Non Violent Resistance and Serious Trauma:
working within the larger system and trauma focus for intervention in multi-stressed families

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Child to Parent Violence: Innovations in Practice, Policy and Research

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Multi-stressed Families and Violence

Context:

• Histories of child abuse, domestic violence, economic deprivation, social marginalisation and minority status. Physical illness, disability and psychological difficulties, self-medication with drugs or alcohol and social isolation present greater challenges for therapists and families.
3 Challenges for Multi-stressed Families and their Therapists

1. Multi-stressed families have problematic relationships within the wider family and community.

2. Multi-stressed families have long-term involvement with professional networks and statutory agencies.

1. Members of multi-stressed families are heavily traumatised.
Challenge no.1:

Multi-stressed families have problematic relationships within the wider family and community

- Isolation of parents
- Prescriptive/critical or controlling/dangerous communication by other adults, from whom parents seek support..
Challenge no.2:

Multi-stressed families have long-term involvement with professional networks and statutory agencies.

- Prescriptive and blaming communication by powerful professionals.
- Fragmentation of the professional network.
Challenge no.3:

Members of multi-stressed families are heavily traumatised.

- Parents’ post-traumatic stress, helplessness depression, and self-medication with drugs or alcohol.
- Child aggression re-traumatises parent.
- Child’s insecure attachment and developmental trauma: aggression in the wake of highly activated survival system.
Shift from a victim narrative to a heroic narrative through nonviolence

**Victim Narrative:**
- language of obedience
- focus on control of other
- demonization of self or other
- blaming interaction
- static language
- experience of helplessness

**Heroic Narrative:**
- language of resistance
- focus on self-regulation
- person is more than his/her problem
- rhetoric of alliance-building
- process language
- experience of personal agency
Facing Challenge no.1: Improving relationships between family and social environment.

- The *exception principle*: including safe and supportive others in positive action
- The *utilisation principle*: help critical, prescriptive other adults become safe and supportive, by centring the parent’s support needs in therapeutic conversation – in the planning of positive action.
- The *resistance principle*: protection from dominance and coercion by using nonviolent methods to resist incursion into the family.
Facing Challenge no.2:

Develop alliances between professionals, and between parents and professionals

- Routine *therapeutic network meetings* with parents, helpers and professionals
  - centring the understanding of the child’s unmet needs

- *Supporters’ meetings* involving professionals: plan positive action that professionals will be involved in, alongside other supporters – with the utilisation principle
  - centring the parent’s need for support
Facing Challenge no.3: use NVR as trauma and attachment-focused therapy

- Exceptions to the problem and normalising setbacks.
- Use the announcement and sit-ins as desensitisation situations. Use supporters as interpersonal resource for parents emotional self-regulation.
- Child-focus: reconciliation gestures for parental re-sensitisation to child needs, more secure attachment and overcoming developmental trauma.
Focus on the child

- **Unmet needs in traumatised, aggressive children:**
  - Feeling safe and protected: attachment, developmental trauma and PTS
  - Developmental support: ASD, ADHD, learning difficulties, life
  - Having a sense of belonging
  - A coherent and benign narrative of self and family
Child-focussed NVR

• Using reconciliation gestures to re-activate the caring dialogue:
  – Reconciliation gestures are unconditional acts of positive regard, care and love. Persist, especially when the child rejects them.
  – Re-kindle the parent’s attunement to the child and sensitivity to their unmet needs by planning need-focussed reconciliation gestures.


