

Divorce Mediation: One General Practitioner's Viewpoint — George Davie



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Curriculum vitae

George matriculated in Pretoria, obtained the MBChB from Pretoria University and has been in general practice in Pretoria for 3 decades. He is an elected member of the Council of the SA Academy of Family Practice/Primary Care, of the Federal Council of the Medical Association of SA, and of the SA Medical and Dental Council. George has been married 3 times. He has three children from his first wife and two stepchildren of his third wife and is still on very friendly footing with both previous wives.

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Summary

The casualties of divorce are tended to every day by general practitioners. Many members of the involved families are wounded in the skirmishes between the divorcees and their entourages. Doctors are trained to succour the sick and wounded but this makes them partisan and thus unable to be disinterested mediators. To reduce the trauma of divorce, a new attitude is necessary and trained mediators must be encouraged to supervise the dissolution of the marriage contract.

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The general practitioner tends to the casualties of divorce every day in his practice. The most obviously wounded are the protagonists themselves but many others in the families are caught in the crossfire. Their injuries are regularly mistaken for something else. Chronically ill children are often the victims of wrangling in the home environment from the moment one of the parents has decided that divorce is inevitable.

Another very common casualty is the grandmother. She often presents with inexplicable fatigue, sleeplessness, hypertension or even a peptic ulcer. She is acutely perceptive to the agony of the children because she is not partially protected by the armour of righteous indignation. We do not often see grandfathers in our

surgeries, perhaps because they are stoics.

The psychological warfare is however not limited to single combat between husband and wife. Sometimes the children or other members of the family obtain access to lethal weapons in the armoury, and set about creating havoc. Older children especially, their security threatened by the perceived clay feet of erstwhile role models, can be uncompromisingly vicious.

Younger children are the most vulnerable and the pain inflicted on them, by their usually intensely caring parents, is incredible. I recall the anguish of a seven year old girl. Whenever she was driven home by her father after "his weekend", she would surreptitiously divest herself of all the little gifts he had given her; a tiny gold ring, a pair of sandals and a fascinating story book. This she did in the car and left them under the seat. Mother would be extremely angry if she displayed any sign of the intimacy between her and her father. She would also ignore every attempt at communication about the weekend.

A doctor is trained to succour the sick and wounded, and he does a lot of patting and stroking of the injured egos that drift into his consulting rooms. He cannot successfully distance himself from the patient and his partisan stance sometimes increases the patient's selfpity. This does not help to obtain an equitable dissolution of the marriage contract.

The other stretcher bearer that reaches the casualty in this time of extreme stress in our experience, is the lawyer. His training seems to make him even less well equipped to

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be non-partisan. After one look at the injuries inflicted, and while the doctor bandages, he shakes his fist at the adversary and shouts, "We'll get you for this!"

Two things need to come about to reduce the psychological carnage of divorce.

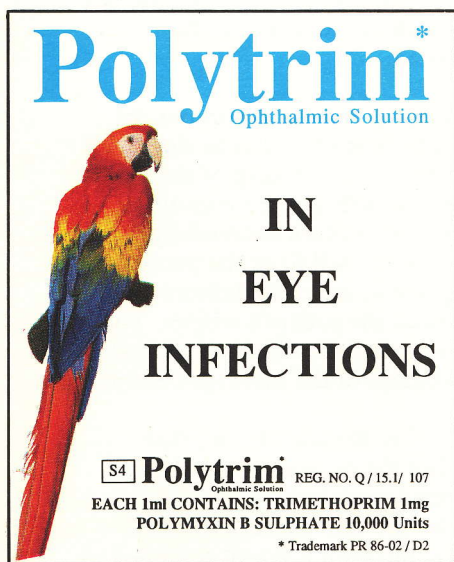
Firstly, people's attitude to divorce has to be modified. From a strictly scientific viewpoint, unencumbered by religious moral precepts, it is obvious that a phenomenon that occurs 60% of the time, as we are told divorce does, must be considered to be the norm. A couple staying together in marriage for decades while each develops his own

Breaking up of a marriage partnership should be accepted impartially by all, and as normal

personality in unique ways, may be admirable but is certainly not average behaviour in modern society. If this fact can be accepted impartially by all, the guilt involved in breaking up the partnership could be significantly reduced and the need for retribution by the "wronged" with its inevitable backlash, will be diminished. Divorce law courts seem to have taken a step in this direction by accentuating the breakup in a marriage relationship rather than blaming a guilty party for misdemeanors.

The other necessary development is the availability of an impartial mediation agent, to ensure a reasonable settlement for all concerned but recognising as a

priority the welfare of the children. Doctors, and a number of other professionals, enjoy some advantages if they should choose to help in mediation after completing the requisite training. They are readily accessible, usually inspire trust because of their humanitarian background and are controlled by professional councils with extremely stringent ethical standards. It is important, though, that they realise that mediation skills are not automatically acquired by anyone who seeks to practice this highly specialised art. With divorce not likely to disappear in the near future and considering all the other areas in which this skill may be of value, it is probably now the time to consider bringing mediation philosophy into the undergraduate curriculum of the general practitioner.



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