule and Avoidance: $F(2, 42) = 24.07$, $p < .001$, partial $\eta^2 = .57$, Paternal Blame: $F(2, 42) = 33.81$, $p < .001$, partial $\eta^2 = .65$, Maternal Blame: $F(2, 42) = 33.23$, $p < .001$, partial $\eta^2 = .65$, Fear of Abandonment: $F(2, 42) = 34.86$, $p < .001$, partial $\eta^2 = .66$, Hope of Reunification: $F(2, 42) = 36.19$, $p < .001$, partial $\eta^2 = .67$, Self-Blame: $F(2, 42) = 29.08$, $p < .001$, partial $\eta^2 = .62$, Total Problematic Beliefs: $F(2, 42) = 134.07$, $p < .001$, partial $\eta^2 = .88$. These large effect sizes indicate that a substantial proportion of the variance in posttest scores was explained by group condition, after adjusting for pretest levels.

Table 6. Results of multivariate analysis of covariance comparing the effect of the independent variables on the dependent variables

Variables	Sum of Squares	DF	Mean Square	F	p	Eta
Peer Ridicule and Avoidance	36.33	2	18.16	24.07	0.001	.572
Paternal Blame	42.96	2	21.48	33.81	0.001	.653
Maternal Blame	38.75	2	19.38	33.23	0.001	.649
Fear of Abandonment	33.73	2	16.86	34.86	0.001	.660
Hope of Reunification	35.65	2	17.82	36.19	0.001	.668
Self-Blame	34.93	2	17.46	29.08	0.001	.618
Total Problematic beliefs	1326.03	2	663.01	134.07	0.001	.882

As shown in Table 7, Bonferroni-adjusted pairwise comparisons indicated that both intervention groups showed significantly lower scores on maladaptive divorce-related beliefs compared to the control group (CODIP vs. Control: $p < .001$; A.C.T vs. Control: $p < .001$). In contrast, no significant differences were found between the CODIP and A.C.T groups, either in the total score ($p = .252$) or across any of the subscales. These findings clearly suggest that while both interventions were effective in reducing problematic beliefs, their relative efficacy was comparable.

Table 7 . Pairwise Comparisons for Groups

As shown in Table 7, Bonferroni-adjusted pairwise comparisons indicated that both intervention groups showed significantly lower scores on maladaptive divorce-related beliefs compared to the control group (CODIP vs. Control: $p < .001$; A.C.T vs. Control: $p < .001$). In contrast, no significant differences were found between the CODIP and A.C.T groups, either in the total score ($p = .252$) or across any of the subscales. These findings clearly suggest that while both interventions were effective in reducing problematic beliefs, their relative efficacy was comparable.

Table 7 . Pairwise Comparisons for Groups

Dependent Variable	(I) Group	(J) Group	(I-J)	Std. Error	p
Peer Ridicule and Avoidance	CODIP	Control	-1.790	0.324	0.000
	A.C.T	A.C.T	0.387	0.328	0.738
	A.C.T	Control	-2.177	0.339	0.000
Paternal Blame	CODIP	Control	-2.114	0.297	0.000
	A.C.T	A.C.T	0.117	0.301	1.000
	A.C.T	Control	-2.231	0.311	0.000
Maternal Blame	CODIP	Control	-1.927	0.285	0.000
	A.C.T	A.C.T	0.265	0.288	1.000
	A.C.T	Control	-2.192	0.298	0.000
Fear of Abandonment	CODIP	Control	-1.923	0.259	0.000
	A.C.T	A.C.T	-0.001	0.263	1.000
	A.C.T	control	-1.922	0.271	0.000
Hope of Reunification	CODIP	Control	-1.831	0.262	0.000
	A.C.T	A.C.T	0.285	0.265	0.867
	A.C.T	Control	-2.116	0.274	0.000
Self-Blame	CODIP	Control	-1.718	0.289	0.000
	A.C.T	A.C.T	0.440	0.293	0.424
	A.C.T	Control	-2.158	0.302	0.000
Total Problematic Beliefs	CODIP	Control	-11.302	0.829	.000
	A.C.T	A.C.T	1.493	0.840	.252
	A.C.T	Control	-12.795	0.867	.000

Discussion

The present study aimed to compare the effectiveness of the Children of Divorce Intervention Program (CODIP) and the parent training program Assisting Children Through Transition (A.C.T) in reducing problematic beliefs regarding parental divorce. Consistent with the hypotheses, the results demonstrated that both interventions significantly reduced problematic beliefs compared to the control group (CODIP vs. Control: $p < .001$; A.C.T vs. Control: $p < .001$; see Table 7). Importantly, no significant differences were observed between CODIP and A.C.T in either the total score ($p = .252$) or across the six subscales, indicating that both interventions were equally effective. The

effect sizes were large (partial η^2 ranging from .57 to .88; Table 6), underscoring the practical significance of these findings.

Consistent with previous findings, the present study demonstrated that both CODIP and A.C.T interventions effectively reduced problematic beliefs among children of divorce. Compared to prior research, the current results extend the literature by directly comparing a child-focused (CODIP) and a parent-focused (A.C.T) intervention in this context. For instance, Ramezanzadeh et al. (2023), Rhodes et al. (2021), and Kyung-rim & Jung-hye (2012) reported similar effectiveness of CODIP in enhancing children's understanding of divorce and reducing maladaptive cognitions. In contrast, Botha and Wild (2013) found no significant reduction in problematic beliefs among South African children following CODIP. These discrepancies may be attributable to differences in the age and gender composition of participants (8–10 years old, including both boys and girls), the interval since parental divorce (mean 2 years and 7 months in the present study vs. 7 years in Botha & Wild, 2013), and cultural or country-level differences (Iran vs. South Africa). Moreover, the current sample appears to be more sensitive to CBT-Play-based interventions compared to older or demographically different samples used in previous studies. This increased responsiveness likely contributed to the observed efficacy of CODIP in reducing maladaptive beliefs. Overall, these findings highlight the importance of developmental stage, gender diversity, and timing post-divorce in moderating the effectiveness of interventions targeting children's cognitive and emotional adjustment.

In explaining the effectiveness of CODIP in reducing problematic beliefs among children of divorce, the pivotal role of cognitive-behavioral play therapy (CBPT) is particularly noteworthy. CODIP is explicitly grounded in cognitive-behavioral principles, yet since its target population is children, these principles are implemented through structured play-based activities. This approach, which integrates cognitive and behavioral strategies within a play framework, facilitates the identification and restructuring of maladaptive beliefs in a developmentally appropriate manner. Techniques such as modeling, behavioral rehearsal, role play, storytelling, and drawing enable children to modify their cognitive distortions and replace them with more realistic and constructive beliefs (Knell, 1993; Pedro-Carroll, 2005; Senko, 2016). In particular, role-play and doll play allow children to externalize their emotions and thoughts regarding the divorce experience and to gain a more accurate understanding of its meaning. Through reconstructing family scenarios and learning to distinguish between controllable and uncontrollable issues, children recognize that divorce is a decision made by parents rather than a consequence of their own behavior. This process helps reduce problematic beliefs such as self-blame, parental blame, and Hope of Reunification.

Furthermore, the provision of a safe and supportive group environment fosters a sense of belonging and social acceptance. Activities such as choosing a group name and symbol strengthen solidarity and help prevent experiences of rejection and social withdrawal (Pedro-Carroll, 2005). Emphasis on emotion identification and acceptance of diverse family structures enables children to label and express their feelings while perceiving their experiences as less stigmatizing compared to peers. This prevents the emergence of self-deprecating thoughts and fears of peer ridicule. Additionally, self-esteem-enhancing activities such as completing a personal booklet and participating in the "You Are a

Special Child” game further reinforce children’s sense of worth and belonging, alleviating concerns about being forgotten or deemed unimportant (Pedro-Carroll & Jones, 2005). The present study also demonstrated that the A.C.T program significantly reduced problematic divorce-related beliefs among children. To our knowledge, no previous study has directly examined the effectiveness of A.C.T in this domain; however, related research supports the notion that parent-focused interventions can play a crucial role in mitigating the negative psychological consequences of divorce (Quchani et al., 2021; Razavi & Livarjani, 2019). Theoretically, the effectiveness of A.C.T can be understood through its impact on both cognitive and relational mechanisms. Based on cognitive theories, maladaptive beliefs among children often stem from misinterpretations of divorce-related events. A.C.T addresses these distortions by targeting two levels: the cognitive level (modifying the beliefs of both children and parents) and the relational level (enhancing parent–child interactions). Parents are educated about the psychological underpinnings of children’s silence, fears, and maladaptive beliefs, enabling them to provide supportive rather than maladaptive responses (Pedro-Carroll, 2010). At the same time, the program challenges parental misconceptions and fosters a safe home environment through the teaching of communication skills such as active listening and empathy. These processes align with findings that unhealthy parent–child interactions significantly contribute to the development of irrational beliefs (Huang & Lee, 2010; Oppenheimer et al., 2018). Moreover, A.C.T emphasizes conflict management, particularly the regulation of unresolved parental anger, which helps improve parents’ emotional regulation and communication patterns (Pedro-Carroll, 2010). Consequently, children are less exposed to high-conflict interactions, reducing the likelihood of developing maladaptive beliefs such as self-blame or parental blame. The program further supports the development of resilience in children by promoting both internal resources (e.g., self-awareness, emotion regulation, problem-solving, empathy, and self-soothing) and external resources (e.g., social support, secure relationships, and peer involvement) (Pedro-Carroll, 2010). Enhanced resilience not only protects children against the psychological harms of divorce but also reduces maladaptive cognitions such as self-blame, social withdrawal, and fear of peer rejection. By strengthening these protective factors, A.C.T equips children with greater confidence in social interactions and diminishes the internalization of negative self-perceptions.

Taken together, the findings revealed that both CODIP and A.C.T were significantly effective in reducing problematic beliefs among children of divorce, with no significant difference in their impact. To date, no study has directly compared these two interventions in this context, underscoring the need for further comparative research. From a content perspective, CODIP is a child-focused intervention that directly targets children’s cognitions through structured activities such as role-play, group discussions, modeling, and self-esteem-enhancing exercises (Pedro-Carroll, 1992; Pedro-Carroll & Jones, 2005). In contrast, A.C.T is a parent-focused program that indirectly influences children’s beliefs by improving parent–child interactions, enhancing parental sensitivity to children’s emotions, and reducing high-risk parenting styles (Pedro-Carroll, 2010). From the standpoint of mechanisms of change, CODIP operates primarily through direct, child-centered techniques such as role-play, group discussions, and self-esteem-building

exercises, while A.C.T functions through parent training aimed at reducing conflict, improving communication, and fostering resilience in children. Thus, although both programs were effective, they achieved their outcomes through distinct pathways. CODIP works by enhancing children's emotional awareness, promoting acceptance of divorce, and restructuring distorted cognitions, whereas A.C.T reduces family stress, strengthens parenting practices, and provides a safe relational environment, thereby facilitating the modification of children's maladaptive beliefs and promoting adaptive adjustment. This overlap in mechanisms of change may explain the lack of significant difference observed between the two interventions.

One key limitation of this study concerns its external validity, as the sample was restricted to children of consensual divorce in schools in Sari. Therefore, generalization of findings to families with different structures (e.g., joint custody, stepfamilies, or extended families) and to other cultural and geographical contexts remains limited. Another limitation involves the potential for socially desirable responding and cognitive or emotional biases in self-reported data, which may affect accuracy and reliability. Additionally, important demographic variables such as family economic status, parental education, parental employment, parental income, and type of housing were not controlled, even though they could influence intervention outcomes. The study also did not directly examine the role of parental involvement in intervention delivery, potential side effects, or differences based on children's gender, which may moderate program effectiveness.

Future research should address these limitations by including more diverse family structures and multiple cultural and regional contexts to enhance external validity. Incorporating multiple assessment methods, such as behavioral observation, parent or teacher interviews, and clinical evaluations, may reduce response bias and increase data reliability. Controlling for potential confounding demographic factors and actively involving both parents in intervention delivery is also recommended. Longitudinal follow-up is needed to examine long-term effects and sustainability of intervention outcomes. Practically, it is suggested that culturally adapted versions of CODIP and A.C.T be developed and implemented with the support of national policy-making bodies to facilitate broader application in schools, counseling centers, and family courts.

Conclusion

This study provides valuable insights into the comparative effectiveness of two distinct intervention programs—the Children of Divorce Intervention Program (CODIP) and the parent-focused Assisting Children Through Transition (A.C.T) program in reducing maladaptive beliefs related to parental divorce among children. The findings demonstrate that both interventions significantly improved problematic beliefs, with no statistically significant difference in their overall efficacy. This novel comparison between child-centered and parent-centered approaches fills an important gap in the existing literature and corroborates prior evidence supporting each program's individual effectiveness. CODIP's success appears to be grounded in its cognitive-behavioral play therapy framework, which facilitates direct cognitive restructuring through experiential activities

such as role-play and group discussion, allowing children to externalize emotions and reframe distorted beliefs. Conversely, the A.C.T program operates primarily via enhancing parental skills and family dynamics, reducing conflict and fostering supportive parent-child interactions that indirectly mitigate children's maladaptive cognitions. These complementary mechanisms highlight the potential benefits of integrating child- and parent-focused interventions to comprehensively address the psychological needs of children experiencing parental divorce. Practically, the current findings advocate for the cultural adaptation and broader implementation of both CODIP and A.C.T programs in educational, clinical, and judicial settings to support children's psychological adjustment during parental divorce. By advancing our understanding of intervention mechanisms this study contributes to optimizing psychosocial support for this vulnerable population

Funding

This study did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Conflict of Interest

The authors declare that they have no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Acknowledgments

The authors sincerely thank all the parents and children who participated in this study, as well as everyone who facilitated the implementation of this research.

Ethical Approval

This study is derived from the first author's doctoral dissertation. The first author designed the study, collected data, and drafted the article, while the supervisor (second author) and consulting professors (third and fourth authors) contributed to research supervision, data analysis, and critical revision of the article. The study was approved by the Ethics Committee of Islamic Azad University, Sari Branch (Ethics Code: IR.IAU.SARI.REC.1402.319) and was also registered in the Iranian Registry of Clinical Trials (IRCT Code: IRCT20190319043092N2).

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