"Change the pattern" – to co-create attachment in the parent group treatment Perspektiv

and some preliminary findings in pilot studies

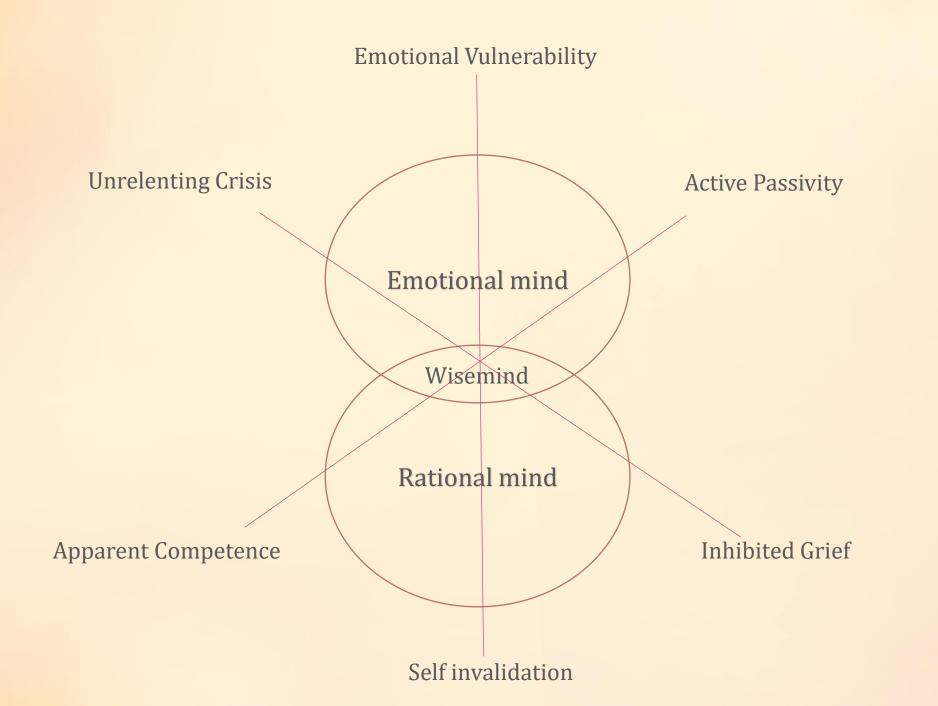
#### Presentation

- Bibbi Lindahl, leg psychologist, leg psychotherapist, Specialist in psychological treatment of children and youth
- Child and youth psychiatric reception, BUP since 2002ongoing
- Privat reception; Psykoterapikontoret, <u>www.psykoterapikontoret.se</u> since 2016-ongoing
- Mother of two, grandmother of two, bonus(foster)parent of two adult children and bonusgrandparent of one, so far.



#### Risk and resiliens –posttraumatic growth?

- Epigenetics a slow moving progress
- Rupture and repair –how?
- Resiliens the curage to change, sometimes ignore memories and do it anyway
- To look for the positives without overlooking difficulties, dialectical thinking
- Linehan pervasive shame and judmental thinking about oneself, apparent competence, self-invalidation



Dialectical dilemmas of Emotionally Instable Personalities

#### To change patterns you need to see them first

- Traumatized children often become adults who have a lack of bodily experiences of being cared for
- The body keeps the score is never more true than when you become a parent
- The way you nurture, carry & rock your baby comes "natural" to us, ie natural the way you where raised.

The body keeps the score, Bessel van der Kolk



#### Parents own attachment trauma – FR behaviors

- Some parents have a basic working model of relationships consisting of victims and perpetraitor –FR behaviors
- They can appear very competent on the surface
- The child's attachment behaviors act as a trauma-conditioned stimulus
- The reaction can then be to try to escape, either by identifying with the position of the perpetrator and acting hostile or the victim and becoming helpless – in both cases becoming psychologically inavailable for the childs needs
- How do we help them change the pattern of epigenetics?

#### Some treatment methods that initially inspired us

- DBT Family connections (Fruzetti)
- Theraplay (Jernberg&Booth)
- CFT (Gilbert)
- Affect Focused Therapy (McCullough)
- Circle of Security (Powell)
- Mentalizationbased playtherapy
- EMDR (Shapiro)
- MBT (Fonagy)

# Clinical experience that formed the basis of Perspektiv 2014

- A preparatory parent contact was often needed before interaction treatment like Therpaly could be started with children and parents.
- Many parents in BUP have great difficulties of their own with both mentalisation and interaction based on their own history and experiences of attachment.
- Parents often need to train their ability to mentalize both in terms of their own inner self and the child's and may often need to work on their own affect regulation before they can help their child.
- The children may also have pervasive trauma or functional difficulties that caregivers need to have extra understanding of and knowledge about in order to understand what the children's needs are.
- We didn't think that existing parent training gave these parents the skills they needed and the need was great, many families waiting in long queues.

## Children with attachment disorders often have traumatized parents

- Both psychoeducation, skills training and psychotherapy
- Crittenden: traumatized children often have difficulties with episodic memory, use semantic memory instead
- The parent may not show symtoms aside from when their attachment/care-system gets triggered, FR-behavior
- The parents often had a lack of supporting network



## The Parent Treatment Perspektiv

-For parents of children with high-intensity emotions

**Theoretical frameworks** 

Interpersonal neurobiology;

Attachment and affect regulation

*Bowlby, Main & Hesse, van der Kolk, Hart, Schore, Hughes, Lyons-Ruth* etc.

Affects and affective neuroscience

Tomkins, Panksepp, Stern, Porges, Siegel

Mentalization

Fonagy, Bateman, Holmes

## D. Siegel & B. Perry

- Interpersonal Neurobiology (Siegel 1999, 2015)
- NMT Neurosequential method of therapy (Perry 2008)
- It takes less time, effort, and repetition to organize neural networks that are still in development than to reorganize networks that are already fully developed
- The brainstem develops during the fetal stage and grows most during the first year of life. Developing this part of the brain after the first year requires intense experiences that are repeated many times

#### Treatment group

Parents who have children (up to 12 years old) with;

- high-intensity emotions and based on this tend to end up in situations of;
- serious acting out or
- self-destructive and/or inhibited behavior
- This to such an extent that it is a major problem for themselves and their immediate surroundings.

## The purpose of Perspektiv

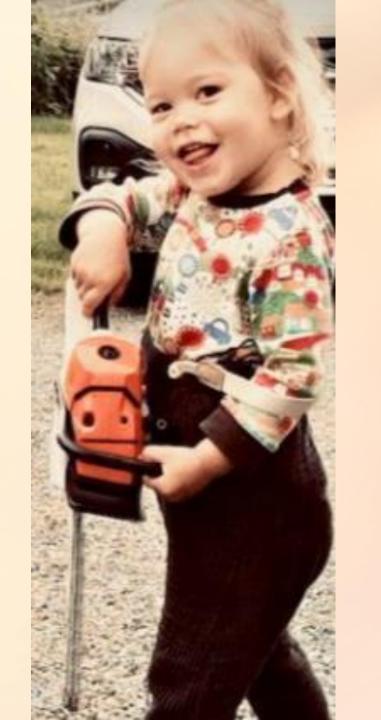
The training aims to give parents more tools to:

... better understand the child's behaviour and feelings

... be able to help the child manage their emotions

... manage their own emotional reactions

... create a supportive network with other parents who have similar experiences



### A therapeutic stance

Main focus on a therapeutic stance as a group leader, try to:

- Be a role model for parenting with the parent
- Provide a safe base for parents' exploration of their own inner selves and how they can understand their children's behaviors.
- Empathetically reflect, validate and regulate the emotions that appear in the group.
- Help the parents to put into words what they are experiencing. The parents themselves may not always have words for what they are experiencing, and need the help of the group leaders to put into validating words what they are trying to express.
- A non-judgmental approach that permeates the treatment



## The group leader as a model

- The group leader's role in Perspektiv presupposes that they themselves have a good mentalization ability and we recommend that you have undergone some psychotherapeutic training to have received extra training in strengthening that ability, for example by having completed step 1 in training to become a psychotherapist.
- The treatment the group leaders give becomes a model for the parents to develop their own mentalization skills.
- Invite the parents to allow mistakes by using your own as examples
- Use dialectical thinking, both accepting yourself as parent AND the need for change



How can you hold your own strong emotions?



# Trust-building strategies

### Actively create security by...

- Before the group starts, do preparatory work in order to begin the process towards a sense of security in the group. We call the parents and greet them, inform them about time and place and the opportunity to come a little in advance if needed.
- Be on site on time about 20-30 minutes before the group starts and e.g. make coffee for the parents who want to "land" before the group starts.
- Reassure the parents that you can be who you are in the group, with all your quirks and shortcomings, perhaps a concrete need to stand up and move or a less clear need to be validated in your feelings.
- When reviewing the homework assignments, remember that there is no right answer, it is the reflections on one's own actions that are important, i.e. the practice of mentalizing ability. The group leaders need to support the parents in this and understand and validate their attempts both in terms of action and reflection. Remember that this in itself provides a parallel process to how we want parents to treat their children.

## **Trust-building techniques**

- Be genuine and use simple language
- Show respect
- Be transparent, no secret motives
- Admit mistakes, appologize & be humble
- Show loyalty

- Use feedback and develop, trying to do better
- Talk about unspeakables
- Follow through on committments
- Take & give responsibility
- Give faith

#### **Content and arrangment**

- 15 + 2 sessions of two hours each
- Psychoeducation on attachment, affect regulation and conscious presence.
- Homework assignments and exercises in the room to increase mentalization, affect regulation and relationship skills.
- The homework assignments are divided into two parts in the sense that one half of the assignment consists of the parent being given the task of reflecting on themselves, while the other half focuses on the parent reflecting on the same theme from their child's perspective.
- The first hour of each session is spent going through the homework from the previous week and after a short coffee break, the second hour is spent going through the theme of next week's homework.

## Psychoeducation about;

- Biosocial theory
- Sensory integration
- Attachment, security and epigenetics
- Windom of Tolerance
- Basic emotional needs
- Affectregulation and repair
- Moments of meeting



## Lesson content Perspektiv

- Introduction
- Being here and now -together
- Development of relationship patterns and emotional life
- The Basics of Meeting the Emotional Needs of the Child
- Our basic emotions
- Negative emotions
- Positive emotions
- Reduce vulnerability and increase positive emotions
- Challenge your way of thinking and acting
- Validation Confirming someone's experiences
- Self-Validation To Validate Your Own Experiences
- Prioritization in relationships Goals, Relationship, Self-respect
- The three-circle model
- Dealing with problems and changing behaviors
- Practice acceptance and thinking in color instead of black-and-white
- Follow-up after 1 month and after 6 months

Enhancing emotions by use of pictures and videos as well as practicing in the group and real life homework





more funny photos @ www.funnywallphotos.com

Hysterical and contagious laughing boy in music class (youtube.com)

## Central issues in homework, practice

- What can make it difficult for us?
- Practice being here and now, non-judgmentally with your child
- What do you take with you from your parents' way of being towards you as a child?
- What areas do you need to work on in terms of Structure, Commitment, Care, Challenge and Playfulness?
- 3 x Identify feelings in yourself and your child
- Reduce emotional vulnerability (build stability) & increase positive emotions
- Exposure to difficult emotions that no longer fit
- 2 x Practice Validation of your child and selfvalidation
- Prioritize what is important in specific situations; own goals/good relationship/self-respect?
- The three-circle model, what do your and your children's circles look like?
- Prepare for behavior change, problemsolve
- Acceptance and dialectics



## Some recurring themes in every session

- Mindfulness
- Validation
- Dialectical thinking
- Focus on expressing emotions from both parent's & child's perspective
- Open-minded, favorable interpretation

## Parallel processes in addition to the specific skills material

- High level of validation during initial sessions
- "Double scoop"-focus
- Challenge and connect with parents own history after building a climate of security
- Group leaders as a model for parenting
- Sharing strong emotions in the moment that help restructure neural connections – stay with the parent! Provide experiences of not being left alone when flooded with strong emotions

## Parallel processes

- Build experiences of trust and care
- Increased focus on the process of change during later sessions and development of mentalization skills, -more words for inner experiences and a feeling of contact with one's own body, how do I as a parent relate to my child?



#### **Evaluation of** *Perspektiv*

- Lindahl, B., M. Waltman (2015, 2020) "Although it is not visible" Mentalisation processes during the parent group treatment Perspective. Master's thesis, Psychotherapy Programme, Umeå University, Department of Clinical Sciences.
- Norlander, J. & Falck, A. (2015) "You see as if it were with their eyes" Experiences of parent group therapy Perspective, Degree thesis, Psychotherapist Programme, Children and Youth, Umeå University

## **Preliminary results**

- The parents could describe that they had consistently experienced a positive group climate during *Perspektiv*, despite the fact that several parents described that they themselves had come in with a high level of perceived stress based on their current life situation, which meant that they e.g. reacted strongly to noise and had difficulty staying focused.
- Sharing one's experiences and experiences has in itself been perceived as very positive. The power of sharing and feeling understood has been experienced as shame-relieving by the parents.
- The parents could describe that they have been able to see themselves as parents in a new way, both by listening to the other parents' stories have helped them to see themselves as parents, but also by having them reflected on their own upbringing and background

#### Quotes from our parents

- "yes, you kind of look with their eyes how would I want to be comforted if I was so sad, or how would I want to be told, or – if I had broken that vase how would I feel, and kind of just stand and look up at my mom and just, oh shit, that wasn't good, yes, but will it get better then because I'm just standing there screaming like crazy, or should I go there and say that yes, but hey, I saw that it was an accident, we can help each other clean this up, and we'll have to buy a new one, or something."
- "(...) and then the bus turns so she fell towards me, and I took the opportunity and I just took her, then she lay down in my lap, and from being a situation that could have been really rowdy really, to sit in your seat with a child that is acting out and you feel ashamed, it became that she lay down in your lap, she lay down and I stroked her and we took the opportunity to talk and looked at the moon outside on the way home, So that it was like, 15 minutes of a positive time of something that is usually consumed just waiting (...) yes it was one of those moments."

#### Some more

- "To be able to share and feel that you are not alone and struggling with different things, that is a power and strength!" (Falck & Norlander, 2015)
- "...What's positive is that she's starting to express what she feels, she's just been angry, but now there's a lot going on so I guess it's a lot of sitting and talking to each other..." (Lindahl & Waltman, 2015)
- "I think I now have better conditions to see my child's needs and adapt reactions and solutions accordingly" (BUP Farsta, 2024)

#### And a few more...

- "No, but the outburst may continue even though it is not visible, just this quiet thing that is happening, that is really the worst thing because the visible, the visible outburst when they scream is really the best, because there you can do something" (session 12)
- "... I can kind of see it, that is, my upbringing, what I've never learned to put into words, that is, feelings, thoughts and express it no, it's no wonder that it crashes. no.. I just feel like sitting like this and talking about it, it's a very big step... To try to express how you feel... That's probably the biggest obstacle, to express, say what I want [...] well, I'm working on it, to be more clear... and towards the children... And this thing that you say, that when you can't take it anymore, not to go into a conflict, I don't know why it's so hard." (Session 9)

### **Summary of results**

There was a clear tendency towards increased reflection on one's own inner self, one's own influence over the child's mental state and an increased awareness of one's own contribution to the parent-child relationship. The parents explicitly express the importance of mentalization processes and pay attention to the fact that they are doing it towards the end of the treatment.

The parents were initially somewhat more inclined to talk about their own inner selves in different ways, and also about their own upbringing, and then have more focus on how you as a parent contribute to your child's mental state and in later sessions increase the statements that concern the child's inner state.

At the same time, the amount of behavioral descriptions decreased in the later sessions.

#### Future research

Professor Claudia Lampic, who heads the clinical profile group at Umeå University's Psychological Institution, has put together a research group and applyed for planning grants for an upcoming national research study

The idea is that it will be a co-creative project together with active clinics





#### Perspektiv, workbook and manual



https://www.perspektivonline.com/

Your own oxygenmask first



Window of Tolerance



### Certificationprocess

- 3 days training, incl. reading of manual and workbook
- A completed parent group with Perspective
- Two follow-up sessions with guidance;
- Session 1 method consultation
- Session 2 method consultation + knowledge test with a focus on integrating theory and practice
- Course certificates are sent when the criteria above is met

### Where Perspektiv is used

- BUP Västernorrlands Region, since 2014
- BUP Umeå, since 2015-2020, though no longer in BUP
- BUP Farsta, Stockholm, since 2023
- BUP Jönköpings Region med Nässjö, Jönköping & Värnamo, start up autumn -24

• Interest shown from BUP in Kalmar and Dalarna

• A short variant of *Perspektiv* is also used in Västerbotten in FBHV

## Thanks for listening!