

From systemic learned-helplessness to communal presence:

the learnings from Non-Violent Resistance (NVR) Interventions

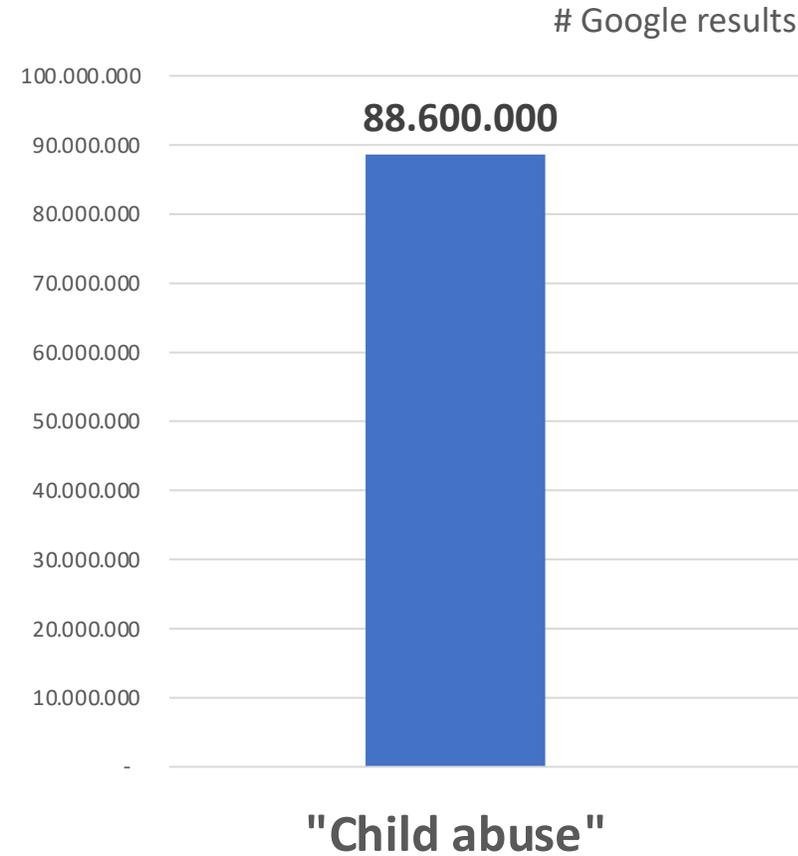
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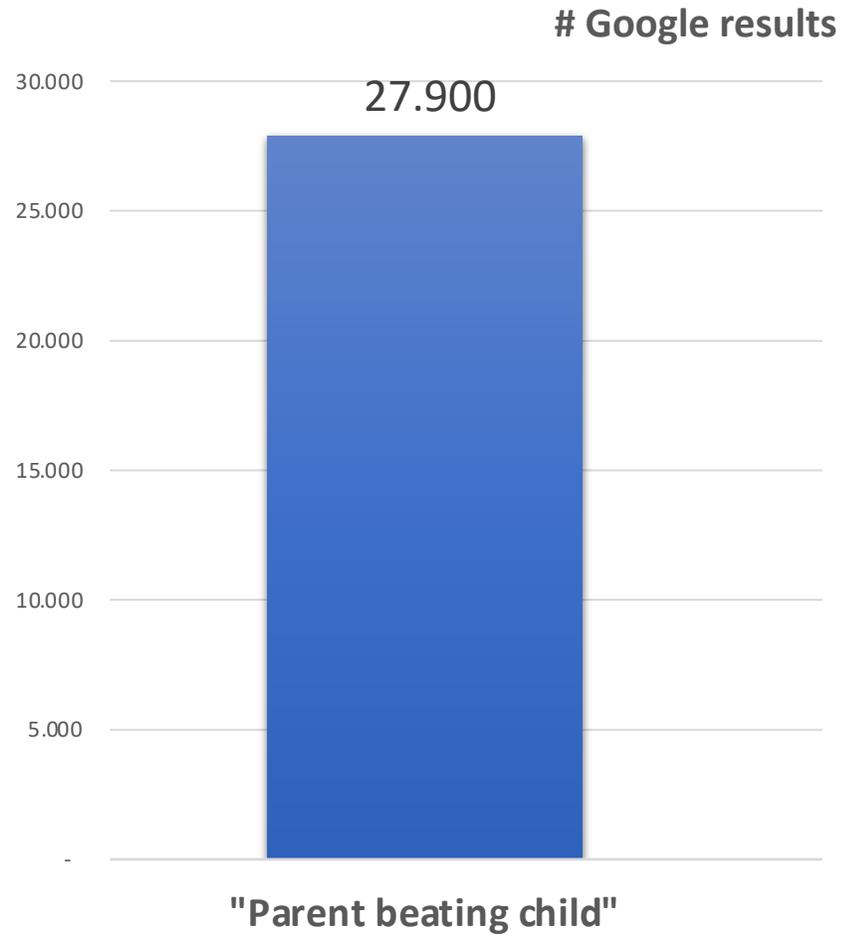
Part 1: NVR and Systemic Empowerment

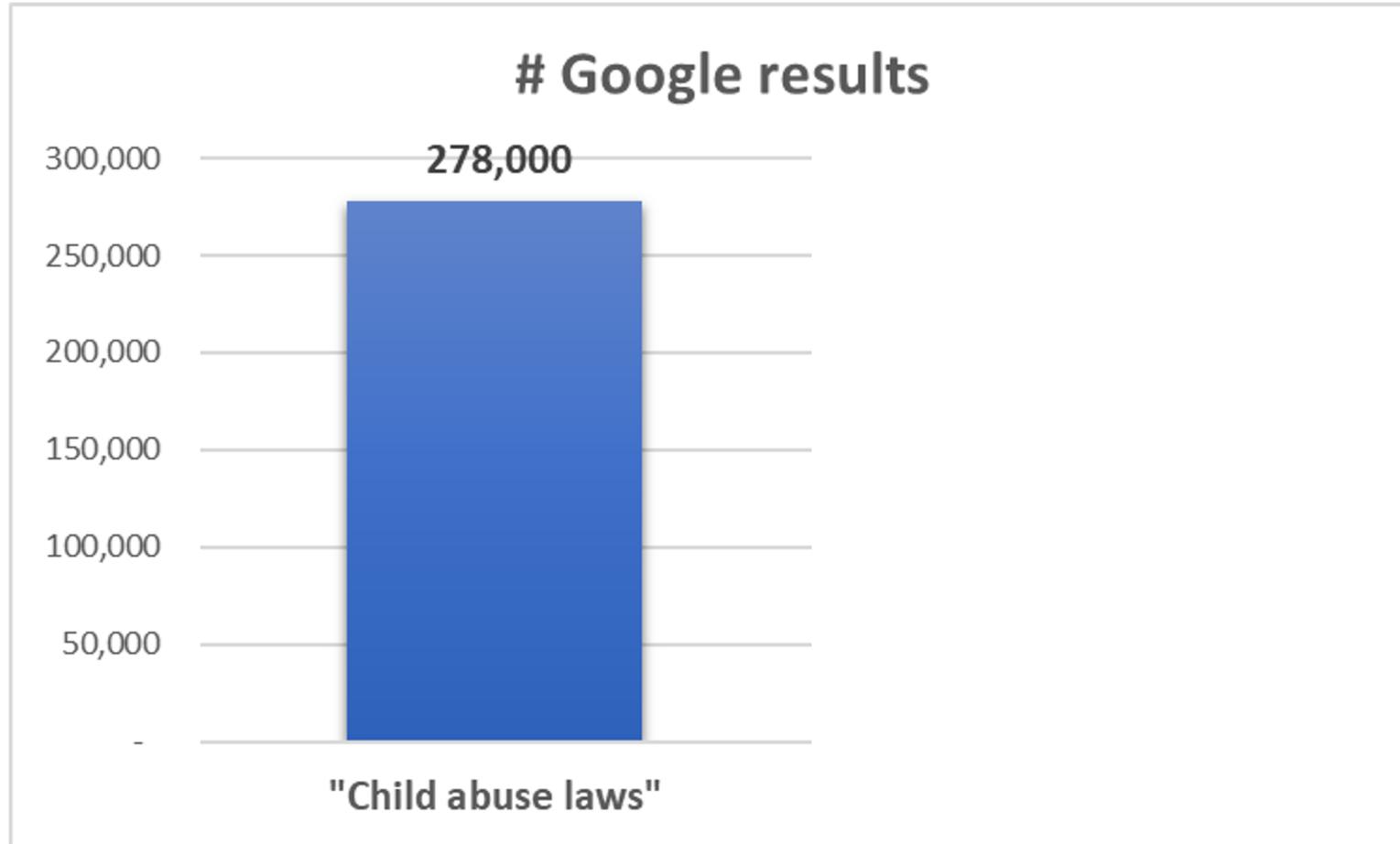


Systemic approach

- Addresses problematic relationships, rather than people as problems.
- Strives to alleviate people's problems, by healing problematic relationships.
- Sees communities and institutions as stakeholders in problematic relationships and in their resolution
- Forms part of larger alliances and movements of practice







Tampa Bay Times

December 26, 2,000

A month later, the charges were dropped, but Steven, a self-employed insurance salesman, and Debbi have vowed to fight for change.

Early next year, they will launch a media blitz expected to take them on national television as they fight for parent abuse laws and increased facilities and services for troubled children.

May 7, 2,000

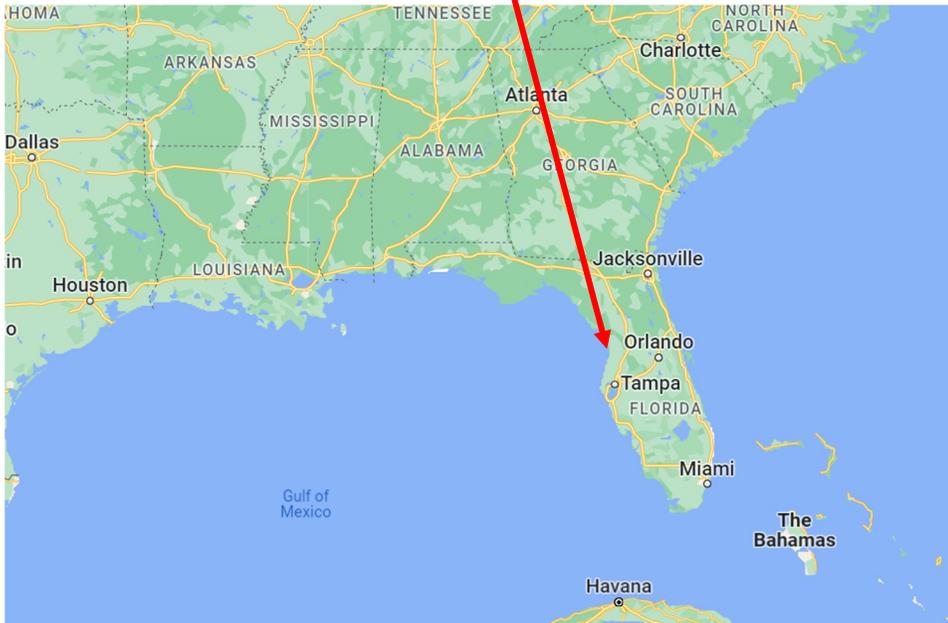
Neglecting or protecting?



By **CHRISTOPHER GOFFARD**

Published May 7, 2000 | Updated Sep. 27, 2005

Millers Bayou, Port Richie, Florida



Police say a couple neglected their teenage son by locking him out of the house. The parents say they were trying to protect their other 16 kids.

The Ludwigs, who have given their lives to saving the wild ones and the damaged ones and the sick ones, have never been able to banish the devil in their 14-year-old boy.

Dozens of times in the past year and a half, Andrew Ludwig's parents have called police to say: Help us. We are afraid of our son.

In his hair-trigger rages, the parents say, Andrew would terrorize his brothers and sisters, flinging picture frames, punching holes in walls, flailing his fists and elbows. Once, he held a fish-boning blade to his sister's throat. Twice, he was arrested for shoving his mother.

Tampa Bay Times

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When Andrew was a young child, Debbi Ludwig remembers, she would hold him for hours, trying to calm him and heal him. "We spent the first year with him just loving him up," she says.

Tampa Bay Times

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"We listened to so many professionals, and nobody has any answers," says Steven Ludwig, 46. He says he has a separated rib and a blackened toe from trying to restrain his son.

Tampa Bay Times

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"We adopt these kids to give them a family, to give them a home, to love them," Steven Ludwig says. "We couldn't get through to Andrew. We're totally devastated that we couldn't reach him." An insurance salesman, he says he took a 75 percent pay cut last year to deal with his son.

Family trips stopped. More and more, Andrew was missing from the dinner table. Says Debbi Ludwig: "He stopped our life."

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By law, said Port Richey police Lt. Bill Sager, the arresting officer, a caregiver's responsibility is to provide shelter to a child. "The statute is pretty clear," Sager says, "not much wiggle room."

Bill Downs, chief of the agency, describes the Ludwigs as "decent, law-abiding, community-spirited people." But in this case, he adds, the law is the law.

The Ludwigs, who have given their lives to saving the wild ones and the damaged ones and the sick ones, have never been able to banish the devil in their 14-year-old boy.

The child is stigmatised.

The diagnosis for Andrew, he says, has ranged from bipolar disorder to oppositional defiance disorder to the term that tells them what they already know, "uncontrollable anger."

The behavior is pathologized.

It was his parents, Steven and Debbi, charged with child neglect for refusing to let Andrew back in the house. A few of their 16 other children _ all but one adopted _ were there to watch the squad car take them away.

The parents are blamed.

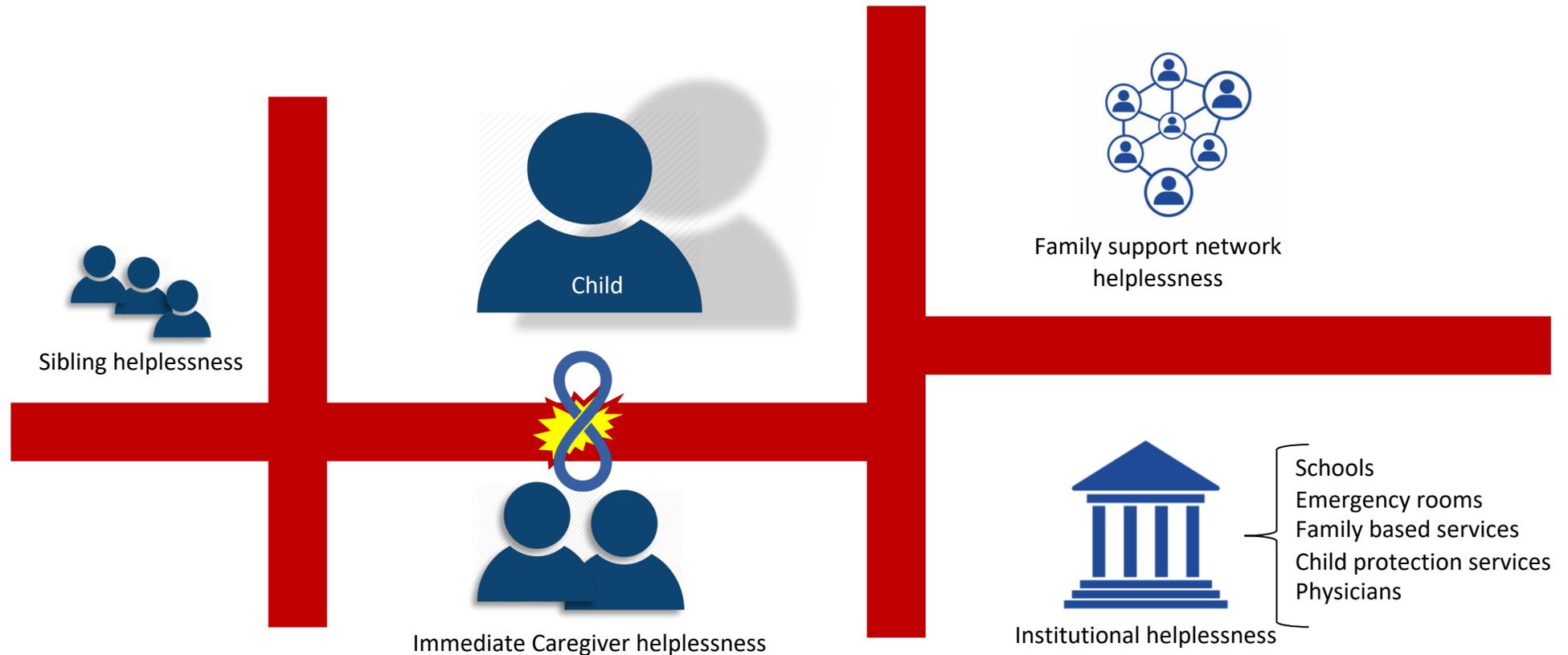
Systemic learned-helplessness

The child is
stigmatised.

The behavior is pathologized.

The parents are blamed.

“Systemic Learned Helplessness”



Naming the problem: two approaches

Child-to-Parent
Violence-and-
Abuse
(CPVA)

2007 -

Aggression toward
Family / Caregivers
in Childhood &
Adolescence
(AFCCA)

2022

The AFCCA Vision

“Aggression toward Family / Caregivers
in Childhood & Adolescence”

(AFCCA)

National Consortium on Aggression toward Family / Caregivers in Childhood & Adolescence (AFCCA)

Building Understanding to Improve Outcomes for Families

The Consortium sought to bring together a national conversation on AFCCA, with membership including individuals from British Columbia, Saskatchewan, Manitoba, Ontario, Quebec, and New Brunswick.

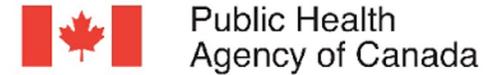
Voice of Families

Voice of Academics

Voice of Practice

Voice of Social Systems

Voice of Policy



With the voices of **100+** parents, caregivers, young adults, first voice advocates with lived experience

Aggression toward Family/Caregivers in Childhood & Adolescence (AFCCA)

Aggression toward Family / Caregivers in Childhood & Adolescence (AFCCA) describes a pattern of behaviour in childhood or adolescence, characterized by aggressive behaviour by a child or adolescent toward family members or other caregivers. This causes significant harm (physical and/or psychological) to the child / adolescent, the person(s) the behaviour is directed toward, and other witnessing family members.



AFCCA is most often directed to parents, primary caregivers, and siblings in the home, but can also be directed toward other caregivers in other settings. The behaviour commonly becomes entrenched and escalates over time.



Language Matters

“...A name and/or language that enables families to succinctly ask for help while conveying the severity of their situation, while also enabling social systems and practitioners to recognize the situation and identify optimal supports for the individual and family...”

- It should honour lived experience;
- It should not stigmatize or pathologize;
- It should be meaningful to the systems / professionals necessary for support.

Aggression toward Family/Caregivers in Childhood & Adolescence



What is
happening



Who is it
directed towards



Developmental
stage

Young adults with lived AFCCA experiences want you to know:

They want to be seen, heard, and respected in conversations about AFCCA.

There is a deep need for genuine connection and community.

Behaviour is a form of communication.

AFCCA may be a “normal” pattern of behaviour that can be expected.

Parents & caregivers with lived AFCCA experiences want you to know:

There is immense shame, blame, and stigma experienced by all family members.

Families are living with an unexpectedly high level and frequency of dangerous behaviour in their home.

Parents/caregivers want to remain at the center of care for their child/adolescent.

AFCCA is experienced by both adoptive and biological families.

Families are having to fight to remain together.

Extensive roadblocks and barriers are preventing access to the help so desperately needed.

The impacts are felt by the entire family unit, and extend to communities and society

Impacts to the child/adolescent:

- Escalating mental health issues
- Diminishing self-esteem and self-worth
- Damaged family relationships
- Barriers to belonging / community
- Dysregulation in other social / community settings
- Criminalization of the child / adolescent
- Depiction as a violent perpetrator
- Entry / re-entry into the child protection system
- Placement instability for children in care, or post-adoption
- Risk of entrenched behaviour into adulthood



Impacts to parents, caregivers and siblings:

- Physical and/or psychological injury / risk
- Escalating mental health issues
- Secondary trauma from exposure to violence in the home
- Damaged family relationships (family unit)
- Isolation of/from family members, suffering shame/blame
- Increased risk of separation/ divorce
- Investigation by child protection services
- Placement instability for other siblings in the home
- Loss of employment (at-home care requirements)
- Financial strain on families

Families have a broad view of desired successful outcomes:

“Can you teach us to walk in the storm, instead of working to avoid it?”

—B.*; Family advocate, parent with lived experience

92% improved self-regulation for child/adolescent

88% reduction in violent, aggressive, or dangerous behaviours

78% improved parent/child relationships

72% creating healthier methods of communication

70% improved sibling relationships

70% enhanced safety for other caregivers in the home

68% enhanced safety for other children in the home

66% reduced risk of family disruption / separation

62% enhanced safety for the child/adolescent themselves

58% increased parent / caregiver understanding and capacity

56% improved attachment with primary parent / caregiver

Full data and descriptions are available from www.afcca-apfea.ca

Improving Outcomes: AFCCA Policy Recommendation Framework

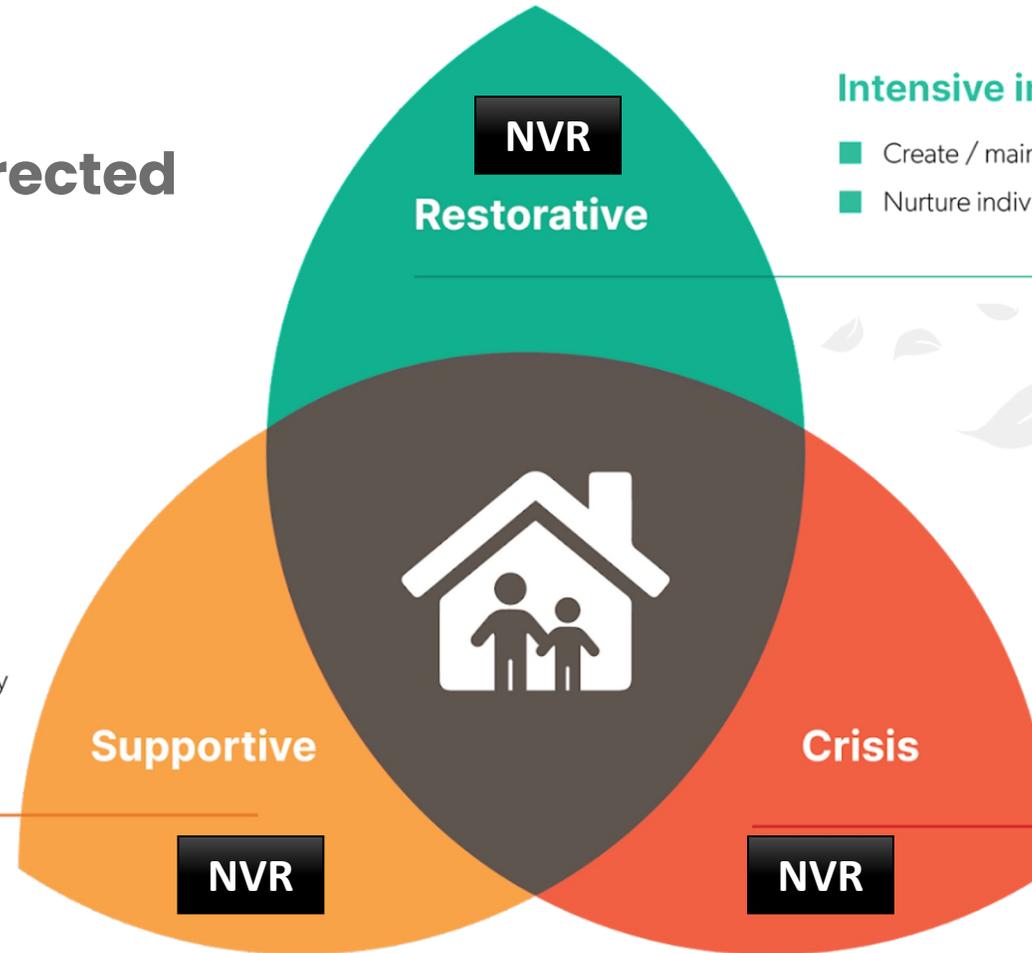


Families urgently need individualized, responsive supports and care...

Families / Youth Directed Circles of Support

Proactive and ongoing interventions that:

- Build awareness and understanding
- Recognize indicators and respond appropriately
- Build on family strengths and capabilities



Intensive interventions that:

- Create / maintain safety for multiple family members
- Nurture individual well-being and family relationships

Extreme interventions required to ensure:

- Crisis management / resolution
- Family preservation
- Address interactions with social / community systems (youth justice, child welfare, etc.) are addressed appropriately

To learn more:

www.afcca-apfea.ca



AFCCA & other forms of domestic violence?

NonViolent Resistance (NVR)

Tampa Bay Times

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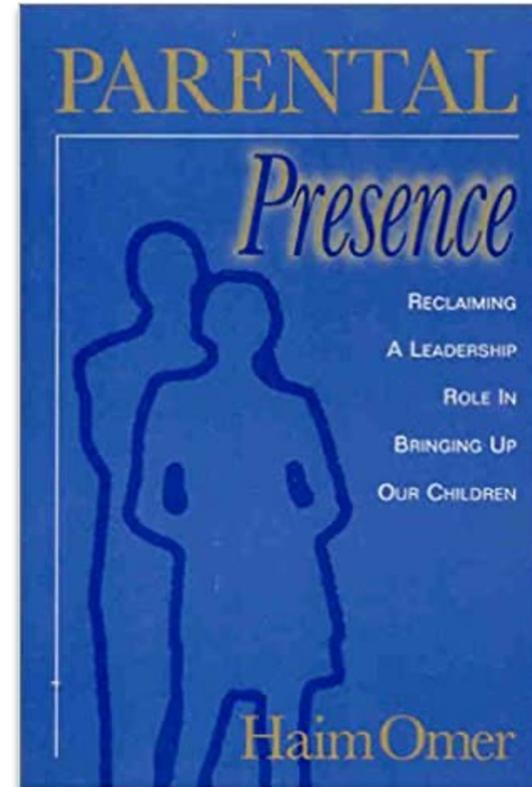
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2000



1999

“Parental collapse” – The *opposite* of presence

Haim Omer’s initial problem definition

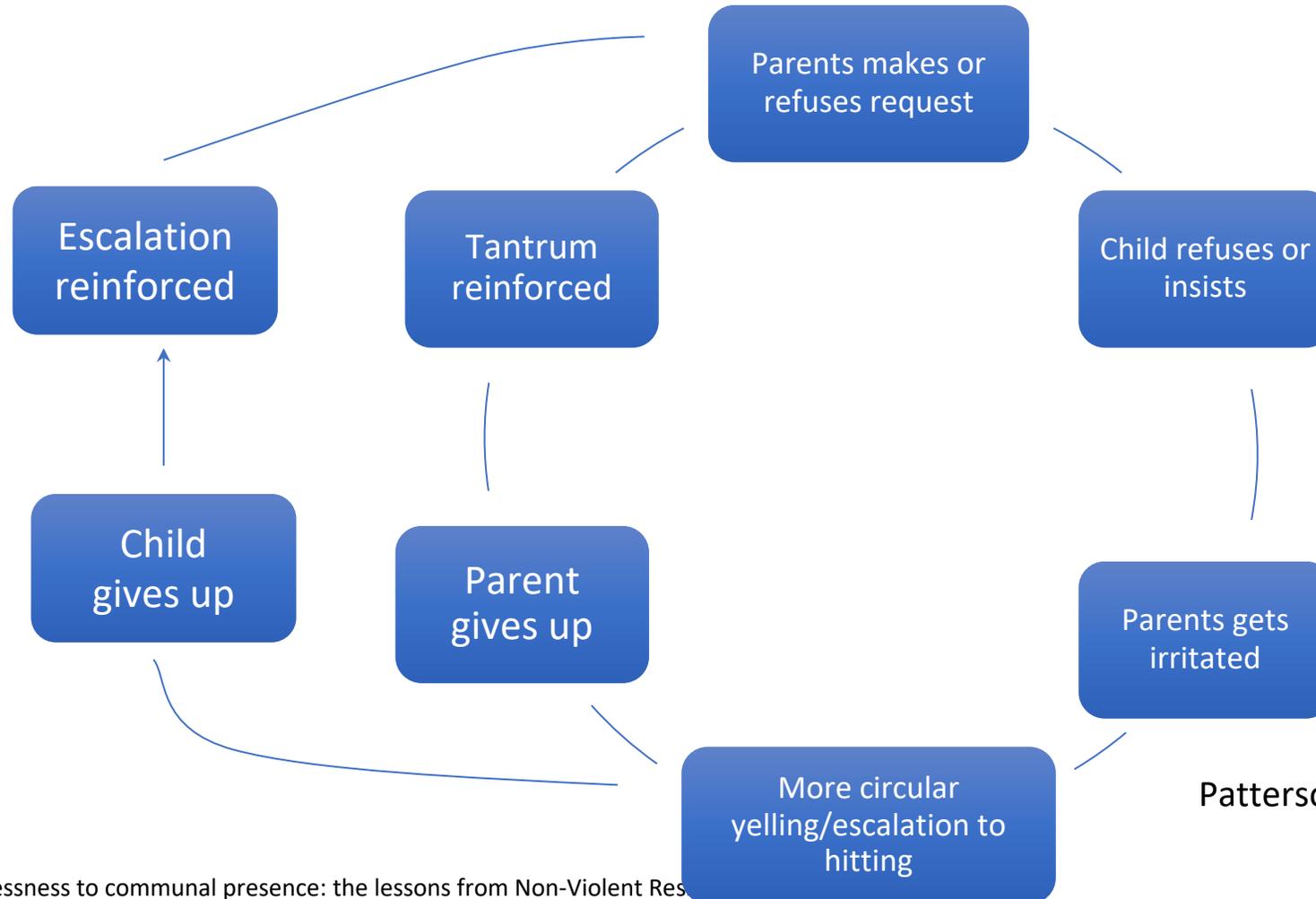
“When a parent “collapses”, becomes paralyzed, or loses his or her personal voice. It is when giving in becomes the norm”

AKA **Caregiver Erasure.**

More than a set of behaviors, it is a state of mind

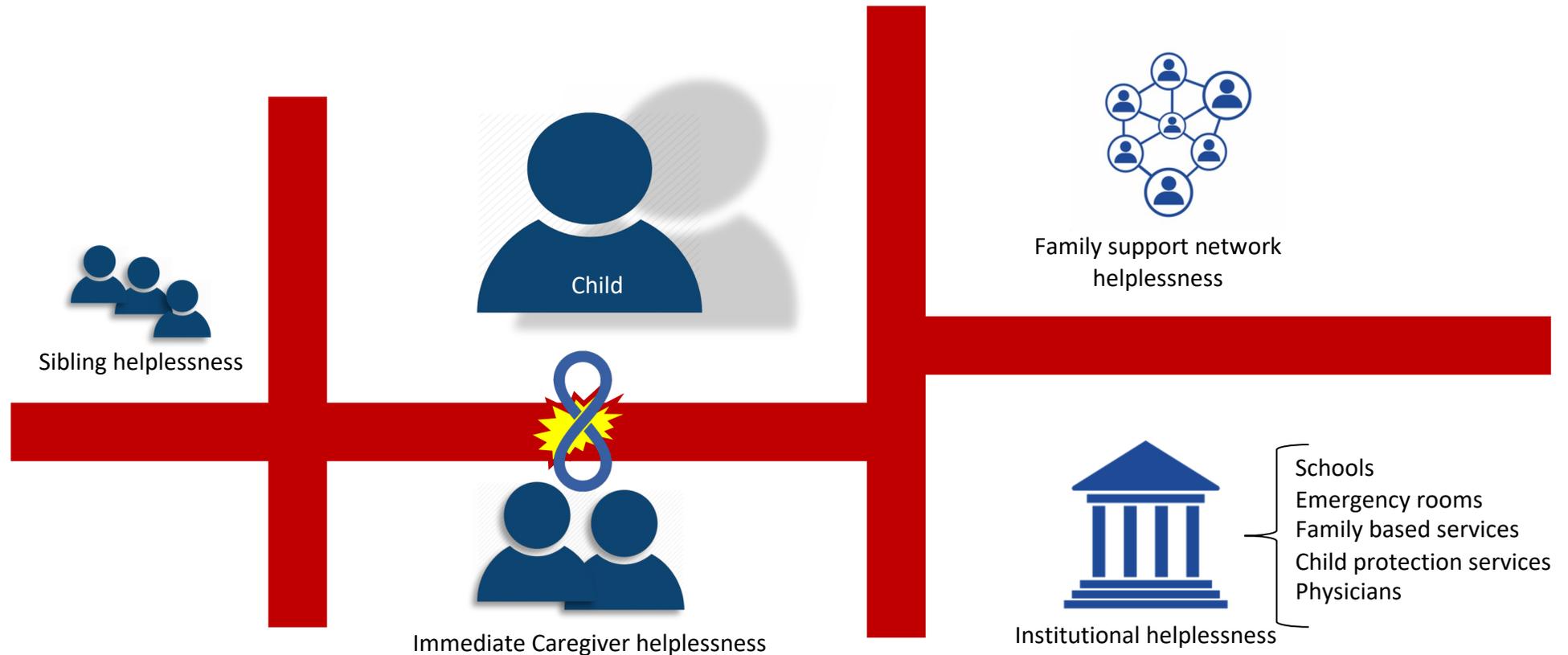
How parents collapse?

The interpersonal cycle of coercion

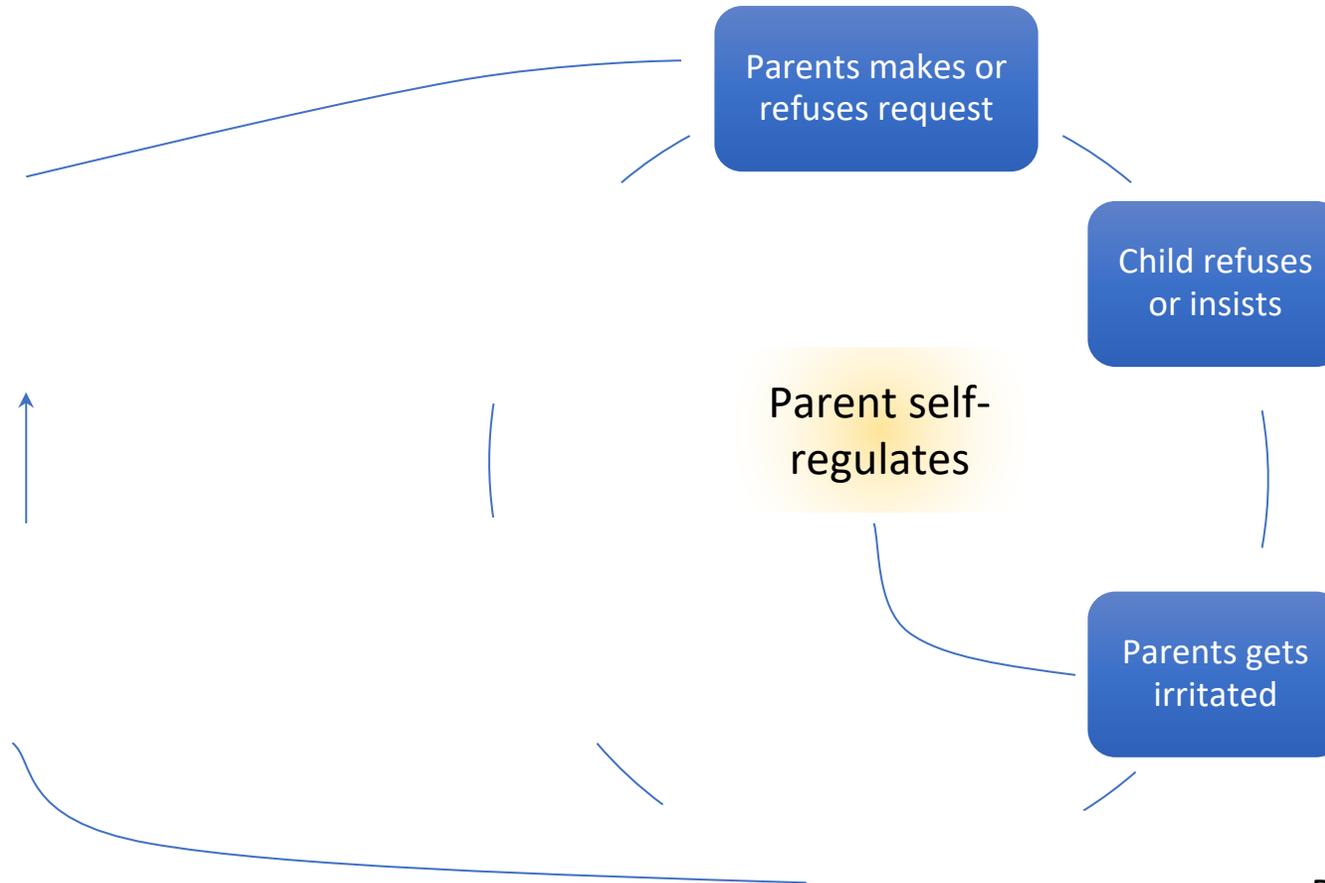


Patterson, Dishion, & Bank (1984).

When parents collapse, systems of care collapse



The opposite of collapse



Patterson, Dishion, & Bank (1984).

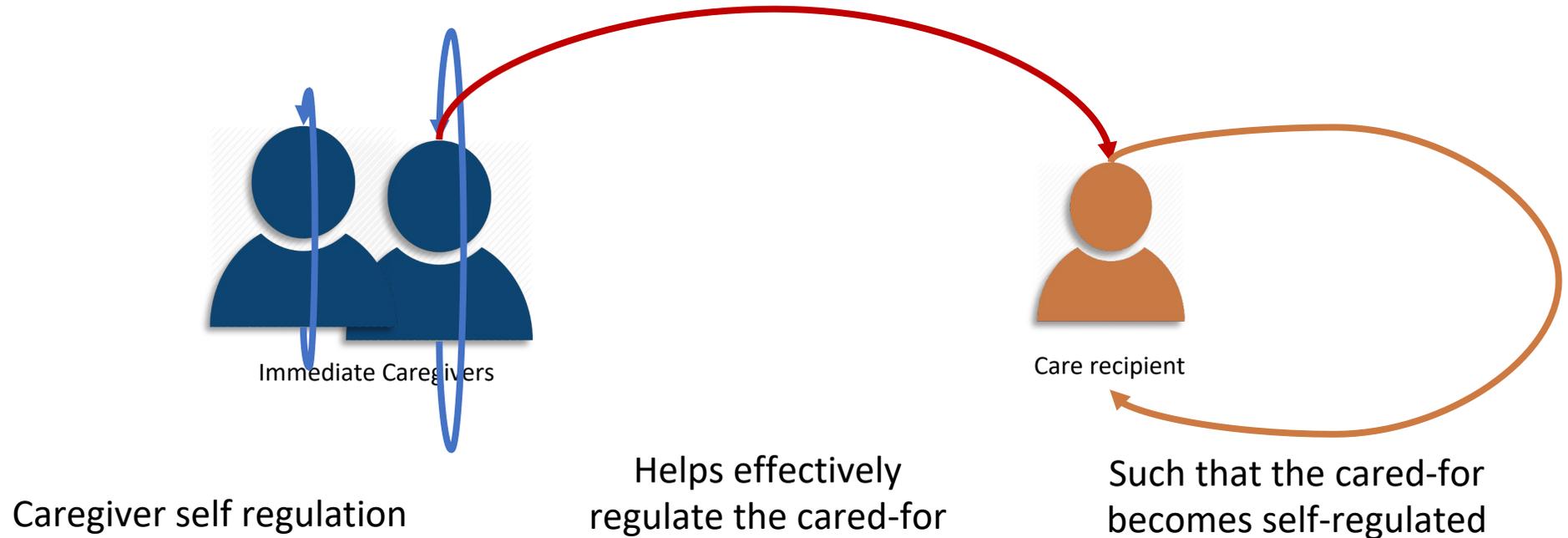
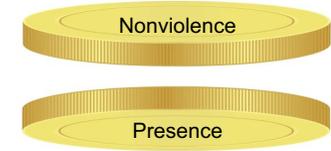
Presence: self regulation *is* the boundary

‘Presence’ is the ability to self regulate as a caregiver in a way which enables me to set effective rules for those I care for, such that they might ultimately become self-regulated.

*“Presence is the readiness of parents to **set themselves as boundaries** to the child’s behavior, and the concurrent experience of this parental readiness by the child.”*

(Omer, 2003).

Presence as a relational process

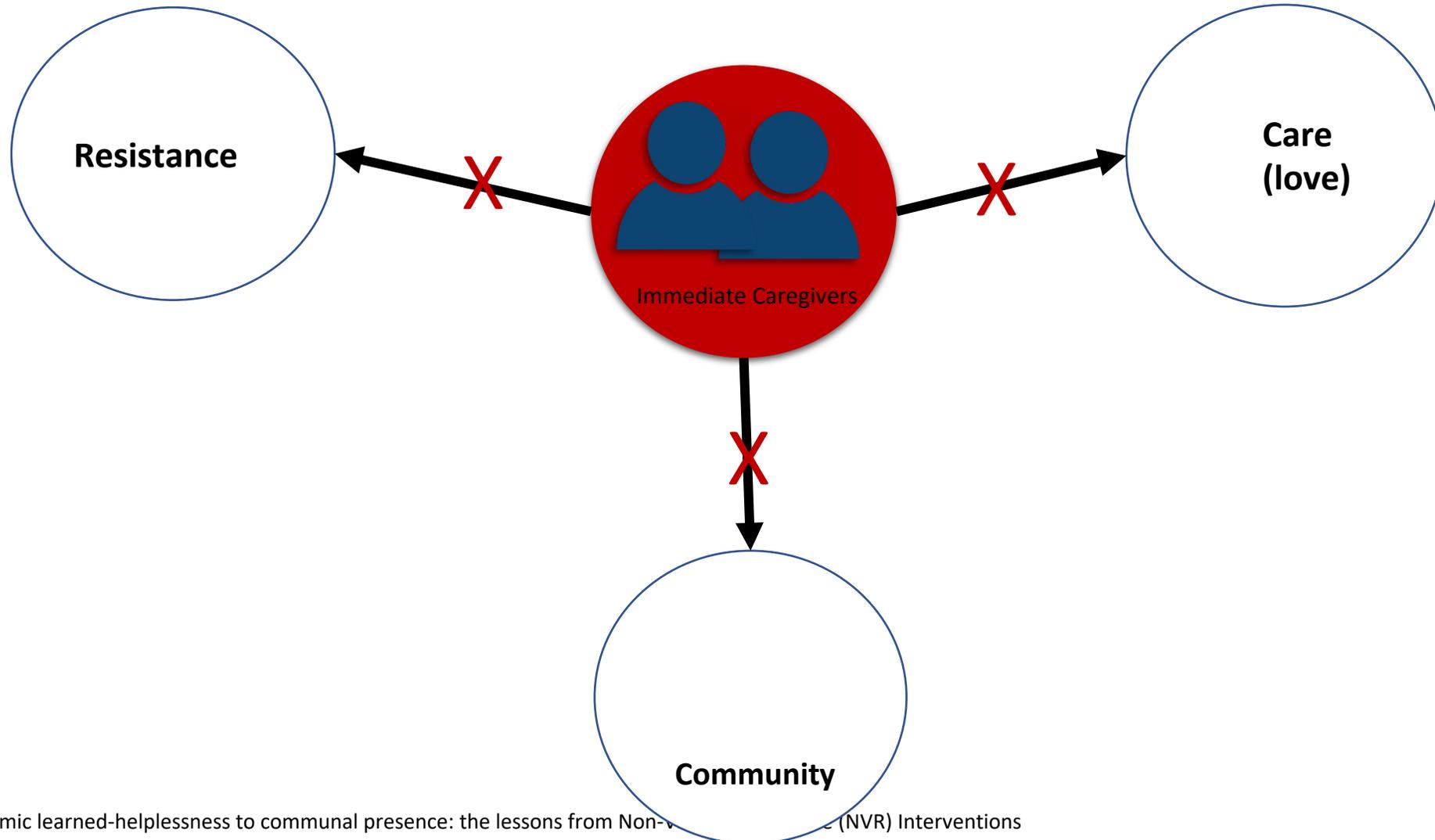


Caring presence must be NonViolently resistant

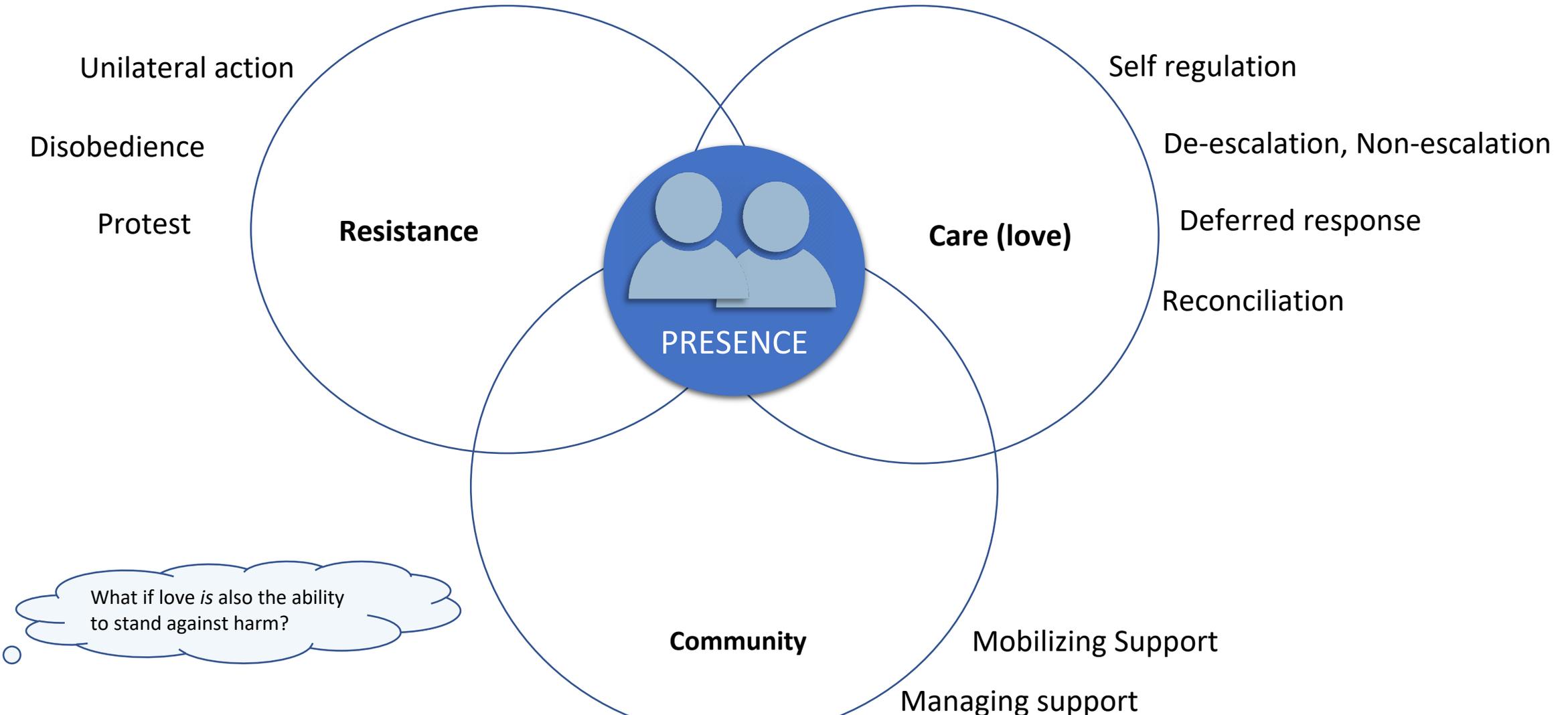


**“NonViolence is a movement to stand against harm
while preserving the dignity of all parties,
so that healing can take place”.**

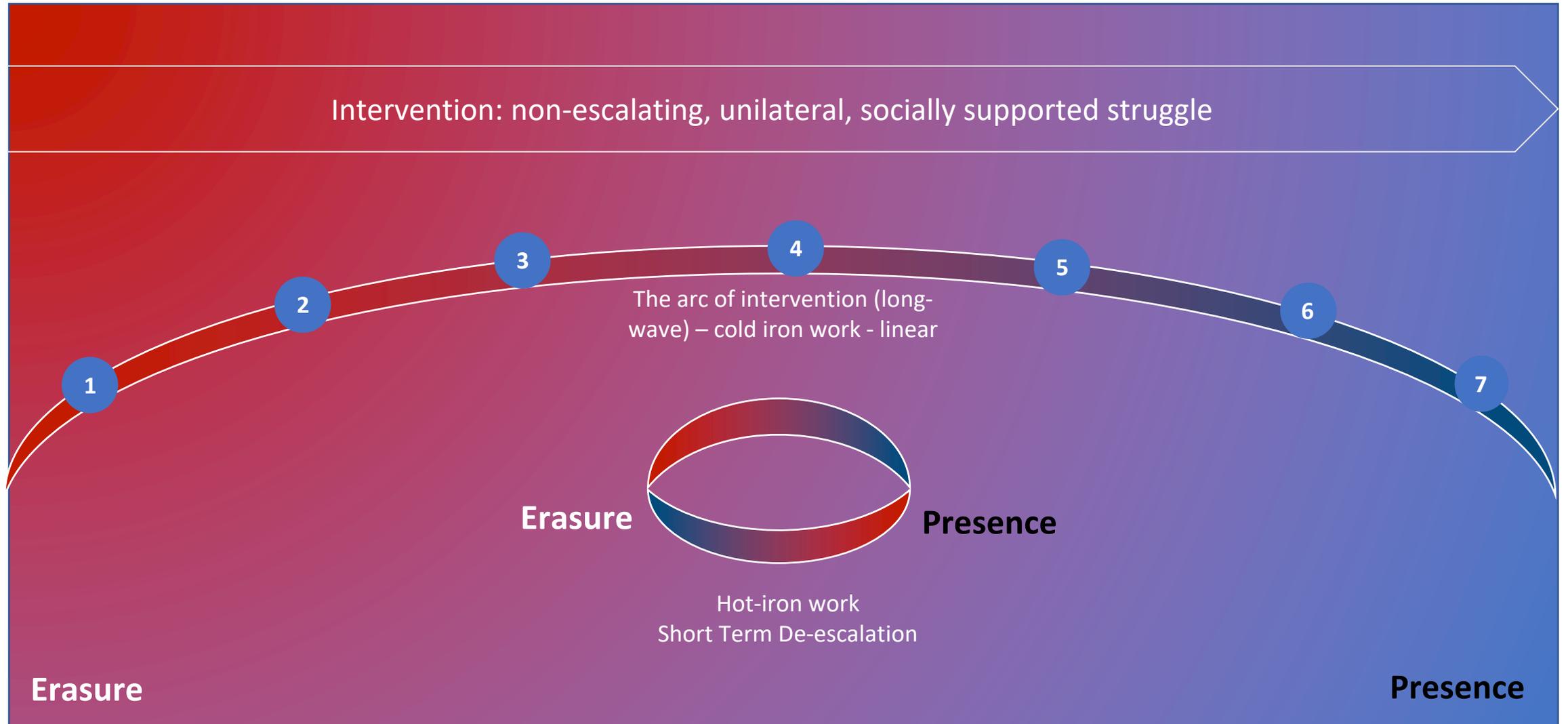
The benchmarks of Erasure



Presence: standing against harm, caringly, together



The NVR Journey



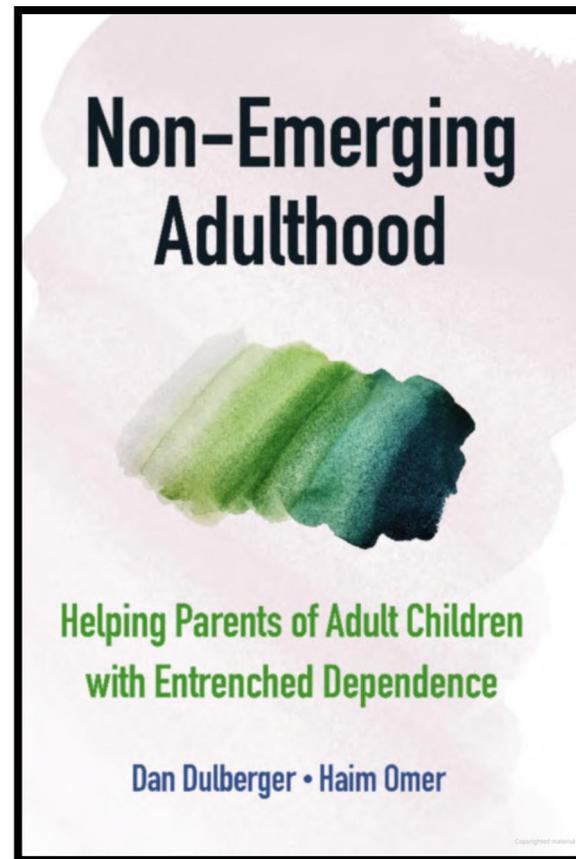
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Part 2: NVR and Entrenched Dependence

NVR for families of non-emerging adult children



“The father’s curse – the ungrateful son“

Jean Baptiste Greuze – 1777



“The father’s curse – the son punished”

Jean Baptiste Greuze, – 1777



“The Father Punished – 2023”

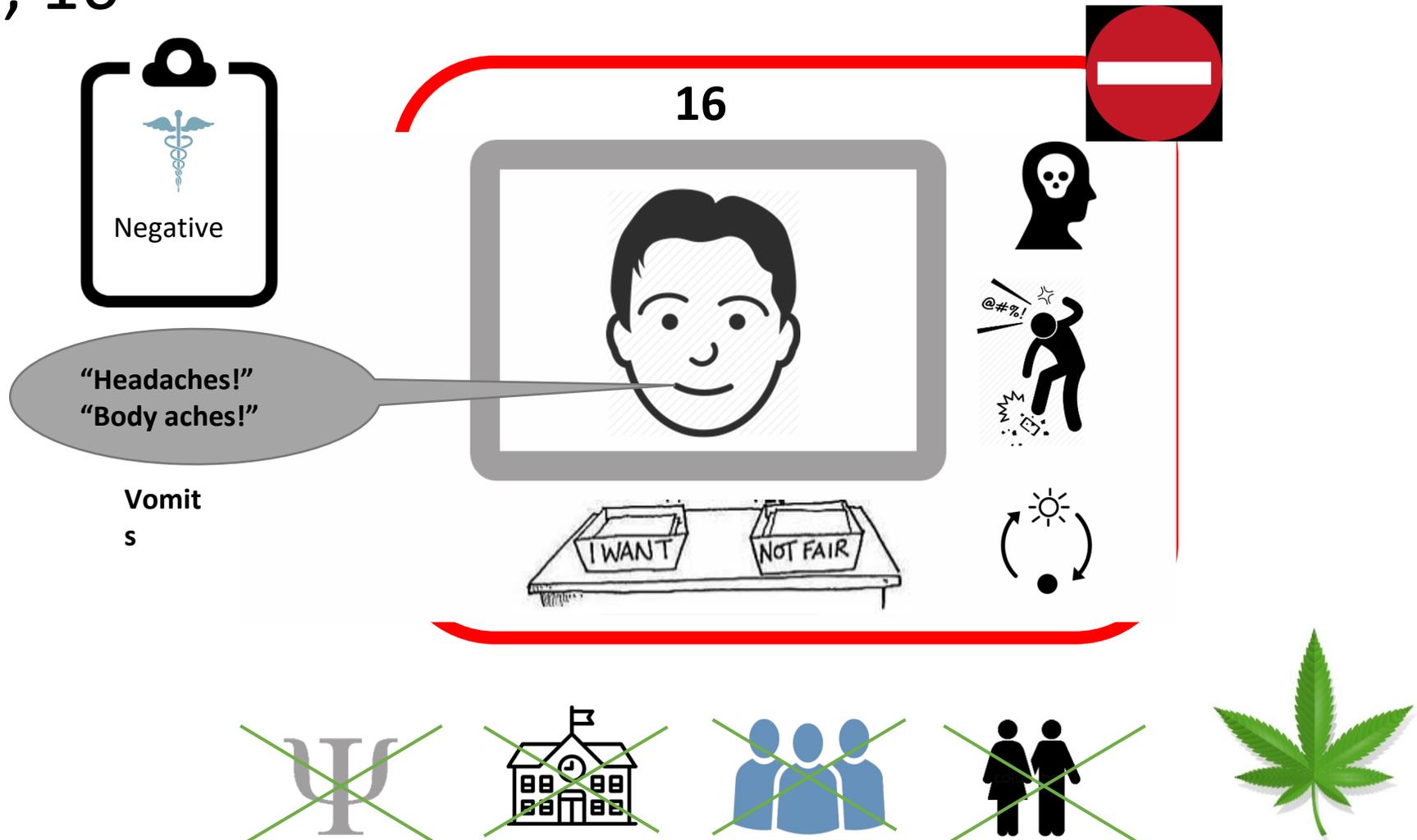


“The Father Punished – 2023”



Story of David

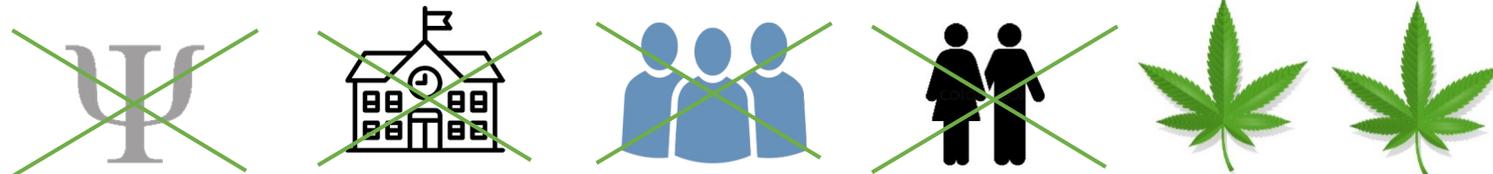
David, 16



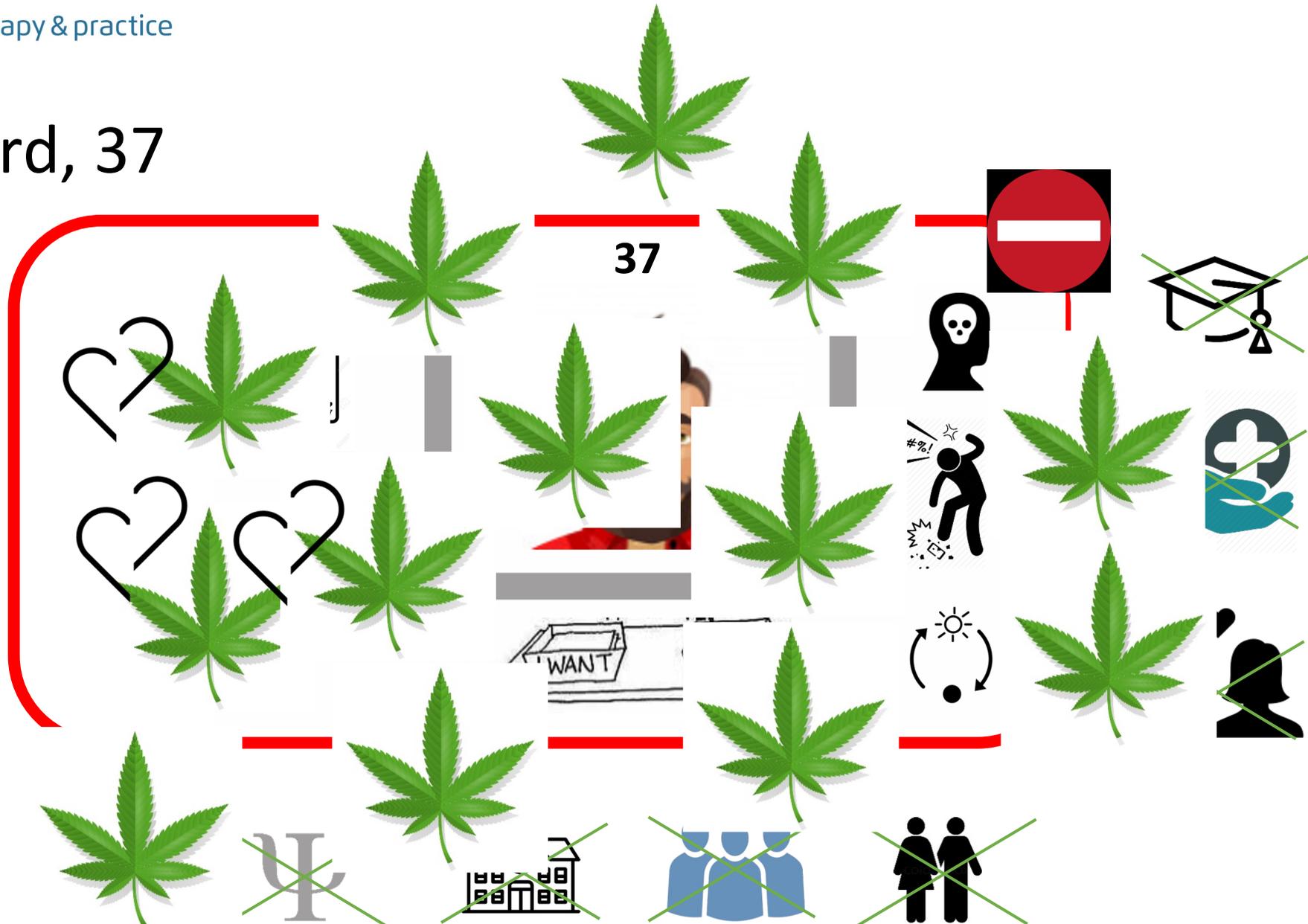
Martin, 27

27

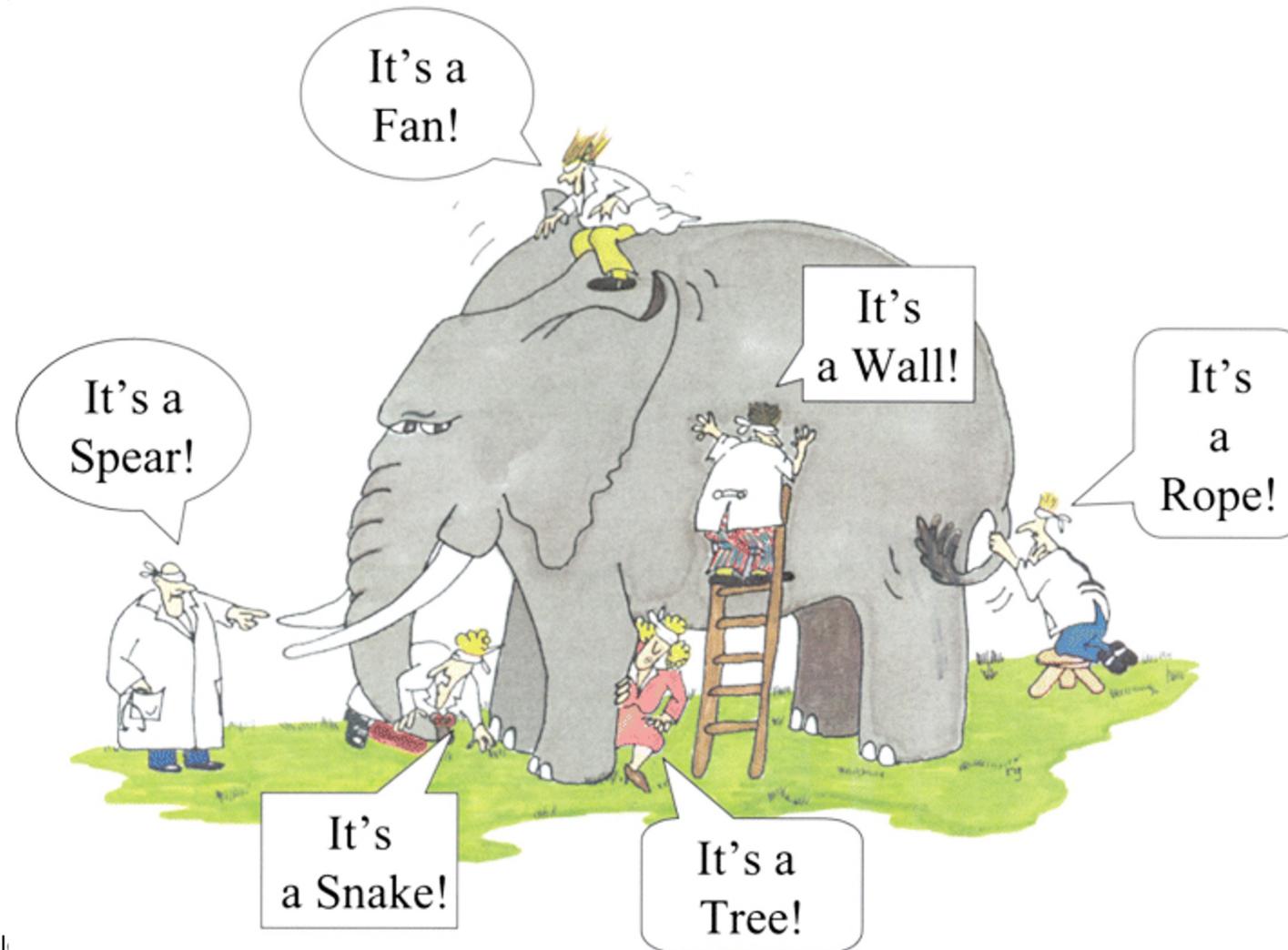
Icons: headphones, music note, play button, speaker, equalizer, square, bearded man's face, skull, person with stick, sun, 'I WANT' sign, 'NOT FAIR' sign, prohibition sign, graduation cap, hand holding cross, couple with heart.



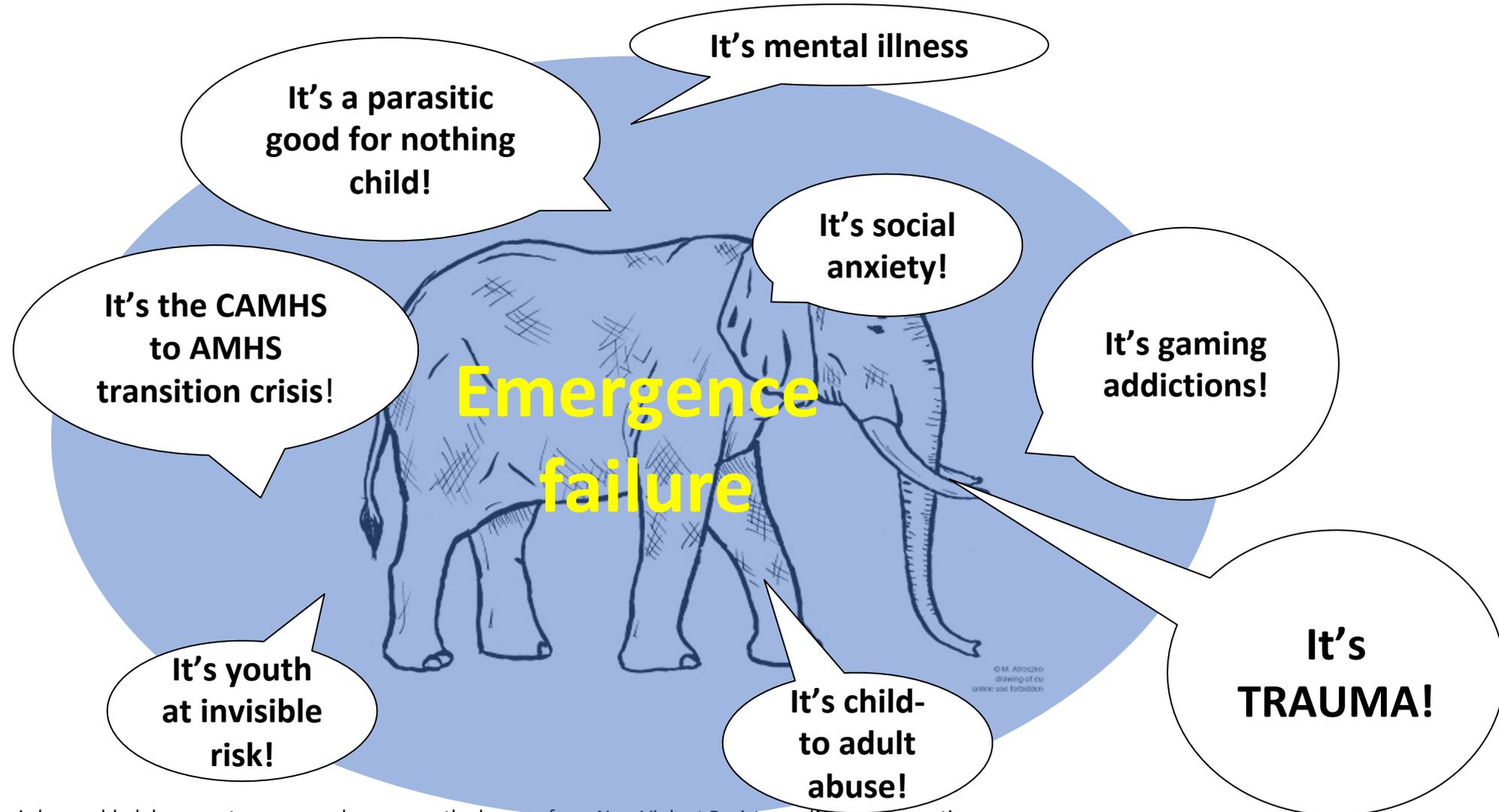
Richard, 37

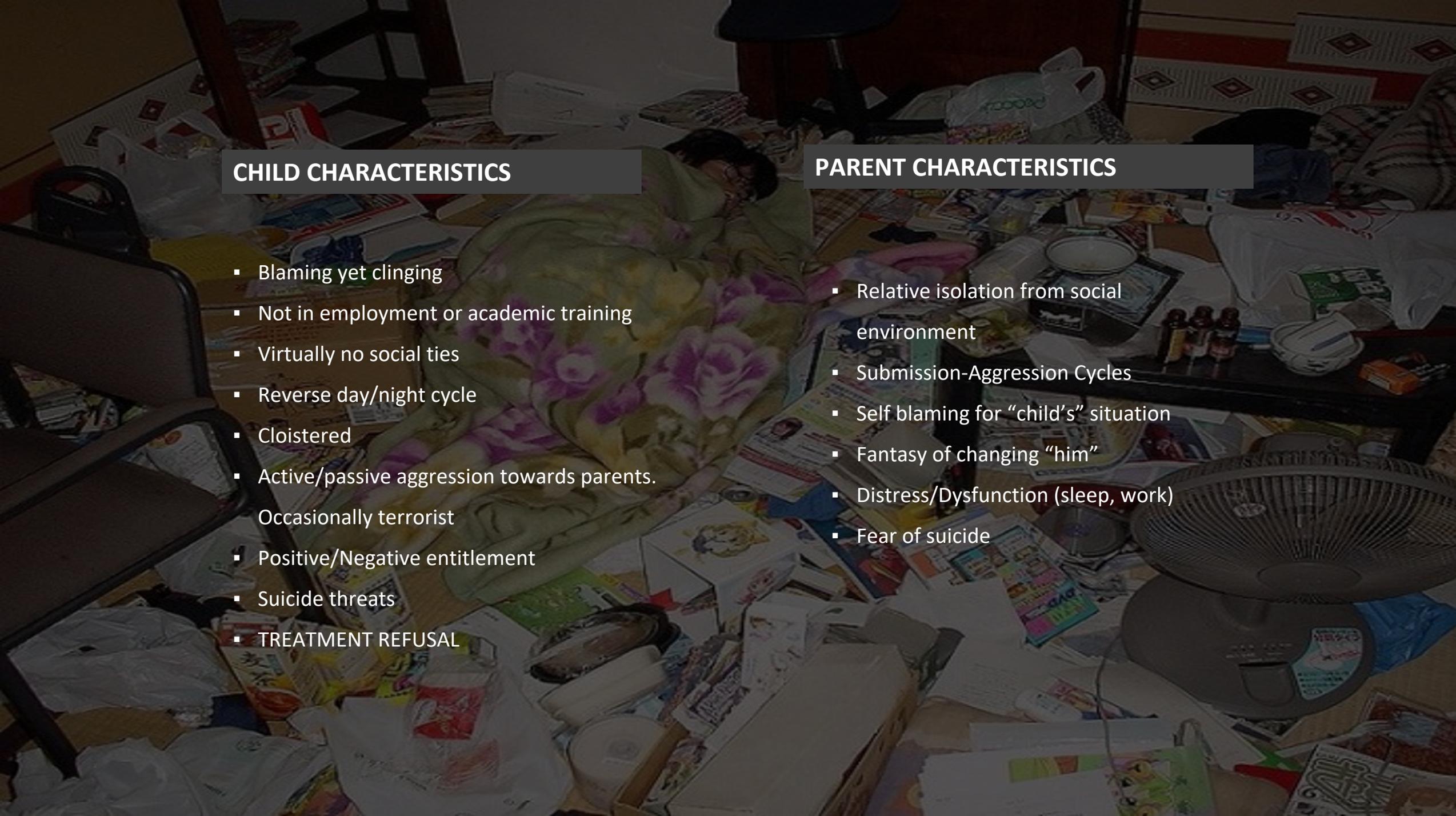


The six blind persons and the elephant



The elephant in the non-emerging adult's room



A photograph of a person lying in a bed in a cluttered room. The room is filled with papers, boxes, and other items on the floor. The person is covered with a patterned blanket. The image is dimly lit, and there are text overlays on the left and right sides.

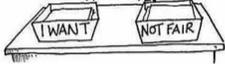
CHILD CHARACTERISTICS

- Blaming yet clinging
- Not in employment or academic training
- Virtually no social ties
- Reverse day/night cycle
- Cloistered
- Active/passive aggression towards parents.
- Occasionally terrorist
- Positive/Negative entitlement
- Suicide threats
- TREATMENT REFUSAL

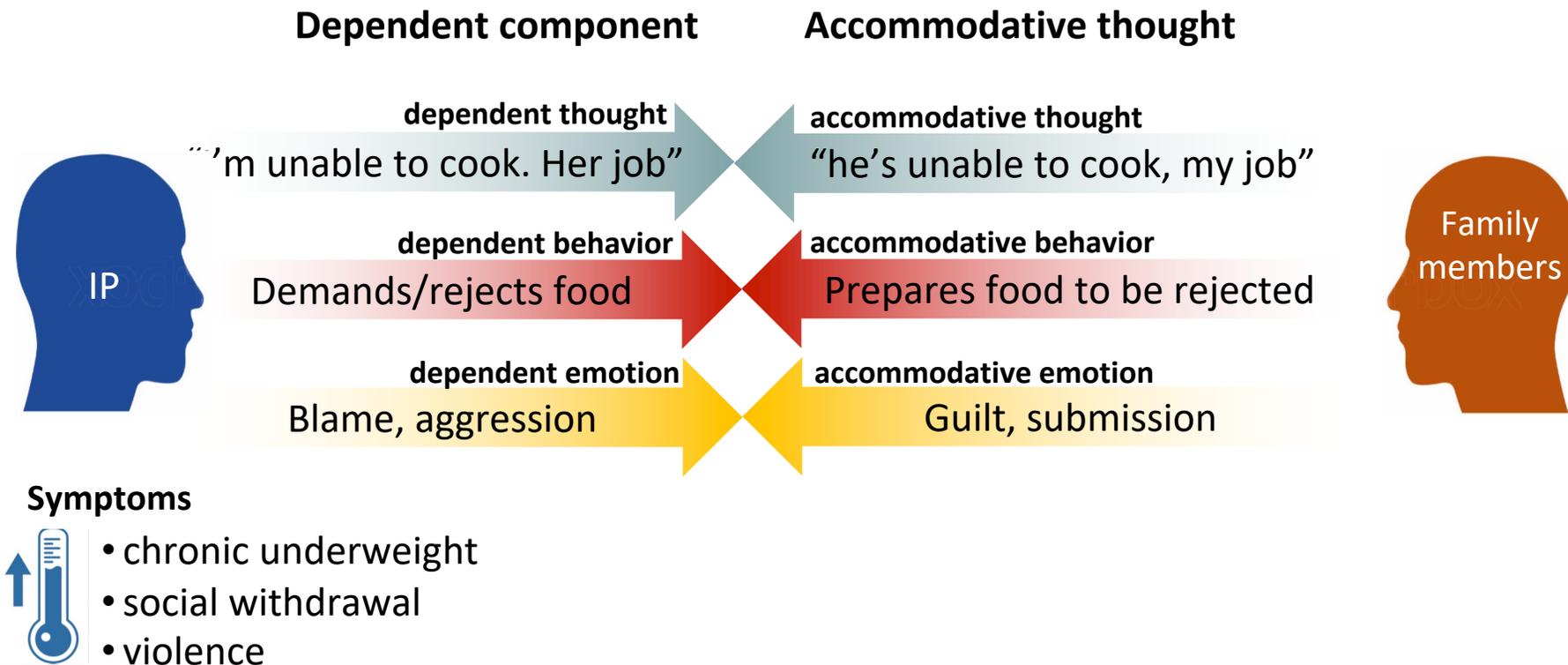
PARENT CHARACTERISTICS

- Relative isolation from social environment
- Submission-Aggression Cycles
- Self blaming for “child’s” situation
- Fantasy of changing “him”
- Distress/Dysfunction (sleep, work)
- Fear of suicide

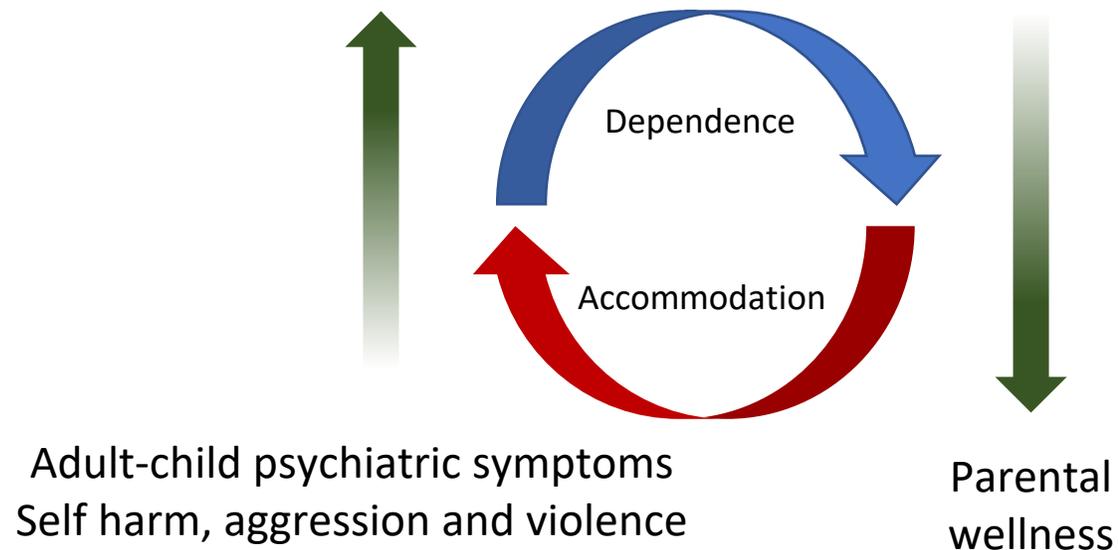
Accommodation

Dependent behavior

Explicit or implicit demands for money, goods or services
Demand for continuous reassurance
Aggression and victimization
Blaming
Use of parent as a go-between and moderator for communicating with the external world
Maintaining a paradoxical, "present yet alienated" attitude towards the parents: "I am here all the time but I will reduce contact to a minimum"

The dependence-accommodation pattern

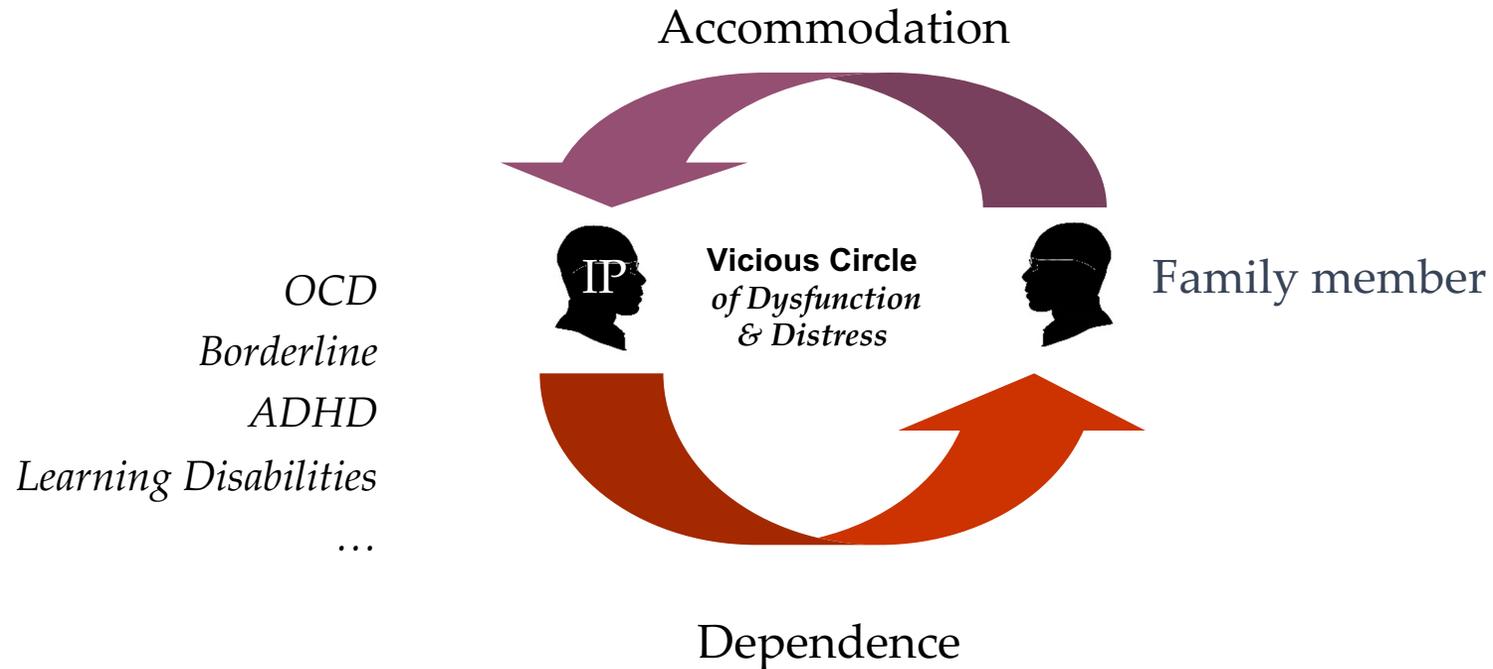


dependence-accommodation patterns converge into a *dependence accommodation system*



Entrenched (entitled) Dependence:

“chronic, systemic condition, exhibiting a dependent-accommodative relationship pattern which involves dysfunction and/or distress on part of at least one system member.”

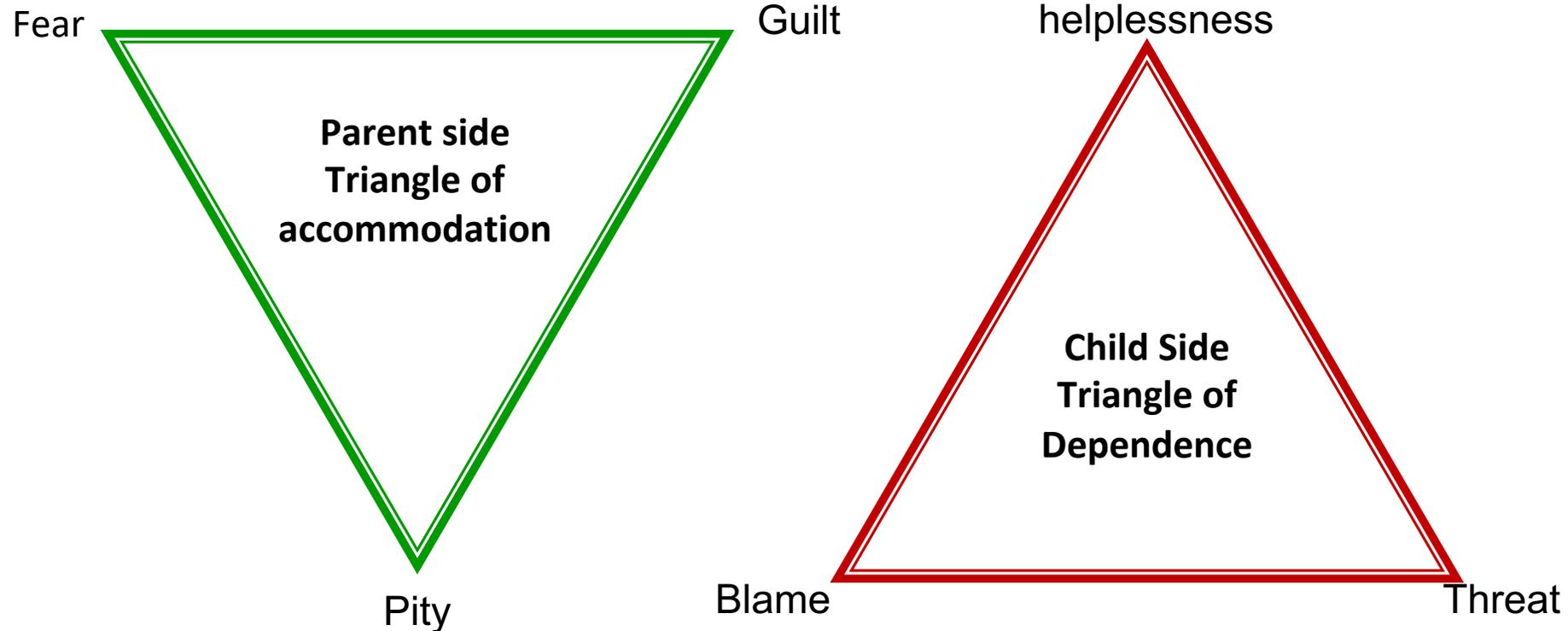


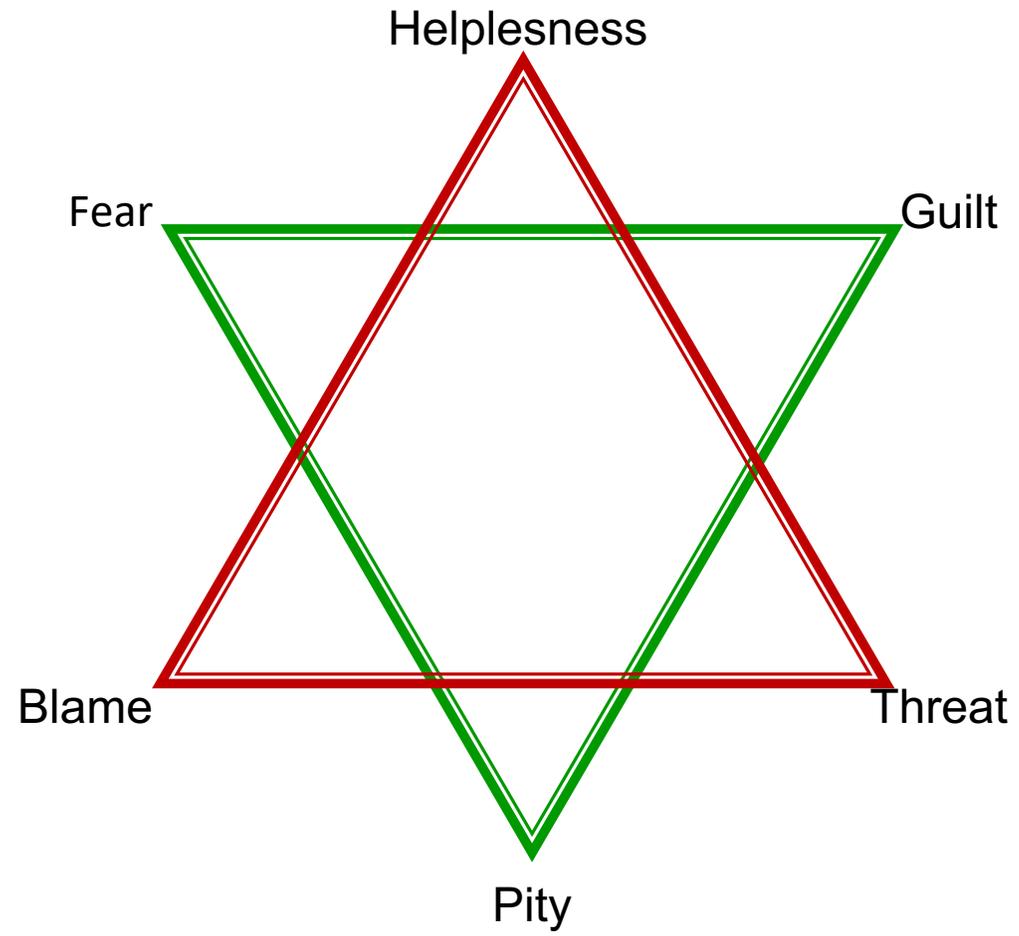
Distinct from DPD

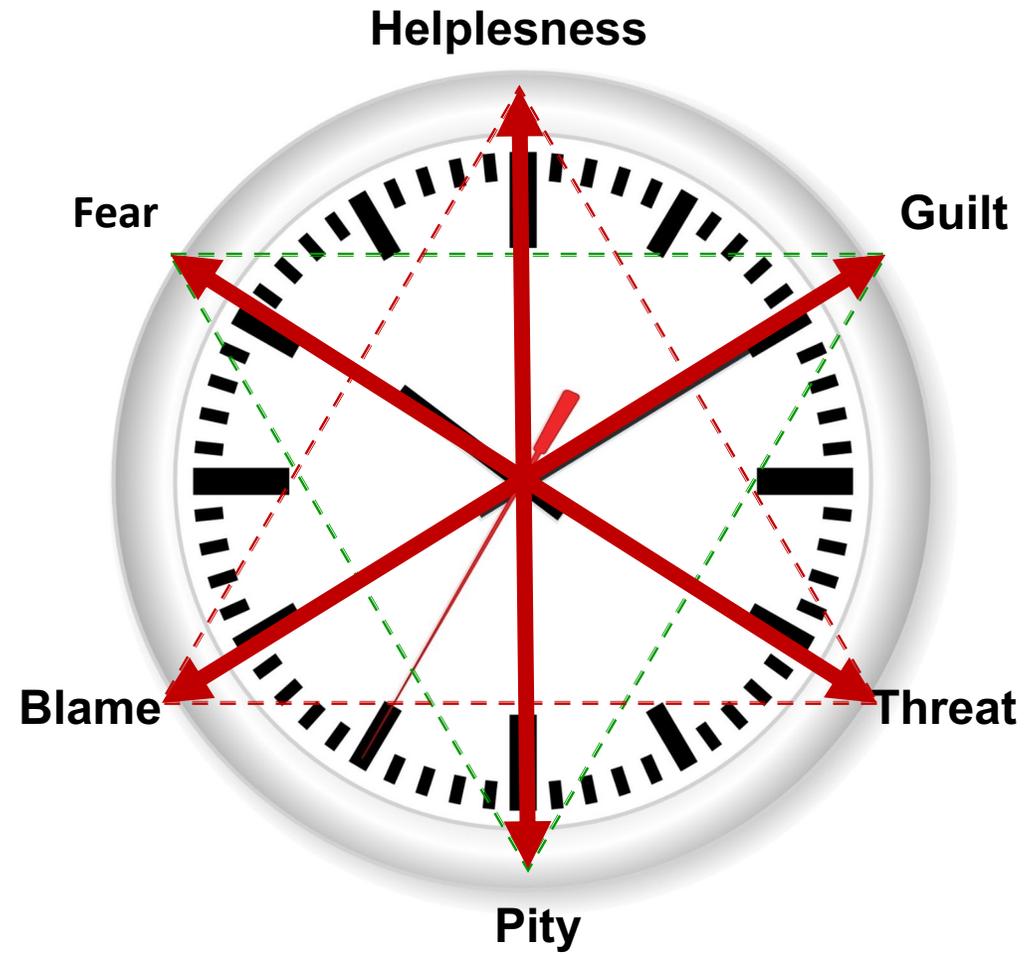
Distinct from simply living @ home w parents

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The dependence trap







Entrenched -Dependent children are INVISIBLE





From the
inside



From the
outside:

Deconstruct the shelter, not the child

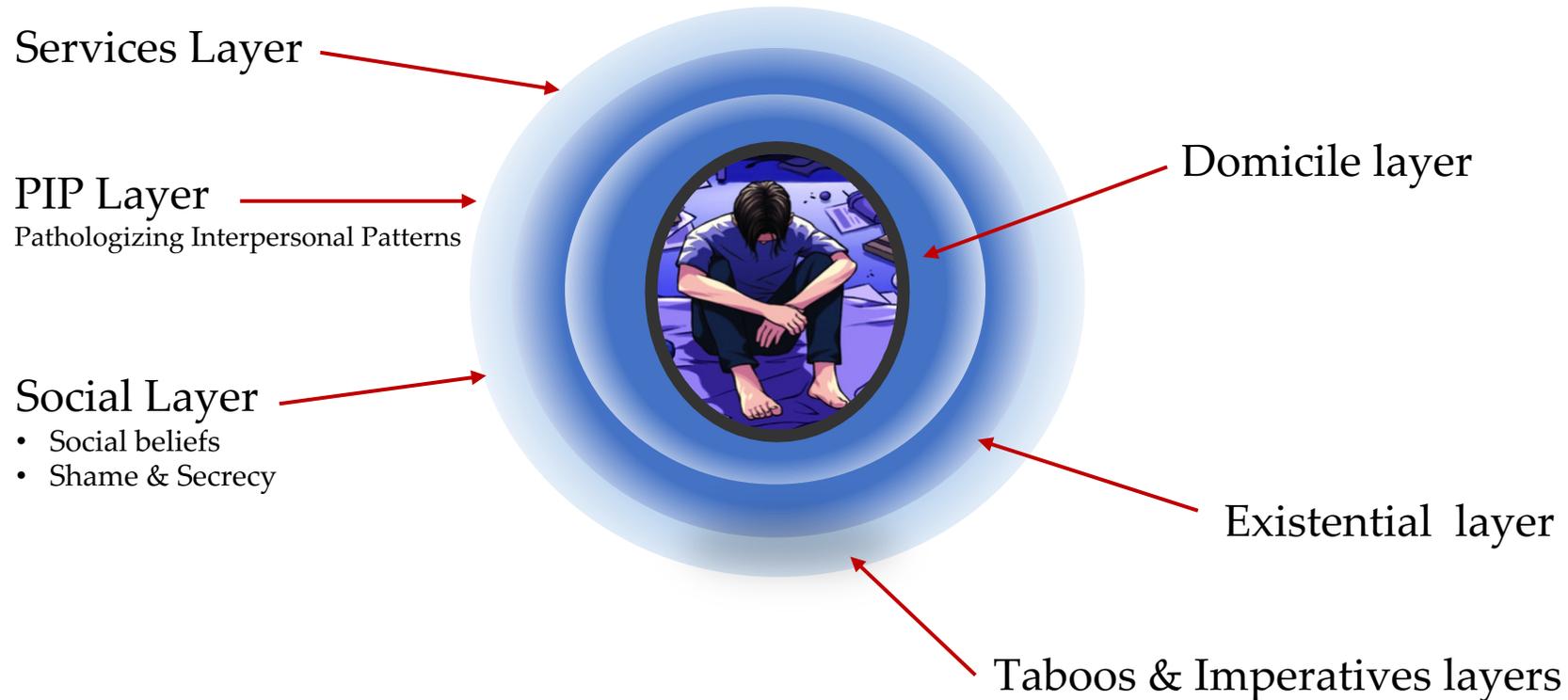
- “Degenerative shell”
- Parents think they are outside the den - looking in.
- In fact they are the central part of it
- The greatest challenge is motivating them to stop being that part

De-constructing the degenerative shell

=

“De-accommodation”

Shell layers



What would a program take to do this?

- Unilateral action
- Non escalatory
- Collaborative
- Constructive
- Interdisciplinary



Preparing the ground for de-accommodation

- Assessment of adult child's strengths and vulnerabilities
- Suicide and aggression risk evaluation
- Construction of optimal treatment plan – even if the child is not interested
- Gathering a network of support
- Helping parents transition from helplessness to first act of the caring struggle

NVR in 7 intervention steps

